



## Quarter 4 2024/25

### **Purpose of the report**







To provide a strategic overview of the Council's performance for Quarter 4 2024/25.

### **The following scorecards are enclosed:**

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# 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
Highly Likely (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Remote (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

# Tackling Climate Change

## Climate Change

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
Number of EV public Charge Points installed	Bigger Is Better	Quarterly	46	224	224	224	232	500	▲	At the end of March 2025, there were 128 on street charge points installed with 100 public charge points and 4 rapid EVCP's installed at Arle Court. Of these 232 installed points, 220 are live and operational.	

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments	Comparator Group
Green jobs as a proportion of total jobs advertised online	Bigger Is Better	Quarterly	2.8%	2.9%	3.1%	2.7%	3.1%		

Measure Description	Tolerance Type	Reporting Basis	Dec-23	Mar-24	Jun-24	Sep-24	Actual Dec-24	Target Dec-24		Comments	Comparator Group
Tonnes CO2e Council Emissions (buildings/transport exc schools)	Smaller Is Better	Year to Date	3,751.25	5,798.46	1,188.10	2,211.39	4,061.74				

Measure Description	Tolerance Type	Reporting Basis	Dec-23	Mar-24	Jun-24	Sep-24	Actual Dec-24	Comments ↑	Comparator Group
Renewable energy generation (kWh) (Councils Estate, exc schools)	Bigger Is Better	Year to Date	46,700,969	64,017,590	18,123,078	30,197,875	44,427,888		

## Waste

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	↑ Comparator Group
% of household waste sent for reuse, recycling and composting	Bigger Is Better	Forecast	52.2%	52.5%	52.3%	51.8%	51.3%	53.0%	🟡		43.9%
Residual household waste per household (Kgs)	Smaller Is Better	Forecast	433	436	434	437	440	423	🟡	2024/25 waste data is still being gathered, and won't be finalised until around June/July. It is not expected that data will change significantly from this point onwards. Note January waste tonnages were around 10% higher than an average month due to it being post-Christmas, and due to the January calendar providing four and a half weeks of collections.	516
Net power produced (MWhr) by the Energy From Waste facility	Bigger Is Better	Forecast	34,565	36,055	23,977	28,417	34,202	29,100	★		
% of waste diverted from landfill	Bigger Is Better	Forecast	97.9%	97.6%	97.5%	97.1%	97.4%	92.8%	★		


# Improving Our Roads



## Highways

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of 2 hour emergency repairs made on time	Bigger Is Better	Latest Quarter	99.6%	99.6%	94.0%	91.8%	97.4%	96.0%	★		
% of 24 hour defects repaired on time	Bigger Is Better	Latest Quarter	99.9%	100.0%	99.8%	99.9%	99.9%	96.0%	★		
% of 28 day defects repaired or made safe in time	Bigger Is Better	Latest Quarter	99.9%	99.9%	99.8%	99.1%	99.7%	95.0%	★		
% of structural maintenance programme delivered	Bigger Is Better	Latest Quarter	94.6%	42.0%	76.9%	91.3%	108.3%	100.0%	★	Additional funding granted for structural maintenance over original budgets target set at the start of the financial year. 108% is the actual percentage completed compared to the original budget	

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments	↑ Comparator Group
Number of Winter maintenance runs completed	Smaller Is Better	Quarterly	90	0	0	38	99		
Average additional days to complete overdue 28 day defect repairs	Smaller Is Better	Quarterly	0.00	0.00	4.05	2.00	1.60		

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments		↑ Comparator Group
Number of repairs to non safety defects	Bigger Is Better	Latest Quarter	5,705	9,342	9,075	5,150	7,092			

Measure Description	Tolerance Type	Reporting Basis	Dec-20	Dec-21	Dec-22	Dec-23	Actual Dec-24	Target Dec-24		Comments	Comparator Group
Overall resident satisfaction with Highways network	Bigger Is Better	Annual	52.0%	50.0%	48.0%	48.0%	46.0%	48.0%		There continues to be a downward trend across all Authorities. Gloucestershire's score fell by 2% points, compared to 3% points fall Nationally and across the NHT Peer Group. We are still performing in the lower middle of our Peer Group (lowest 44%, highest 51%) and we have improved our ranking within the Group (from 19 of 30 in 2023, to 17 of 30 in 2024).	49.0%

