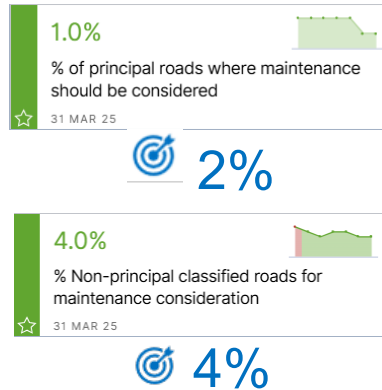


## Appendix 2a - Overview of Performance Q3 2025-26

KEY:  Target  
 Peer Group Average

### Achievements and Successes

#### Condition of Roads



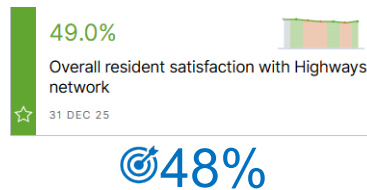
Gloucestershire was one of only 3 counties to receive a green score in the Department for Transport's latest [highways performance map](#). The map compares every local highway authority using three measures – the condition of roads, how much councils invest in maintaining them, and how effectively they follow best practice to prevent and repair potholes. The ranking reflects sustained improvement and investment delivering an increase in resurfacing, greater use of modern repair technologies and a shift towards faster, more permanent pothole repairs across the county's road network. The DfT notes that its professional assessment may vary from public perception.

Principal roads account for 10% of the road network. The condition of our principal roads requiring maintenance remains low at 1%. Recently published benchmarking data for 2024/25 tells us that this is the best performance in the comparator group and places us in the top quartile. The majority of the peer group sustained performance in single figures, however, around 80% of the counties in the group saw growth in maintenance required.

The proportion of non-principal roads where structural maintenance should be considered also remained steady at 4%, and continues to reflect top quartile performance. Non-principal roads form just over one-third of the road network (36%). The highest proportion of maintenance required among our peer group was 43%, showing a declining position up from 10% over the last 7 years. Other counties faced 16% of non-principal roads requiring maintenance and increases from 4% to 12% points.

Our sustained performance and the levels or direction of travel that other counties are seeing in road maintenance requirements, reflect the level of investment and focus in this area in Gloucestershire. However, our strategic priority relating to improving our roads is compromised as, over the long term, there is insufficient funding to maintain all the highway assets in their current condition.

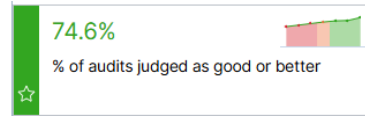
#### Highways Satisfaction



The NHT Public Satisfaction Survey indicated that resident satisfaction with our highways increased in 2025, with around half of respondents satisfied with a range of issues relating to condition, safety and accessibility (49% up from 46%). Performance is better than target and similar to the national average (50%). Nevertheless, while condition of highways, condition of road surfaces and deals with damaged roads/potholes all saw a positive direction of travel, we continue to score lower than average. Other areas where Gloucestershire was lower than the national average were public and responsive transport, and management of roadworks.

# Achievements and Successes

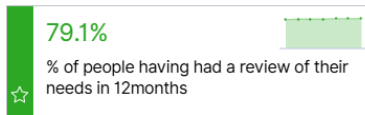
  
 % of Children's case audits judged as good or better



65%

The proportion of audits assessed as good or better has increased steadily over the past two years, reaching 74.6% in Quarter 3 up from 50%. However, the overall number of audits completed remains below the expectations of the Social Work Academy, with a particularly low return rate in November. There are around 40 auditors available each month, and with a return rate of 25 in November, opportunities are being missed to maximise our understanding of the quality of our practice and ensure that we have adequate sight across teams and the child's journey.

  
 Timeliness of Adult Social Care reviews

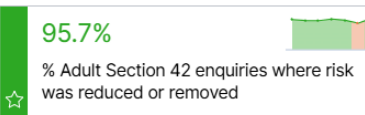


75%

The annual review of a person's support plan ensures that it continues to appropriately meet needs as these may gradually change over time. 5,474 people had a long or short-term Care Act support plan. Of these, 79% (4,331) had an up-to-date review or were not yet due a review. Performance has followed an improving trend for the last 3 years and remains better than target. Performance is also better than the national average for annual review compliance across all local authorities, 58%, as reported by the Care Quality Commission. In addition, 268 of the 333 individuals receiving mental health support from GHC had an up-to-date review, 81%, exceeding both the 12-month average of 77% and the target of 75%.

