



Transformation and Improvement Overview and Scrutiny Committee 9th February 2026

Item

Public



Q3 2024/25 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 third quarter of the 2025/26 financial year (October to December 2025). Performance is reported on an exception basis, where performance may not be meeting targets.
- 2.3. The interactive [The Shropshire Plan Performance Dashboard](#) 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.



2.4. The Corporate Plan is undergoing its refresh and the plan for 2025/26-2026/27 was 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.

2.5. This Performance Report complements the Financial Outturn 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

2.6. In Quarter 3 of 2025/26, a total of 36 Key Performance Indicators (KPIs) have been updated in [The Shropshire Plan Performance Dashboard](#). 7 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 29 newly reported KPIs with targets:

- 69% (20 KPIs) are above their target (green).
- 3% (1 KPI) of indicators were similar to their target (amber).
- **28% (8 KPIs) are below their target and are showing as exceptions (red).** The reasons for this are reported in the [Additional Information section](#) of this report.

2.7. **Healthy People:** We continue to experience a significant number of requests for assessments for education, health and care plans for children with special educational needs and disabilities. Despite creating specialist teams and recruiting permanent staff, difficulty to achieve timeliness targets are due to factors which

include, late advice for assessment being available, increased complexity of cases, and insufficient resource to meet statutory timescales. The number of children overweight and obese in Shropshire continues to increase, with 1 in 4 reception aged children, and 1 in 3 Year 6 aged children overweight or obese. Support from the Early Help Team and timely delivery of targeted interventions remains high among our families this quarter, with a sustained high rate of closures preventing escalation of needs and future crisis. We are now proudly completing majority of children's social care assessments within 45 days, better than the national rate and among our statistical neighbours. We continue to achieve a high rate of stability of placements for our looked after children, remaining above the national and statistical neighbour figures and ensuring these children enjoy a stable and settled homelife to support them to achieve the best possible outcomes. We also continue to maintain contact with majority of our care leavers to provide ongoing support and guidance.

Modified	Indicator Name	Latest	Shropshire	Target	On Target?	Indicator Trend
14/01/2026	(NEW) HP7 - C09b- Year 6: Prevalence of overweight (including obesity)	2024/25	34.5%	31%	🚩	
14/01/2026	(NEW) HP6 - C09a- Reception: Prevalence of overweight (including obesity)	2024/25	24.8%	21%	🚩	
14/01/2026	(NEW) HP4 - Measles, Mumps Rubella for two doses (5 year old) - PHE DC04c	2024/25	90.3%	95%	⚠️	
22/01/2026	(NEW) HP36 - Rate of people Killed or Seriously Injured (KSI) on our roads (rolling 3-year average)	Dec-25	120	-	—	
20/01/2026	(NEW) HP31 - % of Educational Health Care Plans (EHCP) issued within 20 weeks (exc exceptions)	Dec-25	13%	50%	🚩	
20/01/2026	(NEW) HP3 - Percentage of high-risk businesses, subject to a planned inspection, which were inspected to ensure compliance	Dec-25	57%	75%	🚩	
20/01/2026	(NEW) HP22 - % of care leavers the service remains in touch with	Dec-25	98%	96%	✅	
20/01/2026	(NEW) HP20 - Targeted Early Interventions - All outcomes achieved	Dec-25	86%	80%	✅	
20/01/2026	(NEW) HP19 - Stability of placements of looked after children: length of placement	Dec-25	70%	70%	✅	
20/01/2026	(NEW) HP18 - % Assessment timeliness: within 45 working days	Dec-25	90%	90%	✅	

2.8. Healthy Environment: We continue to send a smaller proportion of waste to landfill and have improved our number of environmental permit inspections completed. The validity and accuracy of the KPI measuring the proportion of premises with access to gigabit broadband (HEn17) is being reconsidered.