Measure Description	Tolerance Type	Reporting Basis	Mar-21	Mar-22	Mar-23	Mar-24	↑ Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of principal roads where maintenance should be considered	Smaller Is Better	Annual	2.0%	2.0%	2.0%	1.0%	1.0%	2.0%			
% Non-principal classified roads for maintenance consideration	Smaller Is Better	Annual	4.0%	5.0%	5.0%	4.0%	4.0%	4.0%			

Measure Description	Tolerance Type	Reporting Basis	Mar-21	Mar-22	Mar-23	Mar-24	↑ Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of unclassified roads where maintenance should be considered	Smaller Is Better	Annual	12%	13%				12%			

### Flooding

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	↑ Comparator Group
% delivery of the annual gully emptying programme	Bigger Is Better	Latest Quarter	98.9%	28.1%	54.7%	75.4%	100.0%	100.0%	★		

### Road Safety

Measure Description	Tolerance Type	Reporting Basis	Oct-Dec 23	Jan-Mar 24	Apr-Jun 24	Jul-Sep 24	Actual Oct-Dec 24	Forecast Oct-Dec 24		Comments	Comparator Group
Number of killed and seriously injured people	Smaller Is Better	Calendar Year to Date	382	68	164	245	311	383	★		

# Sustainable Growth

## Connectivity

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% premises with next generation broadband access (NGA) Superfast	Bigger Is Better	Latest Quarter	98.2%	98.2%	98.3%	98.3%	98.6%	99.0%	●		97.6%
% of premises connected to broadband (Stage 1 - BT - FTTC)	Bigger Is Better	Quarterly	98.9%	98.9%	98.9%	99.0%	99.1%	99.0%	★		
% Gigabit (DOCSIS 3.1 or FTTP) Broadband coverage	Bigger Is Better	Latest Quarter	76.8%	77.7%	78.8%	80.0%	82.4%	80.0%	★		77.8%

## Growth Hubs

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
Number of light-touch business interactions supported by Growth Hubs	Bigger Is Better	Latest Quarter	88	85	96	105	261	70	★		



# Levelling Up Our Communities

## Addressing Public Health Inequalities

Measure Description	Tolerance Type	Reporting Basis	Dec-23	Mar-24	Jun-24	Sep-24	Actual Dec-24	Target		Comments	Comparator Group
% HLS customers achieving a significant risk factor improvement	Bigger Is Better	Quarter in Arrears	70.9%	61.8%	3.8%	47.0%	37.9%	65.0%	▲	<p>Just under two-fifths of Healthy Lifestyles customers achieved a significant risk factor improvement in Q3 (38%, 159/420). The service intends to close the gap on these risk factors and are proactively reviewing their database to accurately capture improvements across the service.</p> <p>From April 2024 there has been a new provider of the Health Lifestyles Service (HLS), which has led to a number of staff leaving during transition to the new provider, and some vacancies remain. The service has recruited to all senior posts as well as adding additional coaching capacity, however some vacant coaching posts are still being recruited to. Stop smoking support has been prioritised during the transition period and the service will expand its delivery of weight management, physical activity and alcohol reduction over forthcoming months. The numbers of referrals into the HLS have increased and both the numbers of people receiving support and those achieving a positive outcome has improved. The weight management offer has been strengthened with an additional 6 group sessions being added in Q3 with more groups being added in Q4. The service will continue to increase its service offers with support for physical activity and alcohol being offered in Q4.</p>	
% of pregnant smokers achieving a 4 week quit	Bigger Is Better	Quarter in Arrears	66.0%	45.0%	33.0%	86.0%	57.0%	80.0%	▲	<p>From April 2024 there has been a new provider of the Service and the transition from one provider to another has been extremely challenging. The service has faced ongoing difficulties in recruiting to vacant posts; however, a new pregnancy lead was appointed at the end of Q3, to support ongoing development and delivery. As a result, the pregnancy team was fully staffed by the end of Q4. We would therefore expect Q4 performance to reflect improvement, with further progress anticipated in Q1 2025/26, as the service stabilises and benefits from consistent leadership and full team capacity. In Q3, 57% (16/28) of pregnant smokers achieved a 4 week quit, compared to 86% in Q2. While the quit rate was higher in Q2, it was based on a very limited numbers of individuals accessing the service at that time.</p> <p>Q3 saw an increase in people setting a quit date, rising from 7 in Q2 to 28 in Q3. However, there was also an increase in 'Did Not Attend' rates during the Q3 period, which was attributed to the pre-Christmas period.</p>	