This positive trajectory reflects investment in this area and change to practices that have driven improvement.

  
 Adult safeguarding enquiries where risk is reduced or removed



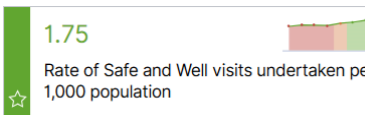
85%  
 89%

Reducing identified risk as part of a Section 42 enquiry is vital to safeguarding the adult's wellbeing, promoting their desired outcomes, and ensuring they can live as safely and independently as possible.

The percentage of Section 42 (S42) enquiries where risk was either reduced or removed has improved to better than target in Quarter 3 and is now the highest performance seen since Quarter 4 2024/25.

Recent system changes to the end of the Safeguarding Process have resulted in more accurate recording, including that of outcomes, which has likely had a positive effect on performance for this measure.

  
 Safe and Well visits completed



1.61

The rate of Safe and Well visits was better than target for the second quarter (1.75 per 1,000 population at 1,174 visits). Performance has seen steady improvement over the last year, with almost 200 more visits completed in Quarter 3 2025/26 compared with the same period in 2024/25. We are on track to exceed our annual target of 4,244 visits, with just under 1,100 in need of completion before the end of March.

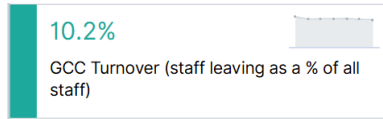
Focus is needed on those referrals that remain outstanding beyond the target date. There were 92 referrals for a Safe and Well visit which had been received more than 28 days previously at the end of Quarter 3. This is an increase from 30 referrals awaiting more than 28 days at the end of Quarter 2. 62 of those overdue at the end of Quarter 3 were rated as high risk and 12 as very high risk.

Of these, 11 high risk and 4 very high-risk referrals had been open for more than 90 days. These have been reviewed and only four will remain open. Closure reasons for the other cases relate to consent being withdrawn, lack of capacity within a supported living environment where the risk is managed, police intelligence confirming that a visit would be unsafe for staff, and eviction pending.

# Achievements and Successes



Staff Turnover



Overall staff turnover has remained stable at 10.2% for the 12 months ending December 2025. This has steadily reduced since September 2022 (13.9%). Turnover of children's and adult's social workers is also at a similar level at around 10%. Recruitment and retention continue to be key priorities.

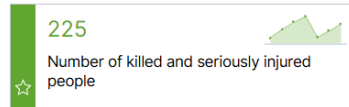
The recent update to statutory guidance will positively influence workforce stability, particularly within children's and adult services, by reshaping employment practices and introducing clearer criteria for direct employment and agency roles.

GCC's turnover rate remains below the sector average, and collaborative efforts with district colleagues have commenced to support talent retention in preparation for Local Government Reorganisation (LGR). The associated risk level continues to be assessed as Moderate (12).

# Positive Direction of Travel



Serious injuries and deaths on Gloucestershire's roads



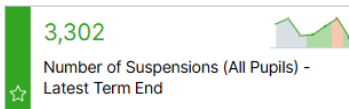
🎯 270

**Reported a quarter in arrears, cumulative calendar year to date July to September 2025:** There were 79 people killed or seriously injured on Gloucestershire's roads between July and September 2025. This brought the total to 225 people during 2025 to end of September, against a forecast of 270. Incidents have been lower than the 8-year mean for the majority of the last two years. Over a 12-month period, deaths and serious injuries are down 22% compared with the previous 3-year average. However, work continues with the aim of reducing this further through the use of average speed cameras, moving traffic enforcement and the Safer Roads and Community 20s initiative

This work will be strengthened by the UK's new [Road Safety Strategy](#) which was launched in early January 2026. The strategy aims for a 65% reduction in deaths/serious injuries by 2035. National Highways will invest in road maintenance and improvements, focusing on high-risk areas. Consultation is also underway regarding legislative changes like mandatory eye tests for older drivers, potential lowering of the drink-drive limit to align with Scotland and the introduction of penalty points for not wearing seatbelts.



