Quarter 3 2021/22

Purpose of the report
To provide a strategic overview of the Council's performance for Quarter 3 2021/22.

The following scorecards are enclosed:

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Prepared by the Performance and Improvement Team

Key to Symbols

Reporting Basis	
Year to Date	Performance accumulated over the year
Rolling Year	Average performance over a 12 month period
Annual	Performance measured once a year
Latest Quarter	Performance this quarter
Snapshot	Performance at a particular point in time
Forecast	Predicted position at the end of the year

Measure Symbols	
	Performance Better than Target
	Performance Worse than Target
	Performance significantly worse than Target
	No information
	Missing Target
	No Value
Bigger is Better	A bigger value for this measure is good
Smaller is Better	A smaller value for this measure is good
Plan is best	Where it is better for performance to be on target rather than above or below

Risk	Impact/Consequence				
Likelihood	1 Insignificant	2 Minor	3 Moderate	4 Major	5 Critical
Almost certain (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Probable (3)	3	6	9	12	15
Possible (2)	2	4	6	8	10
Rare (1)	1	2	3	4	5

Risk Rating
(calculated by multiplying the Impact with the Likelihood of each risk)

Risk Symbols	
	Risk Value Increasing
	Risk Value Decreasing
	No Change

Level of Risk	Score
Low	1 - 6
Moderate	7 – 12
High	13 – 25

Commissioning - Adult Social Care

Cllr Kathy Williams

Mental Health

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of referrals for an AMHP assessment that led to support or protection being put in place	Bigger is Better	Latest Quarter			58.5%	60.9%	60.5%	60.0%	★	Of the 296 AMHP Assessments completed in the quarter, 179 resulted in detention or other support being put in place.	n/a
% of Individuals with a second or subsequent AMHP assessment with 12 months	Smaller is Better	Latest Quarter			25.1%	27.1%	30.8%	40.0%	★	This includes individuals detained under Section 2 who are then (appropriately) re-assessed for Section 3 within 28 days	n/a
% of Adults receiving secondary Mental Health services in settled accommodation	Bigger is Better	Snapshot	88.0%	89.0%	89.0%	88.0%		85.0%			55.0%

Learning Disability

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Adults with Learning Disabilities in settled accommodation	Bigger is Better	Snapshot	79.2%	79.1%	79.1%	79.1%	78.6%	78.0%	★	Updated to reflect ASCOFs 2020/21	73.8%

	Good Performance High/Low	Reporting Basis	Mar-17	Mar-18	Mar-19	Mar-20	Actual Mar-21	Comments	Comparator Group
% of Adults with Learning Disabilities in Employment	Bigger is Better	Annual	6.8%	6.4%	3.1%	0.8%	2.7%		3.9%

Adult Social Care Transformation

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of GCC Commissioned Providers judged to be Good or Outstanding by CQC	Bigger is Better	Latest Quarter			94.1%	92.3%	92.6%	90.0%	★	Latest data from CQC indicates one provider judged as inadequate with 24 judged as Requires Improvement	n/a
Permanent admissions 18-64 to residential & nursing care homes per 100,000 population	Smaller is Better	Rolling Year	19.4	21.8	21.3	28.3	27.7	12.0	▲	Figures have been refreshed to reflect changes in data entry and systems. Comparator group figures relate to the financial year 2020/21 and reflect a lower-than-normal number of permanent admissions during the height of the COVID-19 pandemic. In the rolling year to the end of December 2021 there were 103 individuals admitted. Of these: 59 were Physical Disabilities (18-64) 37 were Learning Disabilities 7 were Mental Health There remain some inaccuracies in the way that admissions are coded (relating to Short Breaks) which is inflating the overall rate, however the rate is similar to that over the same period to June 2019 (pre-COVID) and has historically been off target.	11.7
Permanent admissions aged 65+ to residential & nursing care homes per 100,000 population	Smaller is Better	Rolling Year	598.9	574.5	545.8	597.5	502.8	472.0	▲	Figures have been refreshed to reflect changes in data entry and systems. Comparator group figures relate to the financial year 2020/21 and reflect a lower-than-normal number of permanent admissions during the height of the COVID-19 pandemic. In the rolling year to the end of December 2021 there were 701 individuals admitted. Of these: 689 were Older People 5 were Learning Disabilities 7 were Mental Health	421.2

Carers

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Average waiting time for a Care Act Compliant Assessment (in working days)	Smaller is Better	Snapshot	17.0	14.0	15.0	17.0	17.0	30.0	★		n/a

Delivery - Adult Social Care

Cllr Carole Allaway-Martin

Adult Safeguarding

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Section 42 enquiries this quarter where the risk was reduced or removed	Bigger is Better	Latest Quarter	87.3%	93.1%	83.3%	85.3%	87.3%	85.0%	★	There were 150 S42 closures during quarter 3. Of these only 9 (6.0%) were closed where the Risk Remained, however there were 10 (6.7%) closures where the outcome was inconclusive.	84.4%
% of S42 Enquiries open for more than 26 weeks	Smaller is Better	Latest Quarter	22.6%	32.4%	48.3%	39.1%	26.2%	30.0%	★	At the end of December 2021 there were 195 open S42 Enquiries of which 51 (26.2%) had been open for more than 26 weeks.	n/a

Adult Social Care

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Service Users who have had a review/ re-assessment of their needs within the last 12 months	Bigger is Better	Snapshot	52.0%	53.0%	43.6%	52.1%	42.0%	50.0%	▲	At the end of December there were 3,129 individuals who were overdue a Care Act Review - this equates to 58% of the total Adult Social Care clients. All locality teams were tasked with examining and cleansing the data relating to reviews during the quarter and this has resulted in an accurate overview of the extent of overdue reviews. 75.1% of all outstanding reviews were less than a year overdue (becoming overdue during 2021).	n/a
% of all ASC Contacts with a decision within 1 working day	Bigger is Better	Latest Quarter		94.2%	93.5%	93.7%	96.7%	95.0%	★	This can be broken down as 98.7% of all contacts received via the CSC and 90.5% of all other contacts	n/a
% of ASC contacts signposted or closed	Bigger is Better	Latest Quarter	33.0%	33.0%	39.4%	40.9%	38.3%	33.0%	★	Covers the period 1 October - 2 December 2021. Data for the remainder of December is unavailable due to a LAS configuration change and will be updated when available.	n/a
% of clients who need no long term care after their period of reablement	Bigger is Better	Latest Quarter	85.1%	85.6%	92.5%	89.5%	91.3%	85.0%	★		n/a

	Good Performance High/Low	Reporting Basis	Sep-20	Dec-20	Mar-21	Jun-21	Actual Sep-21	Target Sep-21		Comments	Comparator Group
Delayed transfers of care from hospital due to Adult Social Care per 100,000 population	Smaller is Better	Rolling Year						3.50		DTOC measures were suspended on 1st March 2020. There is no data available at present.	3.50

	Good Performance High/Low	Reporting Basis	Mar-16	Mar-17	Mar-18	Mar-19	Actual Mar-20	Comments	Comparator Group
Social care reported quality of life	Bigger is Better	Annual	19.4	19.7	19.1	19.6	19.6	Relates to March 2020 figure. Next update due in late 2022 as ASCOF Service User Survey did not go ahead in 2020/21 due to the COVID-19 pandemic.	19.1
Carer reported Quality of Life	Bigger is Better	Annual	7.4	7.4	7.4	7.4	7.4	Relates to March 2019 figure	7.4