Measure Description	Tolerance Type	Reporting Basis	Dec-23	Mar-24	Jun-24	Sep-24	Actual Dec-24	Comments ↑	Comparator Group
Proportion of those who have successfully completed treatment for drugs and alcohol, are drug-free in treatment, or have sustained reduction in drug use	Bigger Is Better	Quarter in Arrears			44.0%	42.0%	41.0%	<p>The current performance against this measure is 41%.</p> <p>This measure covers the range of progress that individuals are making during treatment and combines: the proportion of those in treatment who completed successfully (excluding those who have acute housing problems), are drug/alcohol-free in treatment, or have sustained reduction in their drug and/or alcohol use. This is measured across a rolling twelve-month period. This is a key metric in measuring achievement against the 2021 Drug Strategy (HM Gov), and we have used it as a replacement to the previously reported successful completion and treatment effectiveness measures. This change has been made to coincide with the commencement of the new contract for the adult community drug and alcohol service (1 April 2024). This metric has been affected by the transition between service providers, therefore we will be baseline and set the annual target at the end of Quarter Four 2024-25.</p>	

Measure Description	Tolerance Type	Reporting Basis	Sep-20	Sep-21	Sep-22	Sep-23	Actual Sep-24	Comments ↑	Comparator Group
% Reception Children with obesity (including severe obesity)	Smaller Is Better	Academic Year	10.0%	13.6%	8.7%	8.6%	9.3%	<b>Latest annual data for academic year 2023/24</b> - Performance relating to the national children's weight measurement programme was released late and became available in Quarter 3.	8.8%
% Year 6 Children with obesity (including severe obesity)	Smaller Is Better	Academic Year	18.4%	21.6%	20.7%	20.4%	19.9%	<b>Latest annual data for academic year 2023/24</b> - Performance relating to the national children's weight measurement programme was released late and became available in Quarter 3.	19.1%

Measure Description	Tolerance Type	Reporting Basis	Dec-20	Dec-21	Dec-22	Dec-23	Actual Dec-24	Target		Comments	Comparator Group
Suicide rate per 100,000 Population	Smaller Is Better	3-Year Average	11.0	11.3	11.3	11.3	10.7	11.3	★	Relates to the period 2020-2022	11.9

# Transforming Children's Services

## Children's Social Care

### Quality Assurance

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% Children open to Social Care with 1-2 Social Workers in 6 mths	Bigger Is Better	Snapshot	86.5%	87.6%	89.3%	93.8%	94.0%	90.0%	★		
% of audits judged as good or better	Bigger Is Better	Latest Quarter	50.0%	51.0%	55.0%	59.0%	63.0%	65.0%	●		

### Contact Activity

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
% re-referrals to Social Care within 12 months	Smaller Is Better	Latest Quarter	19.7%	24.1%	23.3%	20.5%	21.6%	21.5%	●	This indicator is volatile, and it is positive that performance remains very close to target. We have seen a slight upward trend in re-referrals, and work has taken place to understand the reasons for this, and to put in place plans to reduce this.	18.9%
% of final decisions made within time for all contacts	Bigger Is Better	Latest Quarter	68.4%	65.0%	68.9%	77.0%	73.7%	90.0%	▲	We have seen a small drop in performance in this area. This can be partly explained by a number of days of Liquid Logic downtime during March, due to system technical issues and a planned upgrade. The downtime introduced additional delay in recording contacts during the period the system was unavailable. We are also confident that planned changes to the structure of the Front Door will result in improving performance in this area.	
% of initial visits to children carried out in timescale	Bigger Is Better	Latest Quarter				91.9%	88.4%	85.0%	★		