Suspensions



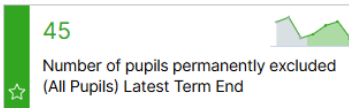
🎯 4,164

There were fewer suspensions during the first two terms of the 2025/26 academic year than in the previous two years during the same period. There were a total of 3,556 suspensions between September to December. This is a 15% reduction compared to the same time the previous academic year (4,161), and a 6% reduction compared to the same time in the 2023/24 academic year (3,782). Performance is better than target (4,161). It should be noted that the figure for 2024/25 could increase further due to the timeliness with which we are notified by schools.

Just over three-quarters of suspensions in the 2025/26 academic year to date were among Secondary school pupils (77%, 2737). This is similar to the same time the previous academic year (76%). Primary settings, alternative provision school and Special schools accounted for 16%, 5% and 2% of suspensions respectively



Permanent Exclusions



🎯 47

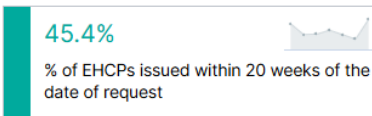
A reduction has also been seen in exclusions. In the 2025/26 academic year to date, there have been 45 permanent exclusions (down 6% and 25% compared with the same period in 2024/25 and 2023/24). Performance is better than target.

Slightly more Primary School pupils have been excluded this academic year to date compared to the same time in the previous academic year (21 up from 18 pupils). In contrast, fewer secondary school pupils were excluded (28 down to 21 pupils excluded).

We continue to see particular groups disproportionately affected. Boys, pupils with an identified SEN need and those in receipt of free school meals are more likely to be permanently excluded.



Timeliness of EHCP planning



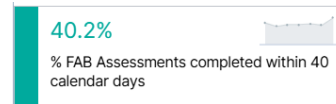
👥 31.2%

Just over a half of draft EHCPs were issued within 16 weeks of the date of request during Quarter 3 (54.9%) and just under half of final EHCPs were issued within the 20 weeks timescale (45.4%). This is the highest level of performance since reporting began in 2021, and up performance for both measures is up from an average of around 22% over the previous four quarters. Increased volumes of plans being completed were also seen. Timeliness of completing plans was better than the peer group average.

There has been continued investment in SEND Services. While there remain challenges with recruitment and retention, the SEND Service commissioned 300 advice requests from remote Educational Psychologists. Along with resource commitments, there has been a concentrated effort within the service to accelerate this work



### Financial Adult Social Care Assessment Timeliness



In Quarter 3, 1,311 FAB assessments were completed, with 40.2% concluded within 40 days, an 11% point improvement on Quarter 2 and the strongest performance since reporting began in April 2025. Overall performance was boosted by the introduction of light touch assessments for Gross Funded cases, though timeliness excluding these still improved throughout the quarter. Performance has strengthened due to closer oversight of appointment utilisation, quicker rescheduling of cancellations, and timely recording of completed assessments, supported by additional capacity from new visiting officers and overtime on global uplift work.



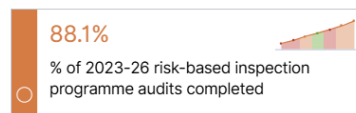
### People awaiting Adult Social Care Assessments

64 People Waiting

The number of people awaiting allocation for an assessment has reduced from 338 to 64 over the past 12 months, an 81% decrease. This sustained improvement reflects increased capacity and stronger allocation processes across locality teams, supported by regular caseload reviews and focused work on long-standing cases. In Quarter 3, the waiting list fell by a further 20 people (24%) compared with Quarter 2, following a temporary rise linked to staff absence and annual leave.



### % of 2023-26 risk-based inspection programme audits completed



88.3%

There is a requirement for business owners to make sure their buildings are safe. To support this, the service operates a Risk Based Inspection Programme (RBIP) which manages risk by taking into account various factors which relate to risk to life. During the programme which spans from June 2023 to March 2026, 2,343 premises have been identified for inspection. At the end of Quarter 3, 88.1% of the programme had been delivered (2,065 premises), against a target of 88.3% and is within tolerance of target.