FAB

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
Average number of working days to complete a FAB assessment	Smaller is Better	Latest Quarter			16.2	16.1	15.4	There were 311 FAB assessments completed in the Quarter taking an average of 15.4 working days to complete each assessment. At the end of December 2021 there were 194 FAB Assessments 'In progress'. These had been open for an average of 65 working days. • 23 Assessments (12%) had been open for over 6 months • 58 Assessments (30%) had been open for between 3-6 months • 113 Assessments (58%) had been open for less than 3 months	n/a

Prevention, Well-Being and Communities

Cllr Tim Harman

Public Health

	Good Performance High/Low	Reporting Basis	Sep-20	Dec-20	Mar-21	Jun-21	Actual Sep-21	Target Sep-21		Comments	Comparator Group
Proportion of adult alcohol misusers who successfully completed treatment and did not represent within 6 months of completion	Bigger is Better	Quarter in Arrears	36.8%	31.2%	28.1%	25.9%	23.3%	35.0%	▲	The Q2 performance is 23.3% which is a reduction on Q1. Projecting forward from Q2 we have reasonable confidence that performance will begin to slowly recover towards the end of Q3 and continue to improve in Q4. There are multiple reasons for this drop which continue to impact this metric, including the halt on discharges as a safety measure in response to the pandemic. A further 116 completions would have been required to bring this into the LA family comparator group top quartile (range: 39.71% - 51.02%).	36.9%
Proportion of all Opiate Users in treatment, who successfully completed treatment and did not represent within 6 months of completion	Bigger is Better	Quarter in Arrears	5.4%	4.6%	5.1%	4.4%	3.8%	6.3%	▲	The Q2 performance is 3.8% which is a reduction on Q1. Projecting forward 6 months, we are anticipating that the performance will begin to slowly recover towards the end of Q3 and remain steady in Q4. There are multiple reasons for this drop which continue to impact this metric, including the halt on discharges as a safety measure in response to the pandemic. In Q2 a further 31 completions would have been required to bring this into the LA family comparator group top quartile (range: 6.05% - 9.00%).	5.7%
Proportion of all Non-Opiate Users in treatment, not representing 6 months after completion	Bigger is Better	Quarter in Arrears	29.8%	25.7%	25.3%	21.3%	18.3%	33.2%	▲	The Q2 performance is 18.3% which is a reduction on Q1. Projecting forward 6 months, we are anticipating that the performance will begin to slowly recover towards the end of Q3 and Q4. There are multiple reasons for this drop which continues to impact this metric, including the halt on discharges as a safety measure in response to the pandemic. For Q2 a further 120 completions would have been required to bring this into the LA family comparator group top quartile (range: 38.02% - 49.12%).	33.2%
% of pregnant smokers achieving a 4 week quit	Bigger is Better	Quarter in Arrears	83.0%	80.0%	87.0%	82.0%	80.0%	70.0%	★	The service continues to achieve constant and exceptional outcomes with 80% of pregnant women achieving a 4 week quit in Q2 compared with 82% in Q1. This is significantly higher than the England average of 48% for 20/21.	n/a
Number of customers who achieve a significant risk factor improvement	Bigger is Better	Quarter in Arrears	480	735	619	614	847	763	★	The numbers achieving an improvement has increased to 847 in Q2 compared to 614 in Q1. This is due to the reinstatement of Slimming World in June 2021. Figures for HLS remain steady at 446 compared to 478 in Q1.	n/a

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
% of Covid-19 cases referred for Contact Tracing that have been completed	Bigger is Better	Latest Quarter	86.4%	95.4%	88.7%	86.7%	83.1%	For all confirmed cases which have been through contract tracing (either national track and trace or local contract tracing) with a test date between 01/10/2021 and 31/12/2021. 16.7% failed.	n/a

	Good Performance High/Low	Reporting Basis	Sep-17	Sep-18	Sep-19	Sep-20	Actual Sep-21	Comments	Comparator Group
% Reception Children overweight including obesity	Smaller is Better	Academic Year	24.3%	23.8%	22.0%	23.7%	26.3%	Data should be analysed with caution as due to covid restrictions local authorities were advised to complete measurements in a representative 10% sample of schools. Gloucestershire were able to measure 98% of reception-age children, giving us a high level of confidence in our local data for this age group, yet data is not directly comparable to the previous year due to the differing sample size. In 2020/21 Gloucestershire saw an increase in reception-age children with overweight or obesity from 23.7% to 26.3% compared to the previous year. Data has not been published at local authority level meaning we have been unable to benchmark, but the increase in prevalence of overweight or obesity in Gloucestershire has been reflected at both a regional and national level. The South West saw an increase from 22.8% to 26.9% and England saw an increase from 23% to 27.7%.	
% Year 6 Children overweight including obesity	Smaller is Better	Academic Year	31.1%	32.1%	31.9%	32.4%	36.0%	Data should be analysed with caution as due to covid restrictions local authorities were advised to complete measurements in a representative 10% sample of schools. Gloucestershire saw an increase in year 6-age children with overweight or obesity from 32.4% to 36% compared to the previous year. Data has not been published at local authority level meaning we have been unable to benchmark, but the increase in prevalence of overweight or obesity in Gloucestershire has been reflected at both a regional and national level. The South West saw an increase from 31.8% to 37.3% and England saw an increase from 35.2% to 40.9%.	n/a

	Good Performance High/Low	Reporting Basis	Dec-16	Dec-17	Dec-18	Dec-19	Actual Dec-20	Target Dec-20		Comments	Comparator Group
Suicide rate per 100,000 Population	Smaller is Better	3-Year Average	10.8	9.8	10.4	10.2	11.0	11.4	★	The figure reported covers the three year period (2018-2020) where there were an additional 15 suicides compared to 2017-2019 (from 170 to 185). The National, Regional, Comparator Group and Gloucestershire rates have all increased since 2017-2019. Gloucestershire's rate remains broadly in line with both the National rate of 10.4 and our Comparator Group (11.4). The South West regional rate is 11.6.	11.4

Children and Young People

Cllr Stephen Davies

Quality Assurance

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of audits judged as Requires Improvement (RI) or better	Bigger is Better	Latest Quarter	87.0%	91.0%	89.0%	90.0%	80.0%	91.0%	▲		n/a
% of Children open to Social Care with fewer than 3 Social Workers in 6 months	Bigger is Better	Snapshot	77.9%	82.3%	83.8%	84.4%	84.4%	80.0%	★		n/a

Contact Activity

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of referrals to Social Care that are re-referrals within 12 months	Smaller is Better	Latest Quarter	29.2%	29.0%	23.9%	24.4%	23.5%	22.5%	●		21.3%
% of Initial Decisions made within 24 hours for all contacts	Bigger is Better	Latest Quarter	66.7%	79.9%	88.2%	81.2%	71.9%	90.0%	▲	Decline in performance for the second quarter. There continues to be a backlog on contacts that C-Spa are working through. Decisions for 77.8% of Red rated contacts were made within 4 hours in Q3; this is significantly below target. However, in-month performance improved in December to 92.6% and was better than target.	n/a
% Initial visits in time	Bigger is Better	Latest Quarter	82.3%	82.5%	79.2%	78.2%	69.9%	85.0%	▲		n/a