Children in Need of Help & Protection

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of Single Assessments completed within 45 working days	Bigger Is Better	Latest Quarter	74.0%	79.4%	82.7%	83.5%	77.9%	85.0%	▲	Q4 performance has dropped and is below our target. Quality assurance work undertaken within the service has identified potential causes for this and work is planned with the social work academy to support teams to work more efficiently and to ensure that the work undertaken within the assessment period is focused towards the early weeks of involvement with the family. The indicator also reflects a slight increase in demand, and a re-structure of the front door is anticipated to reduced demand at the front end of the system by providing information and advice at the earliest possible stage .	80.3%
% of children with a second or subsequent Child Protection Plan	Smaller Is Better	Latest Quarter	37.9%	35.9%	34.9%	26.1%	29.9%	25.0%	▲	Following a reduction in Q3, this figure has risen slightly in Q4. We know that some repeat CP plan reflect the legacy of poor historical social work practice, which has led to interventions not always achieving the desired outcomes first time around. Where this has happened, children can come back into the CP system. We also measure the rate of repeat CP plans within two years of the initial plan, and our performance in this area is good, reflecting what we believe to be better practice more recently, leading to smaller numbers of children coming back into the system.	26.2%
% of Child Protection Plans lasting 2 years or more	Smaller Is Better	Snapshot	2.2%	3.3%	1.9%	3.3%	2.3%	1.6%	▲	We have seen a further reduction in this figure, bringing it close to target. The number of children represented in this figure is small, and all children on long CP have been discussed at our legal gateway panel to ensure that we are clear about what legal intervention may be required to ensure safe permanence for the children.	2.5%

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% Strategy discussions took place in 5 working days	Bigger Is Better	Quarterly	97.2%	94.6%	95.7%	94.5%	93.8%	90.0%	★		

### Children in Care

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	↑ Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of children admitted to care within 12 months of previously being in care	Smaller Is Better	Latest Quarter	6.8%	7.0%	6.5%	4.8%	3.1%	7.0%	★		
% of Children in Care with 3 or more placements in 12 months	Smaller Is Better	Snapshot	14.0%	13.7%	11.1%	11.4%	11.9%	12.0%	★		9.3%
% Children in Care persistently absent	Smaller Is Better	Snapshot	25.6%	28.2%	20.0%	26.1%	27.9%	15.0%	▲		
% Children in Care over 2.5 yrs, same placement for 2 or more yrs	Bigger Is Better	Snapshot	64.9%	63.6%	63.1%	66.4%	60.7%	68.0%	▲	This is a challenging area of performance but one which we continue to focus on. Placement stability is impacted on by a number of factors and we are working hard to improve our performance through a number of routes, including the provision of improved placement support, the updating of our sufficiency strategy, improved commissioning arrangements, increasing the numbers of children placed within the county.	68.8%

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	↑ Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of Children who are fostered with in-house fostering	Bigger Is Better	Snapshot	69.0%	69.0%	69.0%	68.0%	67.0%	70.0%	●	The marginal fall in performance in this area reflects the ongoing challenging local and national context in terms of recurring foster carers. Although we have continued to recruit new foster carers, we have seen a number of carers retire due to age or personal circumstances. We are working with the regional fostering recruitment agency to try and maximize our reach for potential new carers, and the fostering improvement plans sets out how we are seeking to support and retain our existing carers.	
% Children in Care (CIC) reviewed in timescales	Bigger Is Better	Latest Quarter	94.5%	96.5%	98.5%	95.6%	99.2%	95.0%	★		

Care Experienced Young People

Measure Description	Tolerance Type	Reporting Basis	↑ Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% in care at 16, now aged 19-21 in employment/education/training	Bigger Is Better	Snapshot	53.4%	58.0%	53.8%	52.7%	52.7%	75.0%	▲		
% in care aged 16, now aged 19-21 yrs in suitable accommodation	Bigger Is Better	Snapshot	93.5%	91.1%	94.7%	94.2%	94.0%	95.0%	●	Performance in this areas remains good and close to target.	