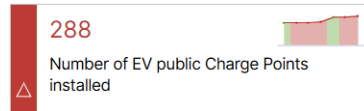
During quarter 3, activity was impacted due to two fire safety inspectors undertaking additional training for at least four weeks each, to allow a full DFSO rota to be established.

The level of risk and complexity of the fire safety issues identified during one recent inspection of a high risk public building has also significantly detracted time away from carrying out inspections due to the enforcement needed. Three other cases are also being investigated.

Nevertheless, in Quarter 3, the service completed 353 audits. Delivery is on track to achieve the 2,343 audit target by March 2026, with 278 audit inspections needing completion next quarter.

## Areas of Focus/Potential Concern

  
**Electric Vehicle Charge Points Installed**

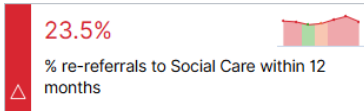


 **300**

A mid-sized electric car typically has a lifecycle emissions reduction of around 66% to 73% compared to a mid-sized petrol car, depending on the region and electricity grid's carbon intensity. An accessible charging infrastructure is vital to support the transition to electric vehicles. At the end of Quarter 3, progress continued to be slow; there were 288 public Electric Vehicle Charging Points (EVCP's) installed of which 276 were operational.

Delivery is lower than anticipated due to delays in starting the next work package (38 EVCPs) which is expected to begin on site in Quarter 4. Charge points had been delivered on site by beginning of February, with installation completion targeted for end February/beginning of March. The following work package of 56 EVCPs is still subject to technical approval and is anticipated to be delivered in the next few months. Delays are due to contractor's performance in supplying accurate site survey, drawing and costs. The team continue to work closely with the contractor to manage and address these issues.

  
**% of referrals to Social Care that are re-referrals within 12 months**




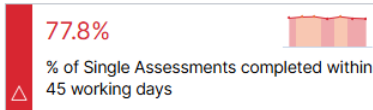
 **21.5%**  
 **20.9%**



In coming referrals have risen steadily since early 2023. Between April and December 2025, the average monthly number of referrals was just above 670, up from around 550 during the same period in 2023. This equates to an increase of 22%.

Just under a quarter of referrals were re-referrals in Quarter 3 (23.5%), while this is a decrease from 29% in Quarter 2, performance remains worse than target (21.5%) and the peer group average (20.9%). Performance is also prone to fluctuation and a sustained downward trend is needed to evidence real change.

With both the level of referrals increasing overall and re-referrals remaining high, re-referrals equate to 2,046 referrals in 2025 (24.7%), compared with 1,606 referrals during 2023. This is an increase in children of 27%.

  
**% of Children's assessments completed within 45 working days**



 **85%**  
 **83.7%**

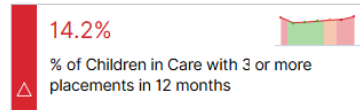
Single assessments evaluate the child's needs and the nature and extent of any risk or harm they may be experiencing. While gathering comprehensive information about a child and their family can be complex, timely completion of assessments is crucial to ensure that support or protection are provided swiftly when needed, and that families are not left waiting unnecessarily to learn whether intervention will occur.


Performance in completing assessments within 45 working days has declined over the past two quarters, from 83.2% in Quarter 1 to 77.8% in Quarter 3, moving from within tolerance of target to worse than target. We also perform less well than the peer group average (83.7%).

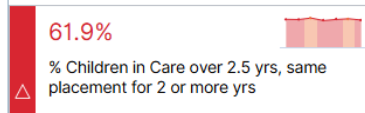
Just under 160 children and families are awaiting completion of an assessment which is overdue. This is the highest level since September 2023. Around 40 of these have been open for more than twice the expected timescale for assessment completion (more than 90 work days).


## Areas of Focus/Potential Concern


  
**Short and long-term stability of living arrangements for children in care**



 **12.0%**  
 **12.3%**



 **68.0%**  
 **67.8%**

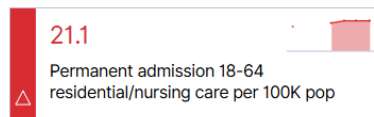
A stable home is a critical factor influencing a child’s ability to thrive and succeed. At the end of Quarter 3, 14.2% children in our care had lived in 3 or more places in the last 12 months, affecting 111 children. Short-term instability has increased for the fifth quarter, up from 11.1%, moving from better than target to worse than target (12%) over time. Performance is worse than the peer group average (12.3%) and the top peer group performer (7%).