Children in Need of Help & Protection

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Children in Need who have been on a plan for 12 months or more	Smaller is Better	Snapshot	6.5%	6.8%	4.8%	4.0%	3.8%	10.0%	★		n/a
% of Single Assessments completed within 45 working days	Bigger is Better	Latest Quarter	83.0%	84.1%	80.9%	83.2%	79.6%	87.0%	▲		86.9%
% of Children becoming the subject of a Child Protection Plan for a second or subsequent time	Smaller is Better	Latest Quarter	26.6%	28.8%	28.4%	27.4%	27.3%	25.0%	▲		23.8%
% of Children subject to Child Protection Plans lasting 2 years or more	Smaller is Better	Snapshot	3.1%	2.2%	3.2%	3.1%	2.4%	2.0%	▲		1.7%

Children in Care

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Children who are fostered who are placed with the in-house fostering service	Bigger is Better	Snapshot	66.0%	70.0%	68.0%	64.0%	64.0%	70.0%	▲		n/a
% of Children in Care for more than 2.5 years in the same placement for at least 2 years	Bigger is Better	Snapshot	64.3%	69.3%	67.0%	66.0%	65.6%	68.0%	●	Stretch target implemented at the beginning of Quarter 3. Incremental declines over the last 3 quarters and the change in target mean that performance has moved from a better than target position to within tolerance of target and remains below the peer group average.	70.0%
% Children in Care (CIC) reviewed in timescales	Bigger is Better	Latest Quarter	100.0%	100.0%	99.7%	98.9%	97.4%	98.0%	●		n/a
% of Children in Care with at least 3 placements in the last 12 months	Smaller is Better	Snapshot	17.9%	15.8%	15.9%	16.2%	13.2%	13.0%	●	Improvement in Q3 means that performance is at a 3 year best and is within tolerance of target for the first time over the same period. However, we continue to see a higher proportion of our children in care living in 3 or more placements within 12 months than the peer group average.	9.5%
% Children in Care persistently absent	Smaller is Better	Snapshot	18.1%	20.0%	22.0%	18.4%	22.5%	5.0%	▲	Sickness accounted for 7.9% of children who had missed more than 10% of school days. Performance would still be worse than target even taking this into account.	10.1%
% of children who have been admitted to care within 12 months of previously being in care	Smaller is Better	Latest Quarter	8.7%	3.9%	6.6%	3.4%	7.8%	11.4%	★		11.4%

Children Leaving Care

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Young People aged 19-21 who were looked after aged 16 who were in suitable accommodation	Bigger is Better	Snapshot	93.1%	93.8%	92.4%	94.4%	90.4%	95.0%	●	There has been incremental month on month decline in the proportion of 19-21 yr olds living in suitable accommodation throughout the quarter. Performance is at risk of moving from within tolerance of target to worse than target. For older care leavers, performance is worse than target for the first time in 6 months (87.9%). For younger care leavers, performance has persistently been worse than target throughout 2021 (85%).	87.9%
% of Young People aged 19-21 who were looked after aged 16 who were not in employment, education or training	Smaller is Better	Snapshot	48.3%	48.3%	51.9%	45.1%	44.9%	25.0%	▲		48.8%

Youth Support

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Young People (academic age 16-17) not in education, employment or training (NEET)	Smaller is Better	Snapshot	2.6%	2.5%	2.3%	1.3%	2.2%	4.5%	★	NEET percentage from MI Program at end of December (snapshot)	n/a

Education and Skills

Cllr Philip Robinson

Schools

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Number of pupils permanently excluded (all pupils)	Smaller is Better	Latest Quarter	26	6	16	12	35	29	▲		n/a
% of pupils attending good or outstanding Secondary Schools	Bigger is Better	Snapshot	81.0%	81.0%	81.0%	81.0%	85.0%	85.0%	★		n/a
% of pupils attending good or outstanding Primary Schools	Bigger is Better	Snapshot	86.0%	86.0%	86.0%	86.0%	87.0%	88.0%	●		n/a
% of good or outstanding Early Years Settings	Bigger is Better	Snapshot	91.0%	91.0%	91.7%	91.7%	90.9%	92.0%	●		n/a

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
Rate per 1,000 of children with an Education Health and Care Plan	Plan is Best	Latest Quarter	24.6	25.2	26.0	26.6	27.3		28.0

	Good Performance High/Low	Reporting Basis	Academic Year Ending 2017	Academic Year Ending 2018	Academic Year Ending 2019	Academic Year Ending 2020	Academic Year Ending 2021	Comments	Comparator Group
The SEN/Non-SEN gap - achieving expected standard or higher at KS2 in Reading, Writing & Maths	Smaller is Better	Academic Year	57.0%	60.0%					
% points gap between disadvantaged pupils and their peers at Key Stage 2 (achieving expected standard or above in Reading, Writing and Maths)	Smaller is Better	Academic Year	27.0%	28.0%	28.0%				
% points gap between disadvantaged pupils and their peers at Key Stage 4 (achieving A* - C in English and Maths)	Smaller is Better	Academic Year	17.3%	17.4%					
% of pupils achieving grades 9-5 in English and Maths	Bigger is Better	Academic Year		47.3%	47.8%	54.9%	57.3%		52.7%

Economic Growth and Planning

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
Value of Planning Agreements signed to support provision of Highways & Education/Libraries (£000)	Bigger is Better	Year to Date	£345	£1,130	£830	£54	£38	**Quarters 2021/2022** / **Number of agreements** / **Total Value Negotiated** Q1 – April – June: 2 agreements, £830 k Q2 – July - Sept: 1 agreement, £54,k Q3 – Oct – Dec: 2 agreements, £37,5 k	n/a
% of premises with next generation broadband access (NGA) Superfast	Bigger is Better	Latest Quarter	95.8%	96.3%	96.4%	96.4%	96.5%	We may need to start manging expectations that there is never going to be 100% coverage as the industry focus is now on fibre. This indictor may need to be reviewed so it reflects where the focus of industry investment is.	n/a
Total Unemployment Related Benefits Claimants as % of 16 - 64 year olds	Smaller is Better	Latest Quarter	4.5%	4.6%	3.7%	3.3%	2.9%	Gloucestershire's 16-64 year old population claiming an unemployment benefit has continued to reduce, down to 2.9%. This equates to 11,295 people in December. This is a reduction of almost 7,900 claimants since the peak in August 2020, but remains higher than the level in March 2020 (7,855, 2%), continuing to reflect the impact of the pandemic on businesses and employments. Gloucestershire's claimant rate is better than the South West (3.2%) and England (4.5%)	n/a