# Transforming Children's Services

## Education

### Education

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments	Comparator Group
Number of Children with an EHCP	Plan Is Best	Snapshot	6,056	6,234	6,214	6,411	6,584		
Number of Children with an EHCP in progress	Smaller Is Better	Snapshot	616	715	709	750	811		
% of notifications to assess within 6 weeks of the date of request	Bigger Is Better	Quarterly	95.6%	99.8%	92.4%	98.7%	97.1%		
% of draft EHCPs issued within 16 weeks of the date of request	Bigger Is Better	Latest Quarter	30.1%	39.0%	33.8%	21.3%	29.3%		
% of EHCPs issued within 20 weeks of the date of request	Bigger Is Better	Latest Quarter	22.9%	38.9%	22.6%	23.0%	29.1%		38.5%
Rate per 1,000 of children with an Education Health and Care Plan	Plan Is Best	Latest Quarter	34.8	35.8	35.2	36.3	37.0		



Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments			Comparator Group
% of pupils Persistently absent - Latest Term End	Smaller Is Better	Snapshot	19.9%	19.7%	18.8%	17.9%	18.9%				19.5%
% of pupils Severely absent – latest term end	Smaller Is Better	Snapshot					2.0%				

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun -24	Sep -24	Dec -24	Actual Mar -25	Target Mar-25		Comments	Comparator Group
% of good or outstanding Early Years Settings	Bigger Is Better	Snapshot	91.4%	91.1%	90.3%	91.6%	92.7%	92.0%	★		
Number of pupils permanently excluded (All Pupils) Latest Term End	Smaller Is Better	Snapshot	78	145	174	48	72	78	★		
Number of Suspensions (All Pupils) - Latest Term End	Smaller Is Better	Snapshot	5,002	8,430	9,962	3,174	4,496	5,002	★		

# Transforming Adult Social Care Delivery

## Contact Activity

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun -24	Sep -24	Dec -24	Actual Mar -25	Target Mar-25		Comments	Comparator Group
% of all ASC Contacts with a decision within 1 working day	Bigger Is Better	Latest Quarter	93.4%	93.8%	91.7%	87.9%	86.9%	95.0%	▲	In quarter 4, 23,759 contacts were received, with 86.9% (20,635 contacts) closed within 1 working day. This continues to be outside of the target 95%. The move to Cirrus has impacted recording and the way data is extracted. Further analysis is being undertaking to understand this.	
% of ASC contacts signposted or closed	Bigger Is Better	Latest Quarter	32.8%	31.2%	31.8%	30.6%	31.5%	33.0%	●	In quarter 4 31.5% of the 23,759 contacts were closed to NFA/Signposted/Information and advice given. 4814 were closed due to no further action, 2017 were signposted and 645 were given information and advice. Overall performance is within tolerance of the target.	

## Assessment, Brokerage & Review

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
% of people having had a review of their needs in 12months	Bigger Is Better	Snapshot	67.9%	64.4%	70.9%	73.0%	75.2%	75.0%	★	There was a total of 5,354 individuals with a long-term or short-term care act support plan at the end of quarter 4. 75.2% of people have had an up-to-date Care Act review or were not yet due a review within the last 12 months which is the first time this has been better than the target. 73% of active long term plans and 93% of active short term plans were within date. There were 1,326 overdue reviews; 35 short-term plans and 1,291 long-term plans.	

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments ↓		Comparator Group
Average number of weeks people have been awaiting Brokerage	Smaller Is Better	Snapshot	3.0	3.2	5.0	4.0	4.1	In quarter 4 the average time a person is waiting for their service to be brokered was 28.4 calendar days or 4.1 weeks. Up by 5.1 days compared to quarter 1.		
% FAB Assessment visits completed within one working month	Bigger Is Better	Quarterly	27.2%	32.3%	46.1%	52.5%	58.5%	58.5% of proceedable FAB assessments were completed within 30 days of the referral date. Performance is showing a steady improvement quarter on quarter, up from 27.2% in quarter 4 2024.		
No. of new FAB Requests received within the quarter	Plan Is Best	Quarterly		663	681	721	936	Since Quarter 1 the number of Requests received continues to increase, up by 41%.		

Hospital Discharge & Reablement

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
% of people who need no long term care after reablement	Bigger Is Better	Latest Quarter								Unable to report on this measure due to issues obtaining data from the third party provider, linking data to subsequent outcomes for people and fully defining the timeframes involved in this metric.	