61.9% of children who have been in our care over 2.5 years had been in the same placement for 2 or more years. 102 of the 268 children who have been in care for more than 2.5 years have therefore experienced instability of their home. Performance has declined compared to the previous quarter (64.8%) and the same time-period last year (66.4%). Long term stability remains below the target of 68% and worse than our peer group average at 67.8%.

The number of placement changes have continued to increase for children experiencing both short-term and long-term instability.

The risk relating to sufficient placement capacity increased to High 16.

  
**Permanent Admissions to Care Homes – 18-64 year olds**



 **16.5**  
 **16.5**

**Note:** From Quarter 3 reporting, the methodology for this measure changed from the Short and Long-Term (SALT) return to Client Level Data (CLD). A 12-month data refresh has been applied. The anticipated increase resulting from this change is clear in the data. Performance using this methodology is currently available on a quarterly basis only, and is published nationally a quarter in arrears.

Reducing permanent admissions for adults aged 18–64 remains central to Gloucestershire’s aim of supporting people to live independently in community settings. However, admissions increased slightly to 82 in Quarter 2 (21.1 per 100,000 population), up from 76 in Quarter 1 (19.6 per 100,000), and performance continues to be worse than both the target rate of 16.5 per 100,000, around 63 people, and comparator group. A similar rise in permanent admissions has not been seen in adults aged 65 and over following the change in methodology.

In addition based on our local Client Level Dataset extract (monthly count of people 18-64 starting long term residential or nursing care), Quarter 3 performance indicates broadly stable admission starts for people aged 18–64, although a slight increase has been seen in the most recent quarter, averaging 15.3 per month, around 5% more admissions, than the 3-year local average of 14.6.

The risk relating to inability to support independent living remains rated High 16.

## Areas of Focus/Potential Concern

  
 Adult Social Care provider ratings



The proportion of Adult Social Care providers rated as Good or Outstanding reduced for the second quarter from 87% to 81%.

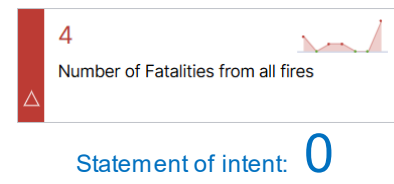
At the end of Quarter 3, Gloucestershire had 393 CQC-registered providers, 254 commissioned by the Council. These include 16 rated Outstanding, 191 Good, 28 Requires Improvement, and 1 Inadequate, with 3 inspected but awaiting a rating and 15 yet to be inspected.

Of the 4,566 people supported by inspected providers, 3,690 (81%) are with Good or Outstanding services, 690 (15%) with Requires Improvement providers, 9 (<1%) with the Inadequate provider, and 177 (4%) with providers inspected but not yet rated.

National CQC backlogs continue to delay inspections, meaning published ratings may not reflect current service quality. To strengthen oversight, the Council has introduced a new quality assurance framework, annual visits and regular provider self-assessments, which is expected to provide clearer assurance and more timely quality trends over the coming quarters.

Note: Figures reflect a point-in-time snapshot. A methodology change, driven by improved data insights, means data cannot be retrospectively updated.

  
 Number of fire fatalities

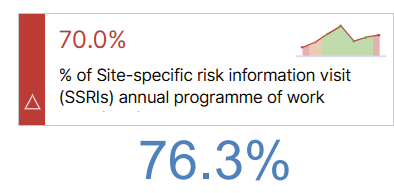


There were four fatalities as a result of fire in Quarter 3. This equals the number of deaths during 2024/25. Three of the deaths related to a family and took place during one fire incident.

An investigation and report are completed following any fire which includes a fatality. Information about these, and all fires, such as the cause of fire, is used to help target our fire prevention campaigns. The Service has made progress on the actions following the review of fatal fires in 2024/25. The trend for older men, living alone, with hoarded or cluttered homes, who smoke and may have been drinking was clear. These risk factors have been shared with all agencies who work with or support people with such factors so that agencies can make a referral for a home fire safety visit. The Service is engaging with "Men's Groups" to offer safety talks, but many men do not engage with support services, so this is an ongoing challenge. The fire investigation and coroner's findings relating to the incidents in Quarter 3 are awaited and will further inform our prevention work.