Highways

Cllr Vernon Smith

Highways

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of 2 hour emergency repairs made on time	Bigger is Better	Latest Quarter	98.0%	98.0%	100.0%	99.0%	99.0%	96.0%	★	The quarterly average number of 2-hour and 24-hour defect repairs completed has followed a decreasing trend over the last two years (down 24%, 818 to 623 and 27%, 757 to 547 respectively compared with 2020/21). This would indicate that where defects relate to potholes, we are undertaking structural maintenance to the right roads and damage is therefore less severe and can be managed through routine repair. Timeliness of completing these repairs remains high.	n/a
% of 24 hour defects repaired on time	Bigger is Better	Latest Quarter	100.0%	100.0%	99.0%	99.0%	100.0%	96.0%	★		n/a
% of 28 day defects repaired or made safe in time	Bigger is Better	Latest Quarter	100.0%	95.0%	96.0%	97.0%	99.0%	95.0%	★	While the number of 28-days defects completed reduced in Quarter 3, demand is 50% higher than 2020/21 financial year-to-date and 67% higher than 2019/20 (33,562 defects compared with 22,255 and 20,037 respectively). Despite increased levels of defect repairs needed, timeliness of emergency and defect repairs continues to be better than target.	n/a
% of structural maintenance programme delivered	Bigger is Better	Latest Quarter	87.0%	99.0%	32.0%	61.0%	75.0%	75.0%	★		n/a

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
Number of Winter maintenance runs completed	Smaller is Better	Quarterly	30	128	5	0	25		n/a
Average number of additional days to complete overdue 28 day defect repairs	Smaller is Better	Quarterly				11.45		On average, it took 19 days to complete all defect repair in the 28-day category in Quarter 3. At the time of reporting, there were no 28-day defect repairs that were overdue. We are working with the provider to automate reporting in order to regularly receive data regarding average additional days taken for overdue 28-day defect repairs.	n/a

	Good Performance High/Low	Reporting Basis	Dec-17	Dec-18	Dec-19	Dec-20	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Overall resident satisfaction with Highways network	Bigger is Better	Annual	52.0%	51.0%	52.0%	52.0%	50.0%	52.0%	●		n/a

	Good Performance High/Low	Reporting Basis	Mar-17	Mar-18	Mar-19	Mar-20	Actual Mar-21	Target Mar-21		Comments	Comparator Group
% of principal roads where maintenance should be considered	Smaller is Better	Annual	2.0%	2.0%	2.0%	2.0%	2.0%	2.0%	★	Road condition is based on a sample survey undertaken in Summer 2020. Principal roads equate to 10.5% of the road network covering 571 Km.	4.0%
% of the Non-principal classified roads where maintenance should be considered	Smaller is Better	Annual	5.0%	5.0%	6.0%	5.0%	4.0%	5.0%	★	Road condition is based on a sample survey undertaken in Summer 2020. Non-principal (classified roads) equate to 36.2% of the road network covering 1,962 Km	7.0%

	Good Performance High/Low	Reporting Basis	Mar-17	Mar-18	Mar-19	Mar-20	Actual Mar-21	Comments	Comparator Group
% of unclassified roads where maintenance should be considered	Smaller is Better	Annual	12%	13%	13%	12%	12%	Road condition is based on a sample survey undertaken in Summer 2020. Unclassified roads equate to 53.3% of the road network covering 2,894 Km.	

Floods

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% delivery of the annual gully emptying programme (as published on the website)	Bigger is Better	Latest Quarter	97.0%	100.0%	32.0%	64.0%	83.0%	75.0%	★		n/a

Environment and Planning

Cllr David Gray

Climate Change

	Good Performance High/Low	Reporting Basis	Sep-20	Dec-20	Mar-21	Jun-21	Actual Sep-21	Target Sep-21		Comments	Comparator Group
Council Carbon Emissions, buildings & transport (exc schools) Tonnes of CO2e	Smaller is Better	Year to Date	2,192.78	4,228.60	6,486.29	1,274.16	2,261.02	2,193.00	●		

	Good Performance High/Low	Reporting Basis	Sep-20	Dec-20	Mar-21	Jun-21	Actual Sep-21	Comments	Comparator Group
Renewable energy generation (kWh) from the Councils Estate (exc schools)	Bigger is Better	Year to Date	29,818,032	44,700,725	62,753,382	17,027,388	31,665,411		n/a

Waste

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Residual household waste per household (Kgs)	Smaller is Better	Forecast	464	451	461	457	440	479	★		520
% of household waste sent for reuse, recycling and composting	Bigger is Better	Forecast	52.0%	50.9%	50.7%	51.0%	51.5%	51.0%	★		48.7%
Net power production (MWhr) by the Gloucestershire Energy From Waste facility	Bigger is Better		29,738	35,662	33,491	29,130	34,138	29,100	★		n/a
% of waste diverted from landfill	Bigger is Better	Forecast	97.2%	97.1%	97.4%	97.4%	97.4%	92.8%	★		n/a

Public Protection

Cllr Dave Norman

Fire & Rescue

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Safe and Well visits undertaken to those in high risk groups	Bigger is Better	Latest Quarter	86.4%	85.3%	83.4%	83.0%	78.4%	75.0%	★	The picture for completing Safe and Well visits for vulnerable groups is still quite positive. The in-month figure for December distorts the Q3 data as fewer visits were completed in December overall and, of those visits, a higher than usual rate were for low to medium risk residents. Vulnerable service user visits completed was 140 in December compared to 221 in November and 281 in October. The Service targets and prioritises high fire risk groups but we continue to carry out Safe and Well visits to concerned low to medium risk residents. The absence of the full-time green book Community Safety Advisor (CSAs) in December has further reduced the completion of visits to vulnerable groups. It is the two full-time green book CSAs who carry out a high percentage of the complex and very high risk Safe and Well visits but they were only available to complete 59 visits in December, around half their usual rate.	68.0%
Number of Safe and Well visits undertaken per 1,000 population	Bigger is Better	Latest Quarter	0.67	0.64	0.78	0.83	0.89	2.35	▲	The completion of Safe and Well visits has improved generally but it requires continual monitoring. There are regular performance management meetings to ensure that a balance is maintained for the diverse workload of the Wholetime Watches and the performance data are provided to the Station managers ahead of this meeting. However, the overall improvement has started to slow, with Wholetime Watches completing fewer Safe and Well each month in November and December than they had in the previous 6 months. The report for dwelling fires will be a starting point to re-energise this improvement.	0.84
Average Response times to dwelling fires	Smaller is Better	Latest Quarter	10.27	9.10	8.39	9.29	7.03	9.00	★		8.37
Number of Accidental Dwelling Fires	Smaller is Better	Latest Quarter	62	68	75	63	74	60	▲	An investigation into the increase of Dwelling fire will be carried out and production of a report which shows the spatial and temporal spread of those fires and any demographic data for the residents affected. The prevention team will increase their community safety engagement in those areas and run an evidence-based home fire safety campaign. Improvements that had been made in reducing the backlog of Safe and Wells has stalled and some visits are waiting longer than 90 days. The Prevention manager will engage with the wholetime watches to proactively deliver these visits and close the outstanding Safe and Well referrals so that there is assurance that steps have been taken to reduce the fire risk for our most vulnerable residents. The prevention manager has committed to provide a report and narrative with action plan by the end of Q4.	103

Libraries

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Number of light-touch business interactions supported by the Growth Hubs	Bigger is Better	Year to Date	1	4	27	74	65	100	▲	The number achieved reflects what is happening with footfall and engagement with libraries. With the everchanging rules around the COVID pandemic there is sense of lack of engagement. The Growth Hubs themselves have also reported low footfall and engagement for this quarter.	n/a