Adult Safeguarding

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
% Adult Section 42 enquiries where risk was reduced or removed	Bigger Is Better	Latest Quarter	83.3%	88.8%	88.7%	88.1%	92.0%	85.0%	★	In Quarter 4, 200 Section 42 Enquiries were completed of these 93 closed with risk reduced, 37 risk removed, 34 no action, 8 where risk remains, 20 where there was no risk and 8 inconclusive. This has risen by 3.9 percentage points from 88.1% in quarter 3 to 92% in quarter 4.	89.0%
% of S42 Enquiries open for more than 26 weeks	Smaller Is Better	Latest Quarter	18.5%	21.9%	10.1%	8.4%	11.6%	20.0%	★	At the end of quarter 4 there were 233 open Section 42 Safeguarding Enquires with 27 open longer than 26 weeks.	

# Transforming Adult Social Care

## Commissioning

### Quality Assurance

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of Gloucestershire ASC Providers rated Good/Outstanding by CQC	Bigger Is Better	Latest Quarter	86.6%	86.8%	86.4%	86.8%	86.2%	90.0%		The number of providers rated as Outstanding is 20, Good is 279, and requires improvement is 47. This equates to 347 providers (including 1 provider not rated).	

### Assessment, Brokerage & Review

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
Average waiting time for a Carers Care Act Assessment	Smaller Is Better	Snapshot	14.0	10.0	14.0	15.0	11.0	30.0		The average number of working days to complete a Carer's Care Act compliant assessment was 11 working days or two weeks. This is lower than both Quarters 2 and 3 which were around a week longer. This is second shortest period to complete the assessment in the last two years. In Quarter 4 the average number of assessments completed was 54 per month. This was the highest level for the year which was 42 per month in Q1 42 in Q2 and 47 per month in Q3.	

Long Term Care

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
Permanent admission 18-64 residential/nursing care per 100K pop	Smaller Is Better	Rolling Year	9.9	12.3	14.6	14.6	14.6	16.5	★	There were 56 permanent admissions rolling year up until the end of March 2025. The number of people 18-64 being permanently admitted to residential or nursing has been between 50-60 people for the past 10 months. Performance remains better than target and our comparator.	16.5
Permanent admission 65+ residential/nursing care per 100K pop	Smaller Is Better	Rolling Year	589.8	635.9	637.2	633.1	584.3	585.9	★	There were 850 permanent admissions rolling year up until the end of March 2025. The number of people 65+ being permanently admitted to residential or nursing has decreased by 71 people compared to Quarter 3 and is now better than target and comparator.	585.9

Mental Health

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments	↑ Comparator Group
% AMHP assessments outcome: MH Act detention/support/admission	Plan Is Best	Latest Quarter	54.9%	55.7%	56.1%	60.1%	66.7%	In Quarter 4 there were 261 assessments with 264 outcomes Detention under the MH Act - 144 Community Support or protection being put in place - 20 Informal Admission - 12 No Further Action/Other/Not Recorded - 88	

Learning Disability

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
% of Adults with Learning Disabilities in settled accommodation	Bigger Is Better	Snapshot	65.0%	64.3%	65.4%	66.3%	68.3%	79.0%	▲	Performance has seen a slight increase for the last 3 quarters up 4 percentage points between quarter 1 and quarter 4. Note: this does not include people living in supported accommodation, as the in-built report in the case management system does not reflect latest thinking in this area. This will not be rectified without two upgrades to adapt to change at a national level.	79.0%
People in employment with a disability supported by Forwards	Bigger Is Better	Latest Quarter	936	966	988	1,008	1,033	850	★		

# Transforming Gloucestershire Fire and Rescue Service

## Response

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
Average Response times to dwelling fires	Smaller Is Better	Latest Quarter	9.40	9.07	8.00	10.36	9.29	9.00	▲	A similar proportion of dwelling fires were responded to by wholetime crews in Quarter 4, compared the previous quarter. Just over two-thirds (67%, 45 out of 67 fires) of the dwelling fires were attended by Wholetime crews compared to 68% (58 out of 86 fires). Like in the previous quarter, this means more incidents will have been impacted by a longer turnout time, as well as the likelihood that more fires took place in rural areas where drive times to incidents may be longer. Wholetime crews have a quicker response time to incidents than On Call crews. The average response time for dwelling fires attended by Wholetime crews was 8 minutes 9 seconds, whereas by On Call crews was 12 minutes 44 seconds.	9.01
% of Site-specific risk information visit (SSRIs) annual programme of work completed	Bigger Is Better	Cumulative Financial YTD		27.2%	45.6%	74.0%	100.0%	100.0%	★	During the 2024/25 programme, 103 premises were identified to receive a SSRI visit. At the end of Quarter 4, the programme had been completed as per the schedule (100%, 103 premises) and performance remained on target.	