Following the fatal house fires in December and early January the Service has received a significant rise in requests for home fire safety visits, and an increase in engagement with safety messaging.

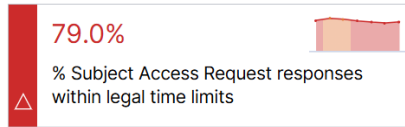
  
 % of annual programme of site-specific firefighter risk information visits completed



Site Specific Risk Information (SSRI) visits are visits to premises to identify potential risks to firefighters in the event of a fire. During the 2025/26 programme, 80 premises have been identified to receive a SSRI visit. Between April to December 2025, 70% of visits had been completed (56 visits), although only 6 visits were achieved in Quarter 3. Delivery is behind target. 24 visits would need to be undertaken in Quarter 4 in order to complete this year's programme.

## Areas of Focus/Potential Concern

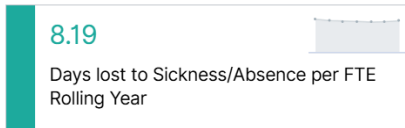
  
**Subject Access Requests  
 responded to within  
 timescales**



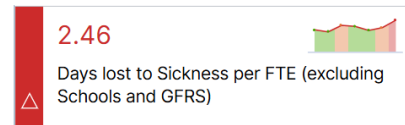
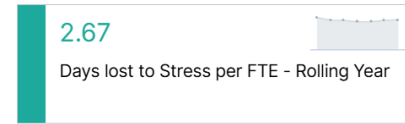
 **90%**

Timely completion of Subject Access Requests (SARs) has declined over the last year, from 93% (Q4 2024/25) to 79%. This remains below both GCC and the ICO target of 90%. Performance has been adversely affected by sickness absence, which has reduced available capacity within the team. At the same time, increasing volumes of SARs and the complexity of individual requests have placed additional pressure on resources, contributing to longer processing times. Overdue requests continue to be closely monitored to minimise the risk of significant or prolonged backlogs.

  
**Days Lost to Sickness**



 **9.2 days per FTE**



 **2.0 days per FTE**

Over the past 12 months, GCC has lost just over eight days per full-time equivalent (FTE) due to sickness absence.

Sickness levels increased in-quarter, reaching their highest point in four years. While some seasonal increase is anticipated during winter months, the primary driver of this rise has been an incremental rise in stress and depression related absence over the last 3 quarters. Stress accounts for approximately one-third of all sickness cases.

On a rolling annual basis, stress related absence equates to nearly three working days lost per FTE and in-quarter rates have increased across almost all directorates compared with the previous quarter.

Targeted action is underway to mitigate this risk, including strengthened absence management arrangements and a renewed organisational focus on wellbeing. During the quarter, Mental Health First Aiders were trained and introduced, leadership capability was enhanced through dedicated stress management sessions at the November leadership conference, and plans are progressing to embed wellbeing objectives within the new Performance Development Review (PDR) framework, reinforcing accountability at both individual and managerial levels.

Despite recent pressures, overall sickness performance remains steady and favourable when benchmarked against comparator organisations, providing assurance that the Council continues to perform relatively well in this area.

# Long-Term Challenges



Pregnant Smokers achieving a 4-week quit



80%

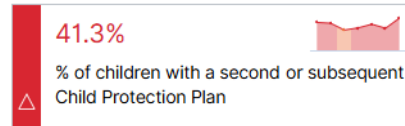
(Reported a quarter in arrears – Quarter 2 2025/26)

The proportion of pregnant smokers achieving a 4 week quit remains a challenge, with performance at 56% against a target of 80%. However, this continues to exceed the national average (48.7% in 2024/25).

Numbers being referred into the service remain low. Overall performance is still affected by ongoing challenges with referral quality from partner organisations. However, work with the midwifery team to strengthen referral pathways is progressing and is expected to support further improvements in future quarters.