Road Safety

	Good Performance High/Low	Reporting Basis	Actual Jul - Sep 20	Actual Oct - Dec 20	Actual Jan - Mar 21	Actual Apr - Jun 21	Actual Jul - Sep 21	Forecast Jul - Sep 21		Comments Jul - Sep 21	Comparator Group
Number of killed and seriously injured people	Smaller is Better	Calendar Year to Date	216	277	39	130	235	218	▲	With Covid restrictions easing, the number of motorists on the road again has increased, meaning KSI casualties have regrettably returned to pre-pandemic levels. However, the Council is in the process of drafting a new Road Safety Policy and establishing a new Road Safety Forum, involving Gloucestershire Fire and Rescue Service, the Office of the Police and Crime Commissioner and Gloucestershire Constabulary, with an aim of achieving Vision Zero by 2050 and ultimately reducing the number of people killed and seriously injured on our roads.	n/a

Leader of the Council

Cllr Mark Hawthorne

Performance

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Council Strategy indicators that are on or ahead of target.	Bigger is Better	Latest Quarter	67.0%	67.0%	64.0%	63.0%	59.0%	65.0%	▲	30 of the 74 measures in the Corporate Performance Dataset were performing worse than target in Quarter 3. Of these, half are being impacted, at least in part, by issues relating to the pandemic (15 measures).	n/a

Finance / Change

Cllr Lynden Stowe

Corporate Goverance

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of FOI/EIR requests responded to on time	Bigger is Better	Latest Quarter	75.0%	76.0%	83.0%	82.0%	81.0%	90.0%	▲	The consistent level of performance is largely attributed to the number of requests remaining low in number and still below pre-covid numbers.	n/a
% of SAR requests responded to on time	Bigger is Better	Latest Quarter	68.0%	59.0%	60.0%	51.0%	50.0%	90.0%	▲	SAR performance has remained steady this quarter and still remains below the ICO target of 90%. The lack of increase in compliance is considered to be a result of: • Revised process regarding extensions, to ensure they are only used in legitimate situations as permitted by the law (meaning more cases are now going overdue at 1 month, rather than 3); • Ongoing capacity issues in Children's services; and • Staff absence in the central team and upskilling of new starters.	n/a
Number of Cases Upheld by Local Government Ombudsman	Smaller is Better	Latest Quarter	2	4	2	4	4	2	▲		n/a
Number of reportable security incidents	Smaller is Better	Latest Quarter	?	?	1	0	1	14	★	There was 1 reportable security incident this quarter, which was as a result of a failure in allegations management process. This failure meant that allegations were being inappropriately shared with potential employers. Confirmation was received from the ICO on 2.12.21 that no further action was necessary, although they provided several recommendations which are now being taken forward.	n/a

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
Number of FOIs & EIRs	Plan is Best	Latest Quarter	508	542	346	285	286		n/a
Number of Information Security breaches	Smaller is Better	Latest Quarter	256	227	249	230	211		n/a
Number of SARs	Plan is Best	Latest Quarter	101	137	112	104	100		n/a

Finance

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
% of Council Savings Portfolio Achieved	Bigger is Better	Latest Quarter	85.9%	102.3%	80.7%	83.8%	84.5%	90.0%	▲	The end of Quarter 3, £5.717 million savings are forecast to have been delivered against a target of £6.761 million. This represents 84.56% of the annual target achieved. A total of £1.044 million is forecast to be at risk of being delivered by the end of 2021/22, which would represent 15.44% of the annual target. The most significant elements at risk being £870k reablement savings and £111k income target across Economy, Environment & Infrastructure.	n/a
Forecast Revenue Budget Outturn % Variance	Smaller is Better	Latest Quarter	0.4%	-0.6%	1.7%	0.4%	0.2%	0.0%	▲	The forecast revenue year end position based on January 2022 (Period 10) forecasts for the 2021/22 financial year is an overspend of £946k all of which relates to non-Covid-19 expenditure, as we are forecasting a balanced position in relation to Covid-19 expenditure and income	n/a
Audit recommendations outstanding beyond target date	Smaller is Better	Latest Quarter	9	1	26	26	1	0	▲		n/a
Funds raised from asset sales (Capital receipts) (£000)	Bigger is Better	Latest Quarter	£1,696	£4,218	£35	£176	£0	£8,770	▲	No sale completions during Q3. Capital receipts achieved to date total £211,941. Agreed sales due to complete by 31st March 2022 total £6,111,800. AMPS are still experiencing delays in planning decisions resulting in a number of development sites now being reprofiled for disposal in 2022/23.	n/a

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
Amount of uncommitted general reserves (£000)	Plan is Best	Latest Quarter			£21,990	£21,990	£21,990		n/a

Human Resources

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Days lost to Sickness per FTE (excluding Schools and GFRS)	Smaller is Better	Latest Quarter	1.58	1.43	1.60	2.19	2.55	1.80	▲		n/a
% of appraisals completed	Bigger is Better	Latest Quarter	26.7%	32.7%	13.8%	39.4%	46.7%	85.0%	▲		n/a

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Comments	Comparator Group
GCC Turnover (staff leaving as a % of all staff)	Smaller is Better	Rolling Year	9.3%	9.1%	10.3%	11.6%	12.1%		n/a
Turnover of all adults social workers and senior practitioners	Smaller is Better	Rolling Year	10.1%	9.9%	14.5%	16.2%	15.3%		n/a
Turnover of all children's social workers and senior practitioners	Smaller is Better	Rolling Year	15.1%	18.1%	21.6%	22.1%	22.9%		n/a
Days lost to sickness/absence per FTE - Rolling Year	Smaller is Better	Rolling Year	6.25	5.64	5.92	6.97	7.91		7.38

	Good Performance High/Low	Reporting Basis	Dec-17	Dec-18	Dec-19	Dec-20	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Employee Engagement Index	Bigger is Better	Annual		93.4%	94.4%	96.3%		95.0%		This year the Employee Engagement Survey is due to be held in April. Therefore, it is expected that results will be published in Q1 22/23	n/a

ICT

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Total number of ICT Priority 1 incidents raised per quarter	Smaller is Better	Latest Quarter	3	6	7	2	10	3	▲	There has been a significant rise in P1 incidents this quarter. There was no single underlying cause to link the incidents. 3 of the 10 incidents were not user-impacting. Data is taken from the GCC Monthly Service reports, original data source ServiceNow. Oct-21 11/10 - 3rd party human error changed RBAC/permissions on the Production system by accident, outside of agreed processes. 18/10 - 3rd party network failure impacted on backups *(not user-impacting)*. 21/10 - 3rd party network failure impacted on backups, unrelated to incident 18/10 *(not user-impacting)*. 26/10 - LCS and EHM systems down due to database lock caused by faulty indexing job. Nov-21 20/11 - Outside of supported hours, an Exchange server went non-responsive and email was unavailable *(not user impacting, outside hours)*. 25/11 - Stroud library and linked sites lost network connectivity when planned maintenance (non-ICT) arranged by the business took down power. Dec-21 02/12 - Stroud library and linked sites lost network connectivity. Service was restored without ICT intervention and AMPS are undertaking thorough checks of the power supply. 13/12 - Users experienced errors preventing remote connection and very slow performance following a Netscaler firmware upgrade. 16/12 - Users unable to access Citrix Blue Layer due to 3rd party human error when incorrect ESX host was powered down while trying to improve performance. 20/12 - Cyber security incident at Gloucester City Council triggered a P1 response within County to maintain County security, including blocking City email and access to County network.	n/a