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Statement of Intent Mar-25		Comments	Comparator Group
Number of Fatalities from all fires	Smaller Is Better	Latest Quarter		2	0	1	1	0	▲	The incident was a deliberate car fire which took place in January. In total, there were 4 fatalities from fire in 2024/25. This is higher than in 2023/24 and 2022/23 (2 in each year). The service looks at the circumstances around any fatality and a deep dive report on incidents in 2024/25 will be brought to senior leadership team in May 2025.	



Prevention

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
Rate of Safe and Well visits undertaken per 1,000 population	Bigger Is Better	Latest Quarter	2.03	1.41	1.49	1.48	1.46	1.56	▲	<p>The rate of Safe and Well visits has reduced marginally from 1.48 per 1,000 population (975 visits) in the previous quarter, to 1.46 per 1,000 population (961 visits). Performance remains worse than target (based on 1,030 visits required per quarter). The 1,030 visit per quarter target is divided between Wholetime Watches (60%) and CSAs (40%). Wholetime Watches achieved more than their target (625 visits against a 618 target) while CSAs completed 81.3% of their target (335 visits out of 412 target).</p> <p>In terms of overall performance during 2024/25, we completed 3,848 Safe and Well visits (93% of the 4,120 annual visit target). This is a slight increase on the number of visits completed in 2023/24 (3,794). Two-thirds were completed by Wholetime Watches (67%), with one-third completed by Community Safety Advisors (CSAs) (33%).</p>	
% of Safe and Well Visits undertaken to those deemed vulnerable	Bigger Is Better	Latest Quarter		88.2%	89.0%	88.4%	85.7%	83.0%	★	<p>The service continues its positive work to reach the most vulnerable people in our community, where data tells us there is a higher risk of serious injury or death if a dwelling fire were to occur. In Quarter 4 the majority of Safe and Well visits undertaken were to people deemed vulnerable (85.7%). Performance is slightly worse than the previous quarter (88.4%) but remains better than target (83%).</p> <p>In terms of overall performance during 2024/25, 87.8% of Safe and Well visits were to people deemed vulnerable.</p>	

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
Rate of Dwelling fires per 10,000 population	Smaller Is Better	Latest Quarter		1.12	0.94	1.30	1.02	1.03	★	<p>The rate of Dwelling Fires was 1.02 per 10,000 population (67 dwelling fires), which is better than the seasonal forecast which aims to see a reduction in incidents over time (68 dwelling fires, 1.03 per 10,000 population). Although seasonally we would expect a similar number of dwelling fires compared to the previous quarter, the number of dwelling fires decreased (86 fires in Quarter 3). Of the 67 dwelling fires, 91% were accidental (61) which is higher than the same time last year (88%, 66 out of 75 dwelling fires).</p> <p>Overall, we have seen a small but not statistically significant decrease in dwelling fires in the last 12 months, 289 down from 301 in 2023/24. This is similar to 2021/22 (287 dwelling fires). The rate of dwelling fires for 2024/25 was 4.38 per 10,000 population, which is worse than the comparator group (3.81 per 10,000 population) but the difference is not statistically significant.</p>	0.91

### Protection

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
% of 2023-26 risk-based inspection programme audits completed	Bigger Is Better	Cumulative	14.8%	20.5%	31.1%	44.7%	55.1%	49.0%	★	<p>The programme has been affected by challenges in recruiting qualified staff. The team is now at establishment and over the last three quarters has caught up the backlog of inspections accrued. At the end of Quarter 4, delivery was ahead of the scheduled target (55.1%, 1,292 premises, against a target of 49%, 1,155 premises out of the overall 3-year programme).</p>	