Children becoming the subject of a Child Protection Plan for a second/subsequent time



25.0%

26.6%

Just over 4 in 10 children who became subject to a child protection plan in Quarter 3 required further safeguarding intervention following a previous plan. Although this represents an increase from 28.5% in Quarter 2, the rise equates to 4 additional children, due to the lower number of children starting plans overall this quarter; just over 100 compared with 152 in Quarter 1 and 137 in Quarter 2.

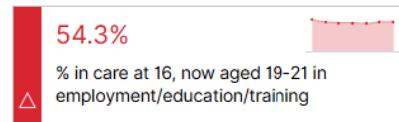
Over the rolling year, one-third of children starting protection plans had had a previous plan (33%, 174 children). Of these, one-third of repeat protection plans began within two years of their previous plan (34%).

40 children subject to a protection plan had had 3 or more plans (10% of all children subject to a plan).

The proportion of children who remained on a child protection plan for more than two years has reduced to 1.3%. While this represents a positive improvement, it remains essential that our interventions and step down are robust and effective enough to prevent children from returning to a plan shortly after support has ended.



% of Care Leavers in Education, Employment or Training



75.0%

55.2%

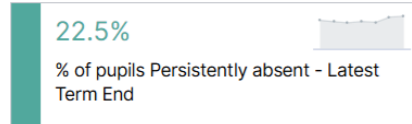
Improving outcomes for our care leavers continues to be an area of challenge. At the end of Quarter 3, just over half of our care leavers (54%) were in education, employment or training. This continues to be similar to the South-West average (56%) and nationally (54%), however, it should be noted that two-thirds of young people are in education, employment and training in the top achieving county in our peer group (66%).

We remain significantly below our target of 75%. Following the Ofsted inspection earlier this year an action plan is in place to drive improvements and support care leavers to achieve their aspirations.

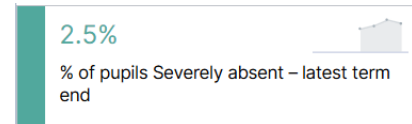
# Long-Term Challenges



**Persistent and Severe absence from school**  
(more than 10% and 50% of school days missed respectively)



**18.8%**



**2.4%**

In the 2025/26 academic year to date, 22.5% of pupils were persistently absent (absent for more than 10% of school days), up almost 5% points compared with the same period last academic year (17.9%). Around one-third of Special and Secondary school pupils were persistently absent, 32.8% and 33.4% respectively compared to 12% of Primary school pupils.

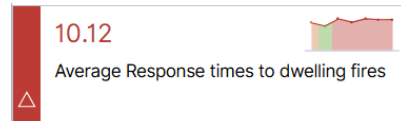
Around one-quarter of children in care were Persistent absent in the 2025/26 academic year (26.3%, 124 pupils), with 8.7% of children in care classed as severely absent (40 pupils). These children are losing a significant amount of education which research shows is likely to affect their outcomes.

2.5% of all pupils were severely absent (absent for more than 50% of school days) in the 2025/26 academic year to date. This was higher than at the end of the fifth term last academic year, after only two terms this academic year. Severe absence was most prominent in special and secondary schools, 5.6% and 3.5% whilst less than one percent (0.8%) of primary school pupils were persistently absent.

The proportion of pupils experiencing significant absence from school tends to grow throughout the academic year. Performance is already worse after two terms for both measures than the full year peer group average (18.8% and 2.4%, 2024/25).



**Average response times to dwelling fires**



**09:00**  
**09:04**

Timeliness of responding to all attended dwelling fires (National definition) has fluctuated shown a slight improvement over the last two quarters at around 10:10 seconds. However, response times remain worse than performance achieved throughout the majority of the previous three financial years, are higher than target and the peer group average (09:04 2024/25).

Wholetime availability remains at 100%, while On Call first pumps were available for 80% of Quarter 3. Lowest availability was in Chipping Camden (17%), followed by Nailsworth and Stow on the Wold (71% and 73% respectively). Availability varies depending on the time of day, with daytime availability at 70% overall, compared with 90% at night.

Wholetime crews responded in an average of 8 minutes 14 seconds during Quarter 3 (better than the target of 09:00), while on call crews responded in an average of 13 minutes 17 seconds.