SHE

	Good Performance High/Low	Reporting Basis	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	Target Dec-21		Comments	Comparator Group
Number of RIDDOR reportable incidents	Smaller is Better	Latest Quarter	1	27	2	2	0	5	★		n/a

Strategic Risk

Strategic Risk Register

Strategic Risk 1: Corporate Governance											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR1.1	Failure in corporate governance which leads to service, financial, legal or reputational damage or failure.	Ayliffe, Rob	High 20	Moderate 8	Moderate 8	Moderate 8	Moderate 8	Moderate 8	→	●	A Public Interest Report was issued by the Local Government and Social Care Ombudsman during Q3 concerning a failure by the Council to meet the needs of an individual in receipt of adult social care services. However, action has been taken to swiftly address the recommendations within the report, and an independent review was commissioned into the issues concerned to ensure that there are no wider corporate governance issues to be resolved. For that reason, the risk remains rated as moderate.

Strategic Risk 2: Financial											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR2.4a	Reductions and changes to funding in current financial year and any additional unplanned overspends from previous financial year, with the potential to impact Core Services.	Blacker, Paul	High 25	Moderate 10	Moderate 10	Low 5	Low 5	Low 5	→	★	The final Finance Settlement announced in February 2021 was in line with expectations allowing the Council to set a balanced budget for 2021/22 and the outturn position for 2020/21 was an underspend, so the level of General Reserves has increased.
⊞ SR2.4b	Reductions and changes to funding for future financial years, potentially impacting, in particular, Core Services	Blacker, Paul	High 25	High 15	High 15	High 15	Moderate 10	High 15	↑×	▲	The announcement of a one year funding settlement for 2022/23 has increased the uncertainty about future funding levels beyond next financial year.
⊞ SR2.8	The cumulative impact of service pressures, particularly the financial impact of COVID-19, increased demand in Children and Adults social care and Educational High Needs, potential grant reductions and the under delivery of planned savings will result in major over-spend positions in current financial year.	Blacker, Paul	High 25	Moderate 12	Low 4	Moderate 12	Moderate 12	Moderate 12	→	●	It is anticipated that the allocation of COVID grants in 2021/22 and the carry forwards from 2020/21 will be sufficient to cover the additional expenditure / lost income associated with COVID this financial year. However increased non-Covid related demand for Children's social care external placements and SEND provision in Education have placed significant pressure on the budget in 2021/22.

Strategic Risk 3: Infrastructure											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR3.1	Failure to ensure technology managed by ICT (including communications abilities) remains fit for purpose.	Quayle, Mandy	High 25	High 15	High 15	High 15	High 15	High 15	➔	▲	Reviews are being undertaken for each element of the service and an audit plan is in place we expect these measures to reduce the risk level during 21/22 Items below are a summary of the 'Controls in Place' field held on the Strategic Risk Register: • Director level ownership of the ICT Managed Service contract with Cantium • ICT client team staffing structure re-developed - e.g. greater engagement with all Directorates via ICT Business Relationship team, underpinned by an internal Strategy & Architecture function. • Governance in place to ensure any ICT operational risks and issues are appropriately managed • ICT Strategy, Service Plan and strategic roadmap in place to address ageing and legacy technological products and solutions • Comprehensive MTFS/capital expenditure activity to address a legacy of under-investment in technology and digital solutions • Significant project activities have been undertaken to modernise/stabilise critical infrastructure, focused on a journey to cloud technologies via improved WAN / LAN / telephony / Wi-Fi services. • The new Digital and ICT operating model is governed through a robust set of meetings including a structured Digital and ICT Senior Management Team meeting that reviews all aspects of the service delivery.
⊞ SR3.2	Failure to protect the council's key information and data from Cyber Attack.	Quayle, Mandy	High 25	High 15	High 15	High 15	High 15	High 15	➔	▲	There is an increase prevalence of cyber attacks within both council and major suppliers. As an organisation we continue to be extra vigilant. Although this quarter we are not changing the risk rating we are mindful this situation can change quickly and are therefore keeping this under review. Items below are a summary of the 'Controls in Place' field held on the Strategic Risk Register: • ICT Managed Service contract with Cantium in place to provide technological controls and measures against cyber attack • ICT client team staffing structure has been re-developed to give closer working with the Information Management Service. • Governance in place via the Information Board to ensure any technical and non-technical operational risks and issues are appropriately managed • Cyber & Information Management (Procurement) Policy in place • Comprehensive MTFS/capital expenditure activity to address a legacy of under-investment in technology and digital solutions • The annual Independent IT health check has been completed and remediating any issues found in partnership with suppliers. • Significant change activities have been undertaken to modernise/stabilise critical infrastructure, e.g. telephony, Wi-Fi, video-conferencing, etc. • Regular communications are circulated and training provided to ensure that staff are fully aware of their responsibilities to help in the fight against cyber-crime. • The Digital Board is now established to control and manage data and information across the council • Internal audit has a programme of cyber audits for 2021 / 22

Strategic Risk 5: Organisational Change Programmes											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR5.3	Provider failures result in the council being unable to achieve its strategic objectives	Scott, Sarah	High 25	High 20	High 20	High 20	High 20	High 20	➔	▲	Risk or provider failure remains high due to the growing number of outbreaks in the community, though these are mainly logged/identified in care homes in relation to residents home care providers are reporting on higher than normal levels of staff sickness and absence. Recruitment and retention continue to be an issue across all sectors but the issues within care in the community are now being further complicated by staff choosing to leave before the further roll out of mandatory vaccinations, (for community providers), in April. Latest estimates indicate that the independent H&SC sector has lost approximately 30% of their staff in this fiancial year

Strategic Risk 6: Collaborative Working											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR6.1	Failure to maintain effective relationships with key partners and organisations and shared funding arrangements, impacting on our ability to meet statutory and local requirements.	Bungard, Pete	High 20	Moderate 8	Moderate 8	Moderate 8	Moderate 8	Moderate 8	➡	●	The Coronavirus pandemic has taken priority over the last 22 months and, when formal Covid restrictions were lifted, a move towards agile working took place. Arrangements have reverted back to work from home where possible for the time being, in line with current government guidance around the Omicron variant. We are still seeing highly effective and very positive working relationships with partners and organisations to meet statutory and local requirements. The LRF, other emergency management functions and business continuity arrangements ensure the county continues to meet its statutory and local requirements effectively. Leadership Gloucestershire meetings continue, albeit remotely for the time being, and continue to provide the Covid 19 updating function that the County and District Leader's meeting was set up to establish at the beginning of the pandemic. Leader's Stocktake meetings; regular MP briefings with Health; Covid 19 Member Engagement Board and Public Health Assurance Boards all continue. Members have returned to face-to-face meetings for statutory meetings. Moving forward, we hope to continue with hybrid working arrangements in keeping with the needs of the business once the risk associated with the current variant has passed.