Modified	Indicator Name	Latest	Shropshire	Target	On Target?	Indicator Trend
13/01/2026	(NEW) HEn7 - Tonnage of household waste recycled	Sep-25	19,526	-	—	
13/01/2026	(NEW) HEn6 - % of household waste sent for re-use, recycling and composting	Sep-25	52.8%	52.6%	✅	
13/01/2026	(NEW) HEn17 - Increase the proportion of Premises with access to gigabit broadband (>1,000Mbps)	Dec-25	78.9%	74.8%	✅	
13/01/2026	(NEW) HEn15 - Number of Environmental Permit inspections completed against statutory target (100%)	Dec-25	43%	25%	✅	
14/01/2026	(NEW) HEn10 - Improve energy efficiency of Council buildings – Energy consumption per SqM	Sep-25	8	-	—	
14/01/2026	(NEW) HEn1 - Visitors to outdoor recreation sites	Sep-25	254826	-	—	

2.9. Healthy Economy: Shropshire Council's Housing Service has significantly reduced the use of bed and breakfast (B&B) accommodation, more than halving the number of households in emergency accommodation this quarter compared to last quarter through strengthening homelessness prevention activity and increasing access to more suitable temporary accommodation. We continue to show strong economic performance in the county among measures for benefits and employment this quarter, with rates of households in receipt of universal credit and out of work claimants being favourable at approximately half that of regional and national rates. Shropshire residents pay is rising and remains similar to the national average however is rising at a slightly slower pace than nationally. Additionally, Job growth has also slowed in Shropshire in the most recent year. Planning applications continue to be delivered within target. Food hygiene compliance remains high, supporting a vibrant food, tourism and leisure sector

Modified	Indicator Name	Latest	Shropshire	Target	On Target?	Indicator Trend
13/01/2026	(NEW) Hec9 - Net increase in the number of jobs – baseline 135500 target 140,500 by Mar 2027	2024	142,000	137,645	✓	
13/01/2026	(NEW) Hec4 - Households in receipt of Universal Credit - to be lower than English and regional rates	Aug-25	16.3%	25.3%	✓	
13/01/2026	(NEW) Hec3 - Resident Pay to remain within 5% of the national average	Apr-25	£727	£728.3	✓	
20/01/2026	(NEW) Hec25 - Planning Applications - other	Dec-25	94.6%	70%	✓	
20/01/2026	(NEW) Hec24 - Planning Applications - minor	Dec-25	91.2%	70%	✓	
20/01/2026	(NEW) Hec23 - Planning Applications - major	Dec-25	77.8%	60%	✓	
14/01/2026	(NEW) Hec22 - Percentage of food establishments that are 'broadly compliant'	Dec-25	98%	97%	✓	
13/01/2026	(NEW) Hec2 - Reduce the workplace pay gap with the national average by 50% by 2027	Apr-25	11.2%	6.1%	✗	
07/01/2026	(NEW) Hec18 - Reduction of households in B&B accommodation	Dec-25	40	50	✓	
21/01/2026	(NEW) Hec17 - Delivery of affordable homes	Dec-25	75	-	-	
13/01/2026	(NEW) Hec14 - Out of work claimant rates to remain lower than the Region and England	Dec-25	2.4	4	✓	
13/01/2026	(NEW) Hec1 - Levels of investment – target £350 million – 2022 – 27	Dec-25	£337,919,291	£240,000,000	✓	

2.10. Healthy Organisation: We are receiving less compliments and more complaints from residents and customers this quarter. However, many complaints did not require formal investigation and were made anonymously via the portal. FOI compliance rates are improving however is still missing the target. Despite a reduction in the use of interim and agency staff and staff turnover rates, the council is experiencing rising rates of sickness absence, which is placing additional strain on remaining staff.

Modified	Indicator Name	Latest	Shropshire	Target	On Target?	Indicator Trend
20/01/2026	(NEW) HO2 - Number of complaint investigations	Dec-25	237	265	✓	
22/01/2026	(NEW) HO19 - Number of data breaches reported to the Information Commissioner	Dec-25	6	-	-	
22/01/2026	(NEW) HO17 - Responding to Freedom of information Requests within statutory timescales (20 working days)	Dec-25	63%	100%	✗	
22/01/2026	(NEW) HO15 - % of staff who have completed their Personal Development Plans	Dec-25	28.6%	-	-	
22/01/2026	(NEW) HO13 - Average number of days lost to sickness absence per year	Dec-25	10.97	8	✗	
22/01/2026	(NEW) HO12 - Agency staff as a % of the workforce	Dec-25	2.9%	4.1%	✓	
22/01/2026	(NEW) HO11 - Staff turnover rates	Dec-25	5.5%	7%	✓	
20/01/2026	(NEW) HO1 - Number of compliments	Dec-25	92	112	✗	

2.11. In Quarter 3, 4 KPIs continue to be exceptions. Progress updates from officers can be found in the [Additional Information section](#).

3. Recommendations

It is recommended that Cabinet:

- 3.1. Note progress to date in achieving the outcomes of The Shropshire Plan, utilising the interactive [Shropshire Plan Performance Dashboard](#)
- 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 monthly. 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.

- 5.2 The 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

- 6.1. The performance report includes KPIs for Healthy Environment with measures for monitoring Shropshire Council's direction of progress on climate change.
- 6.2. 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.
- 6.3. 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.
- 6.4. 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

- 7.1. The 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.
- 7.2. Information on each KPI is presented within [The Shropshire Plan Performance Dashboard](#), 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.
- 7.3. 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.

- 7.4. 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.
- 7.5. 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 have been delayed and are said to be published this year, and the LGOF team are developing the accompanying digital tool for launch later in the spring.
- 7.6. 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 Service 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

8. Additional Information

Improvements

- 8.1. **HEc18 - Reduction of households in B&B accommodation.** The number of households living in B&B accommodation has more than halved since last quarter through strengthening homelessness prevention activity and increasing access to more suitable temporary accommodation. A great achievement by Shropshire's Housing team.
- 8.2. **HP18 - % Assessment timeliness: within 45 working days.** Our social work assessments timeliness has improved and we are now on target, completing 90% of assessments within 45 days. This has been due to continued performance monitoring and a refreshed focus on timeliness. Our aim is to sustain this rate as it is currently better than national (80%) and our statistical neighbour rates (86%).
- 8.3. **HEn6 - % household waste sent for re-use, recycling and composting.** We are successfully sustaining our rate of recycling and meeting our target at 53% (July - Sep 2025). This KPI is reported a quarter in arrears and this quarter typically includes some of the highest volumes for garden waste due to it being the summer months.

Exceptions

There are 8 exceptions reported in Quarter 3:

- 4 KPIs continue to be exceptions this quarter
- 4 KPIs are new exceptions this quarter

Performance Monitoring Q3 2025/26

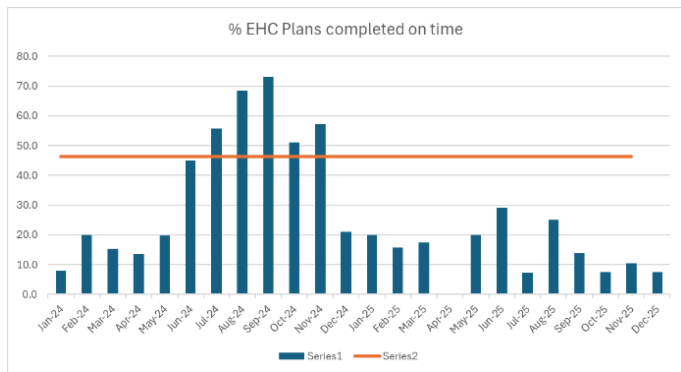
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20/01/2026	(NEW) HP31 - % of Educational Health Care Plans (EHCP) issued within 20 weeks (exc exceptions)	Dec-25	13%	50%	▶	
20/01/2026	(NEW) HP3 - Percentage of high-risk businesses, subject to a planned inspection, which were inspected to ensure compliance	Dec-25	57%	75%	▶	
22/01/2026	(NEW) HO17 - Responding to Freedom of information Requests within statutory timescales (20 working days)	Dec-25	63%	100%	▶	
22/01/2026	(NEW) HO13 - Average number of days lost to sickness absence per year	Dec-25	10.97	8	▶	
20/01/2026	(NEW) HO1 - Number of compliments	Dec-25	92	112	▶	
13/01/2026	(NEW) HEC2 - Reduce the workplace pay gap with the national average by 50% by 2027	Apr-25	11.2%	6.1%	▶	

(Source: [The Shropshire Plan Performance Dashboard](#))

Table 1. Exceptions

Provides progress updates from officers regarding continuing exceptions from last quarter, as well as newly identified exceptions for this quarter. Red dots indicate where a KPI is not meeting the target (exception) and green dots indicate where the KPI is meeting the target.