Strategic Risk 7: Safeguarding Children, Young People & Adults											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
SR7.1	Failure to protect vulnerable adults in Gloucestershire from abuse neglect in situations that potentially could have been predicted and prevented.	Scott, Sarah	High 20	Moderate 10	Moderate 10	Moderate 10	Moderate 10	Moderate 10	→	●	The safeguarding team continues to experience a very high workload, which is causing delays in decision making regarding safeguarding concerns. The team is mitigating this risk by prioritising cases according to severity of risk. A new practitioner is joining the team this week, which will assist with managing the volume of work. GSAB has published a new Safeguarding Adults Review and will be progressing the action plan across the multi agency partnership. The learning from this review will contribute to the improvement in support offered to people with complex lives who are at high risk of harm.
SR7.2	Ineffective social care practice, management oversight and review processes resulting in drift and delay for children and young people in situations of harm.	Spencer, Chris	High 25	Moderate 8	Moderate 8	Moderate 8	Moderate 8	Moderate 8	→	●	Our Accelerated Improvement Plan, QA and Performance Management arrangements continue to provide the framework for our practice improvement work. This is supported by our Essentials 2.0/3.0 and Team Improvement Programmes. Quarter 3 has been particularly challenging due to high demand and greater levels of vacancy, turnover and sickness. This has impacted on performance and practice. SLT, working with corporate colleagues, have taken robust action to revise our employment offer for both agency and permanent staff to ensure it remains competitive. This should begin to impact from January onwards. We have also completed an extensive case file screening exercise to identify and address any shortfalls in case recording due to the challenging operational landscape.
SR7.4	Failure to close the gaps in educational outcomes for vulnerable learners and their peers resulting in adverse impacts for children and families, increased cost/pressures on specialist provision and damage to reputation.	Harrison, Kirsten	High 20	Moderate 12	Moderate 12	Moderate 12	Moderate 12	High 16	↑×	▲	Local and national data indicates that the pandemic has further exacerbated the learning gap between those of vulnerable learners and their peers with significant and sustained increases in requests from parents and schools for statutory assessment to reduce educational gaps . There are sustained increases in workload pressures and costs on specialist provision and the services that support children with additional needs. SEN2 data at current rates indicate significant risk of judicial review and reputational damage around the timeliness of statutory assessment and the ability to make appropriate provision for vulnerable young people and their families to address gaps in educational outcomes. The newly evolved Gloucestershire Education Forum will be a platform through which to try to address some pre-pandemic existing local education system factors playing into this risk. The longer term impact of this work will not address the immediate risks where extra resource is needed to respond to the sustained high levels of need.
SR7.5	Insufficient workforce capacity and/or instability adversely impacting on pace and sustainability of improvement and contributing to discontinuity in social engagement with children and families	Spencer, Chris	High 16	Moderate 8	Moderate 8	Moderate 8	Moderate 12	Moderate 12	→	●	Q3 has been particularly challenging from a workforce perspective. High demand has been experienced alongside higher levels of vacancy, turnover and absence. SLT has taken robust action to revise our employment offer which should begin to impact positively from January onwards. Managers are prioritising tasks accordingly to minimise the impact for children.
SR7.6	Unable to support all those who can, to live independently at home, because demand for home care services outstrips available capacity. Resulting in the reliance on temporary respite/alternative bed based care in lieu of home care	Scott, Sarah	High 20	Moderate 12	Moderate 12	High 16	High 20	High 20	→	▲	Risk remains high due to staff shortages and the continued pressure of the impact of CV19. Delayed hospital discharges for home care are now being reviewed for Respite in lieu of domiciliary care therefore we are already starting to rely on the temporary use of respite to meet the demand on the home care market. Some of the workforce issues have exacerbated by the need to grow the Home First model at this time so we are looking at mitigations and reviewing the risks that this could potentially pose to market sustainability. We are therefore utilising Home first delivery as part of our market incentives.
SR7.7	Failure to develop sufficient placement capacity to meet the needs of children looked after	Spencer, Chris	High 16	Moderate 12	Moderate 12	Moderate 12	Moderate 12	Moderate 12	→	●	The difficulties in the provider market due to Covid, and other factors such as workforce availability, alongside the ongoing growth in our children in care population have resulted in a very challenging Q3. The Sufficiency Strategy continues to provide the focal point for our work and is currently being refreshed. Greater use of our in house foster care capacity and Trevone House have helped offset some of the need for residential placements although some growth has been experienced. The next stage in developing capacity with provider partners is also commencing.
SR7.8	Risk of legal action being taken against the Local Authority due to failure to complete a Deprivation of Liberty assessment within the stated time lines. Since a significant and sudden change in the law due to a Supreme Court Judgement in March 2014 there is an excessively high demand for best interest assessments to be carried out for Deprivation of Liberty (DoLS) authorisations.	Scott, Sarah	High 20	Moderate 9	Moderate 9	Moderate 9	Moderate 9	Moderate 9	→	●	Team continues to triage cases using the ADASS tool and prioritise accordingly. Backlog remains stable. The DHSC has confirmed that the DoLS replacement Liberty Protection Safeguards will not be implemented in April 2022.

Strategic Risk 8: Workforce Planning & Employee Relations											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR8.1	Difficulties in recruiting and retaining experience workers in hard to fill roles leading to vacancies and/or high numbers of agency staff in some areas. This is particularly prevalent for social workers but is also increasingly a factor for other professional roles.	Quayle, Mandy	High 16	Moderate 12	Moderate 12	Moderate 12	High 16	High 20	↑×	▲	A report was recently presented to CLT with proposals to upgrade the County's capabilities with regard to recruitment branding and other recruitment approaches. Recommendations were agreed and work has begun to invest in and upgrade our capabilities in labour markets which are anticipated to remain highly competitive for the forseeable future.

Strategic Risk 10: Emergency Response & Business Continuity Threats											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR10.1	Failure of the Council or a key partner to effectively respond to a major incident such as flooding that results in community disruption and failure to return to normal, within required timescales.	Preece, Mark	High 20	Moderate 12	Moderate 12	Moderate 12	Moderate 9	Moderate 9	→	●	CPT have been working with the County Council's emergency response teams on reviewing their current status and requirements (ie: team membership, training, procedures etc…) 2 team are fully staffed, 1 team has had a full revision and due to be fully staffed by the end of Q4. 1 team has completed training / exercises whilst the remaining 2 teams are due to undertake an exercise by the end of Q4. Emergency Control Centre has been assessed and upgrade in progress due to be completed by end of Q4. Silver group to be established with a response role, CPT working with group to support requirements. 'Silver' Toolkit being drafted. Director on-call guidance updated and training sessions delivered, a number of Directors attended the College of Policing Multi-Agency Gold Incident Command (MAGIC) Lite training session and invited to familiarisation session for the Strategic Co-ordination Centre (SCC) LRF Local Risk Register collectively assessed and Community Risk Register due to be finalised by end of Q4. Role of Elected Members training delivered to elected members and uploaded onto Members Matters library of training. CPT officer's attend 100% of the LRF monthly meetings as well as all response meetings as required and are in regular liaison with the LRF secretariat. CPT work with five of the district councils via a Service Level Agreement to support them with their emergency management framework. Covid is well managed and resource is in place. Civil protection team is adequately staffed 365 days a year. Executive directorate response is in place and LRF training is ongoing and attended by all directorates.
⊞ SR10.4	Due to insufficient business continuity management arrangements failure of the Council or a key partner to effectively deliver their statutory services, resulting in community disruption and failure of corporate objectives.	Preece, Mark	High 16	Moderate 12	Moderate 12	Moderate 12	Moderate 12	Moderate 12	→	●	Civil Protection Team have requested Business impact analyses (BIAs) be conducted before BCPs are developed / updated. Those responsible for completing the BIAs are taking an unexpected length of time to return a finalised BIA (the average elapsed time from a facilitated BIA session to delivery by the plan owner of a signed off BIA is six weeks), with extra / unplanned time being spent by the lead officer for BCM chasing up plan owners for their BIAs in that intervening period. Work continues with each Directorate to support and facilitate the completion of BIAs but there is concern this is taking too long. This Risk has been elevated for CLT's attention and it has been agreed to extend the time scales for completion of department's BIA's and subsequent BCP's. Department Heads are being encouraged to make this a key priority, but CLT recognise there are a number of competing demands whilst we are competing with COVID. UPDATE FROM THE LEAD OFFICER FOR BCM:- The latest management information (MI) dated 14/01/2022 indicates that some 88% of services across GCC, incl. GFRS, have a business continuity plan (BCP) in place - marginally down over the quarter and explained by some plans produced six months ago requiring a refresh. However, it remains the case that the majority of plans - 73% overall - require review (i.e. they have not been re-evaluated / updated in the last six months, are not in the latest corporate format and so do not at present fully comply with the agreed Business Continuity Policy). 10% of services across the council are not able to evidence a BCP of any form (and are therefore considered as not having a BCP in place). The preceding figures support the risk rating for this quarter. In line with best practice, business impact analyses (BIAs) need to be conducted before BCPs are developed / updated and BIA sessions continue to be rolled out to plan owners. However, it continues to be the case that those responsible for completing the BIAs are taking an unexpected length of time to return a finalised BIA (over six weeks elapsed time against the expected two week timescale). The development of BCPs in the required format is also taking longer than

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		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
											expected with some plan owners taking a further five weeks on average (rather than the expected four week timescale) to complete the work. Three BCPs are overdue by more than three months, with one of these overdue by six months. A progress report was made to CLT on 09/12/2021 outlining that the delivery of the full BCM project is likely to take an extra three-six months if work continues at the current pace. CLT accepted that this delay is not unreasonable given that there are other demands and impacts cross the council currently which will affect completion. The project overrun will not foreseeably worsen risk impact. Notwithstanding the above, as the project progresses, more BIAs and BCPs will be updated across the organisation and processes will be implemented to ensure that plans are rehearsed and tested, resulting in greater confidence in the robustness of each service's BCM arrangements and a consequent overall reduction in risk impact. However, business continuity management is not a "preventative" discipline and does not aim to reduce the likelihood of disruption. It should also be noted that CLT has agreed, per the council's Business Continuity Policy, that it is neither desirable nor practicable to entirely eliminate low frequency but high impact disruption risks at source (the appropriate response to such risks being for GCC to plan to react effectively should the risks be realised - preparing to minimise the impact of the incident and to promptly recover the affected activities, i.e. business continuity planning).
⊞ SR10.6	Insufficient workforce capacity and/or instability adversely impacting on pace and sustainability of improvement and contributing to increased risk to firefighter safety or capability to deliver emergency services to the community	Preece, Mark	High 20	Moderate 12	Moderate 8	Moderate 8	Moderate 12	Moderate 12	➡	●	There has been a recruitment and selection process carried out to backfill substantive posts. In year and MTFS bids are progressing to cover additional resources as well as funding for development and training. Even with these measures in place it is still recognised that there are many work pressures on staff and work is underway to alleviate some of these pressures. This Risk has been identified by the recent HMICFRS Inspection Report and work is underway to identify the additional resources required to address the risk of having insufficient capacity and capability within the workforce.

Strategic Risk 11: Information Governance											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR11.1	Failure to comply with data protection and to protect the confidentiality, integrity and availability of information.	Ayliffe, Rob	High 20	Moderate 12	Moderate 12	Moderate 12	Moderate 12	Moderate 12	➡	●	During Q3, the ICO conducted a follow-up review to its 2010 audit and was sufficiently satisfied with the progress being made to confirm that there will be no further intervention from them. The risk of cyber attack continues to be an area that is closely monitored, with remediation plans continuing to progress to enhance the security measures the Council already has in place. The council took swift action to insulate itself from any risks arising from the recent attack on Gloucester City Council. Training and a desktop exercise are planned during Q4 to test the Council's cyber resilience plan and any issues or lessons identified will be built into work programmes.

Strategic Risk 12: Climate Change											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments

⊞ SR12.1	Failure to deliver the county council's climate change strategy, impacting our ability to deliver our organisation, partnership and community activities, and to mitigate the impacts of a changing climate on Gloucestershire's natural environment, communities, business and visitors.	Chick, Colin	High 25	Moderate 10	High 15	High 15	Moderate 10	Moderate 10	➡	●	• *In December 2021, Cabinet approved the Climate Change Strategy Annual Report and Action Plan 2022/23-2027/28.*
											• *At the same meeting, the Council budget was approved for public consultation, which includes a proposed permanent provision of £1m revenue funding for Climate Change action*
											• *20,000 trees received, 'heeled-in' to be distributed to partners and landowners for this planting season*
											• *20,000 trees funded to be planted this season using grant funding issued to partners*
											• *10,000 ash dieback replacement trees to be planted this season by Highways; 4-for-1 replacement vs 2-for-1 target*
											• *60,000 trees will have been planted in total by the end of this season (inc 10,000 ash dieback replacement last season)*
											• *New staff joined the Sustainability Team, EE&I:*
											  ◦ *Climate Change & Air Quality Officer, 1 FTE*
											  ◦ *Sustainability & Engagement Officers, 0.8 FTE*
											  ◦ *Tree Project Officer, 1 FTE appointed December, to start late January 2022*
											• *Greener Gloucestershire campaign ran alongside COP26 in Glasgow (Nov), to raise awareness of climate change actions by the Leadership Gloucestershire partners*
											• *Tender published for electric vehicle on-road charging infrastructure, to be awarded January*

Strategic Risk 13: Uncertainties arising from the UK leaving the EU											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR13.1	Uncertainties arising from the UK leaving the EU with the possible impact on funding and policy change affecting Gloucestershire County Council and Local Government in general	Preece, Mark	High 15	Moderate 10	Low 6	Low 6	Moderate 9	Low 6	✓	★	Since leaving the EU there has been a slowly improving picture. Although there is recognition that over the last 12 months the EU exit has contributed to gaps in recruitment in some business areas; recent example being drivers for fuel delivery and public reaction to perceived shortages within supermarkets.

Strategic Risk 14: Community Infrastructure Levy											
		Risk Owner	Inherent Risk	Dec-20	Mar-21	Jun-21	Sep-21	Actual Dec-21	DoT Dec-21		Comments
⊞ SR14.1	Emergence of Community Infrastructure Levy (CIL)	Chick, Colin	High 16	High 16	High 16	High 16	High 16	High 16	→	▲	Continued discussions with all 5 District Councils re- their CIL, including bidding where appropriate. JCS CIL review still ongoing.