Continuing exceptions

KPI No.	KPI name	Q2 2025/26	Q3 2025/26	Progress update from Council officers																																																		
HP31	% of EHCPs issued within 20 weeks (excl. exceptions)			As of December 2025, timeliness of EHCP's 13.0%, down from 18.5% last quarter. Cabinet will recognise that this figure has consistently been underachieved throughout 2025. Despite positive recruitment and comprehensive training of the workforce, there remains an inequity between demand and capacity within the team. There has continued to be a steady decline in the timelines of EHCPs with an average of 41.6 weeks to issue, because of factors which include, late advice for assessment being available, increased complexity of cases, and insufficient resource to meet statutory timescales. Availability of Educational Psychology assessment advice is beginning to improve, along with Health and Social Care advice. CAMHS/ BEEU waiting lists, remain a challenge. Where the team could have finalised plans to improve <i>some</i> level of timeliness where assessment advice has been available, there remains insufficient provision available for a number of children and young people and therefore concluding an EHCP without the correct setting being named, simply protracts the outcome for the family and whilst bringing the EHCP assessment process to an end, does not conclude case work nor provide the required outcome. As a result, EHCNAs have remained 'open' whilst on-going conversations are being had with families to secure the best possible outcome. In this respect, we are taking a view on this practice and will consider how we can best marry the two issues. There is growth modelling underway to address the insufficient staffing currently available, which will provide an injection of resource to support a recovery plan. % EHC Plans completed on time <table><thead><tr><th>Month</th><th>Series1 (%)</th></tr></thead><tbody><tr><td>Jan-24</td><td>10</td></tr><tr><td>Feb-24</td><td>20</td></tr><tr><td>Mar-24</td><td>15</td></tr><tr><td>Apr-24</td><td>15</td></tr><tr><td>May-24</td><td>20</td></tr><tr><td>Jun-24</td><td>45</td></tr><tr><td>Jul-24</td><td>55</td></tr><tr><td>Aug-24</td><td>68</td></tr><tr><td>Sep-24</td><td>72</td></tr><tr><td>Oct-24</td><td>52</td></tr><tr><td>Nov-24</td><td>58</td></tr><tr><td>Dec-24</td><td>20</td></tr><tr><td>Jan-25</td><td>20</td></tr><tr><td>Feb-25</td><td>15</td></tr><tr><td>Mar-25</td><td>18</td></tr><tr><td>Apr-25</td><td>20</td></tr><tr><td>May-25</td><td>28</td></tr><tr><td>Jun-25</td><td>8</td></tr><tr><td>Jul-25</td><td>25</td></tr><tr><td>Aug-25</td><td>15</td></tr><tr><td>Sep-25</td><td>8</td></tr><tr><td>Oct-25</td><td>10</td></tr><tr><td>Nov-25</td><td>10</td></tr><tr><td>Dec-25</td><td>5</td></tr></tbody></table>	Month	Series1 (%)	Jan-24	10	Feb-24	20	Mar-24	15	Apr-24	15	May-24	20	Jun-24	45	Jul-24	55	Aug-24	68	Sep-24	72	Oct-24	52	Nov-24	58	Dec-24	20	Jan-25	20	Feb-25	15	Mar-25	18	Apr-25	20	May-25	28	Jun-25	8	Jul-25	25	Aug-25	15	Sep-25	8	Oct-25	10	Nov-25	10	Dec-25	5
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				20	22	28	16	33	29	21	6	25	22	26	23	271
				Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	2022 Total
				35	41	50	35	53	31	49	13	31	35	77	63	513
				Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	2023 Total
				93	88	118	49	105	80	98	19	45	71	70	66	902
				Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	2024 Total
				74	63	80	93	78	52	91	12	49	78	57	65	792
				Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	2025 Total
				80	93	81	57	75	73	86	30	47	64	82	56	824
HP3	Percentage of high-risk businesses, subject to a planned inspection, which were inspected to ensure compliance	●	●	This KPI relates to high risk food business inspections (Cat A and B). High risk food hygiene performance shows we have completed 57% of inspections at the end of Q3, missing the target of 75% but an improvement compared to Q2’s figure of 29%. The figure is calculated against the Q4 target and not all premises due are evenly distributed throughout the year. Due to staff vacancies and sickness we are slightly behind our Q3 performance. Increased poor compliance in premises means longer and more follow up in poorer performing premises. We remain confident of achieving 100% of our target by the end of March.												
HO13	Average number of days lost to sickness absence per year	●	●	Sickness absence for Q3 shows an increase compared to last quarter, up from 10.4 days to 11.0 days lost per FTE. Available benchmarking data for 2024/25 shows a median average of 9.5 lost days per employee across all local authorities and 10.2 days lost for authorities in the West Midlands. The increase locally is largely attributable to an increase in absences related to coughs, colds and influenza, which was the 3rd reason for absence this quarter and saw an increase of 57% from last quarter alongside a 36% rise in other chest and respiratory-related absences. This pattern is expected during the autumn–winter period, given seasonal flu levels in the community. Absence due to stress has reduced slightly—by just over 7% from Q2—yet still accounts for 30% of all absence. On a positive note, musculoskeletal-related absences have decreased by almost 35% since last quarter. HR continues to deliver targeted, proactive interventions to address sickness absence, particularly long-term cases. However, it is too early to determine whether these initiatives												

				are directly responsible for the reductions seen in stress and musculoskeletal absence. Future analysis will help us assess the effectiveness of our ongoing work.
HO17	Responding to FOIs within statutory timescales (20 working days)			Overall compliance is improving, up from 55% in Q2 (Jul-Sep) to 63% in Q3 (Oct – Dec 2025). However, this is still below our target of 100%. Comparison data for other authorities is not available. <u>Planned improvements</u> • Where possible, IGT is sending directly to teams due to respond and reducing the need for responses to be authorised by Service Directors. This gives teams longer to consider the response. • Greater awareness and guidance: i) IG in general is being reviewed as part of the NOM agreed by Leadership Board on 7 October 2025. li) A workshop specifically about FOI was given to SLF on 11 September. An Extranet is being developed to provide easy access to awareness tools and response templates. lii) IGT approaches teams to support teams and raise awareness of how FOI impacts their service and discuss ways to make it more efficient. • Teams continue to be encouraged to publish as much information as possible where information is requested frequently or where they anticipate local interest and increased enquiries

New exceptions this quarter

KPI No.	KPI name	Q2 2025/26	Q3 2025/26	Progress update from Council officers
HEc2	Reduce the workplace pay gap with the national average by 50% by 2027 (Annual figure)	-		This figure is reported annually, the 2024/25 figure was published during Q3 of 25/26. The workplace pay gap in the 2021 baseline year was 9.3%. The aim by 2027 is to reduce that gap by at least 50% to 4.6%. The target profile is to close the gap by 0.8% per year. Results from the ONS Annual Population Survey of Hours and Earnings for 2025 show the pay gap to be 11.2%, is higher than the figure of 9.10% in 2024 and continues to miss the target for the year of 6.1%. Workplace pay in Shropshire is £680.40 gross per week for full-time workers compared with £766.60 in Great Britain. Workplace wages in Shropshire grew at a slower rate than they did nationally in the year to April 2025 (+2.6% compared with 5.0%). Mitigation comment - Macro-economic indicators like wage levels are affected by national and global economic trends that are outside the control of Shropshire Council. However, closing the gap between national and local wage levels remains a key priority of the Shropshire Economic Growth Strategy, and we are acting to mitigate external influences by

				encouraging inward investment to the county and by working with FE/HE/training providers to ensure business have access to the skilled workers they require.
HP6	Reception: Prevalence of overweight (including obesity) – C09a	-		This figure is reported annually, the 2024/25 figure was published during Q3 of 25/26. In 2024/25, 24.8% of reception aged children in Shropshire were reported as overweight or obese, a rise compared to the previous year figure of 23.6% and remaining above the target of 21%. However we are statistically similar to the national (23.6%) and regional averages (24.4%) and rank mid table among our statistical neighbours. Work continues to reduce the prevalence of obesity in reception and year 6 aged children in the county. The Public Health Nursing service are piloting a Brilliant Bodies programme to support body positivity as well as a health assessment in reception and year 7. Open Access health visitor clinics have been implemented across the county to provide additional opportunities children for to be seen and offer support around feeding. The systemwide Healthier Weight strategy also continues to look to address the common themes that influence healthy weight.
HP7	Year 6: Prevalence of overweight (including obesity)- C09b	-		
HO1	Number of compliments			92 compliments were received within quarter 3. This total is a 25% decrease when compared to the previous quarter (122) and is below the target of 112. Overall reasons may include: - Poor public perception of Shropshire Council - Customer response times and handling - Service pressures and staffing levels - Time to record and report compliments to the Complaints Officers

Last quarter exceptions- progress update

HEc18	Reduction of households in B&B accommodation			In Q3 25/26, there were 40 households in B&B accommodation, a significant reduction from the 100 households in Q2 25/26 and now encouragingly below the than the target of 60. Shropshire Council's Housing Service has significantly reduced this through strengthening homelessness prevention activity and increasing access to more suitable temporary accommodation. This has been achieved through increased earlier intervention to prevent homelessness and the implementation of 4 new Temporary accommodation in-house schemes equating to over 100 bedspaces for single individuals. This temporary accommodation enables the service to provide more intensive support and referrals / sign posting to key agencies such as mental health and substance misuse. The schemes also enable support staff to work with residents on independent living skills such as cooking. This leads to improved outcomes for households, reduced costs for the council, and accommodation that better supports health, wellbeing and stability.
HO11	Staff Turnover rate (%)			Staff turnover has reduced from 7.71% to 5.47% quarter on quarter, meaning it is now below the target of 7% which is positive. When looking at our non-Shires employees who left through voluntary reasons, over 56% had 2 or less years' service and 76% had up to 5 years' service indicating that we are not retaining our newest recruits.
HP14	Rate of deaths by suicide (per 100,000 population)		No new data	N/A
HO19	Number of data breaches reported to the Information Commissioner			The ultimate goal and target would be no breaches and none which are reportable to the ICO. However, it's appreciated this is a difficult or impossible target, which is why this is not rated RAG formally in the dashboard. In Q3, there were 6 breaches reported to the ICO, compared to 3 last quarter. In total, 70 incidents reported to Information Governance in Q3, same as what was reported last quarter. 18 were found not to be personal data breaches, 52 Personal Data breaches and 6 reported to the ICO. Benchmarking from other authorities is not available. Improvements: after each breach, IGT will look at the root cause and make recommendations to prevent a similar event occurring again. In most cases, procedures; awareness and training are in place, and the event has occurred due to human error.

				A personal data breach is <i>broadly defined as a security incident that has affected the confidentiality, integrity or availability of personal data. In short, there will be a personal data breach whenever any personal data is accidentally lost, destroyed, corrupted or disclosed; if someone accesses the data or passes it on without proper authorisation; or if the data is made unavailable and this unavailability has a significant negative effect on individuals.</i> The threshold for reporting to the ICO is: <i>When a personal data breach has occurred, Information Governance will establish the likelihood of the risk to people's rights and freedoms. If a risk is <u>likely</u>, the ICO must be notified; if a risk is unlikely, it doesn't have to be reported.</i> It is a subjective test in some ways and can depend on the personal circumstances of the person affected. The decision is made in conjunction with the service area in most cases. <u>Action being taken to improve</u> 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, e.g. 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 Currently statistics relating to breaches is only reported quarterly to IGLOO. The expectation is that this information is cascaded down through service directorates. We are aware that i) the cascade isn't happening and ii) quarterly is not enough. It was therefore agreed at the last IGLOO – September 2025, that IGT will report to Service Directors monthly and give them a breakdown of the following. We haven't started to do this yet we are just drafting a report template to be used. • the number of breaches • the level of risk associated with them (0 – incident but no actual breach; 1 – a low-level breach; 2 – a medium level breach; 3 – serious breach reportable to the ICO) • the cause of the breach • link to best practice, advice and guidance on actions they may take to reduce the number • an offer to work directly with the team to discuss issues and talk through solutions.
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9. Conclusions

- 9.1. The key performance pressure remains the delivery of a balanced budget which are detailed in the financial report.
- 9.2. Considering the financial constraints, overall Q3 25/26 shows reasonable performance in achieving The Shropshire Plan and its objectives, with 72% of the 29 newly updated indicators this quarter 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

Appendix 1: KPI List



The Shropshire Plan
KPIs.xlsx

Appendix 2: A guide on navigating the dashboard (Video):

[The Shropshire Plan Performance Report Walkthrough.mp4](#)