# Delivering Our Ambitions

## Performance

Measure Description	Tolerance Type	Reporting Basis	Dec-23	Mar-24	Jun-24	Sep-24	Actual Dec-24	Target	Perform	Comments	Comparator Group
% of Council Strategy indicators that are on or ahead of target	Bigger Is Better	Quarterly	64.9%	63.9%	70.0%	73.5%	74.3%	65.0%	★		

Workforce

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
Days lost to Sickness per FTE (excluding Schools and GFRS)	Smaller Is Better	Latest Quarter	2.14	1.70	1.54	2.05	1.97	2.30	★	This further quarter below the target gives a total year rate of 7.26 days lost per WTE, which is below the 8 day target. This suggests that the work around managing sickness absence and wellbeing is having a positive impact. However, there remains a significant variation in absence rates in different areas of the council which will require greater focus over the next year.	

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
Turnover of children's social workers and senior practitioners	Smaller Is Better	Rolling Year	12.4%	12.0%	11.3%	12.7%	15.2%	20.0%	★	<ul style="list-style-type: none"><li>That the updated establishment figure in December hasn't affected this particular metric but that the headcount for Q4 (250) is slightly less than the headcount for Q3 (252) and that overall in the 12 month period looking back from 1 April 2025 for Q4 there were 6 more leavers than in the 12 months looking back from 1 January 2025 for Q3. These leavers for Q4 reporting were spread evenly between ASYE's, Social Workers and Senior Social Workers with 2 in each category.</li><li>This particular metric HR49 only covers roles of ASYE, Social Worker and Senior Social Worker so doesn't include any roles outside of that such as Advanced Practitioner and Team Manager.</li><li>When the HR Data Team classify someone as a leaver they can also be a leaver for the purposes of this metric if they are promoted internally or move to a team in GCC that's not part of the metric, for example, if someone is promoted from Senior Social Worker to Advanced Practitioner internally they are regarded as a leaver for this metric or if they move to a CP Chair or IRO role in GCC they are regarded as a leaver. The Data Team have confirmed that for Q4 reporting there were 5 internal movers classed as leavers for the metric.</li><li>So taking all that into consideration, I'm not overly concerned; the headcount for the metric is slightly less in Q4 and there have been 6 more leavers compared to Q3 but these are spread evenly across the 3 roles and overall leavers include 5 internal moves/promotions</li></ul>	
% of Appraisals Completed	Bigger Is Better	Rolling Year	77.5%	74.0%	80.7%	84.6%	82.1%	85.0%	●		

Measure Description	Tolerance Type	Reporting Basis	Dec-20	Dec-21	Dec-22	Dec-23	Actual Dec-24	Target Dec-24		Comments	Comparator Group
Employee Engagement Index	Bigger Is Better	Annual	94.4%	94.4%	94.2%	94.2%	82.4%	95.0%	▲	Latest Data December 2023 - As a result of staff feedback, GCC introduced a new 5-point scale for all survey questions for the Annual Staff Survey 2023, which included more neutral answers, eg. neither agreeing nor disagreeing to questions in the survey, as well as increasing the number of free text boxes for additional comments. Although performance has reduced, this change has produced a richer and more complex set of data, but it means that we cannot directly compare the results from the last survey in 2022. The latest staff survey was launched at the start of Quarter 4 2024/25.	

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Comments	Comparator Group
GCC Turnover (staff leaving as a % of all staff)	Smaller Is Better	Rolling Year	11.0%	11.3%	10.4%	10.5%	10.6%	In 2021-22 the LGA published a rate of 14% typical turnover rates in local government. Average turnover rates across all industries is estimated to be significantly higher. The council has performed well against this typical figure throughout 24-25 and in this quarter the rate of 10.6% is very similar to last quarter and continues to reflect a broadly stable workforce.	
Turnover of all adults social workers and senior practitioners	Smaller Is Better	Rolling Year	21.4%	16.4%	13.4%	9.1%	6.2%	This is well below the GCC average and has been steadily reducing and is significantly below Q1 turnover rates. Whilst it is too early to say if these levels can be sustained, it is certainly a positive metric this quarter.	
Days lost to sickness/absence per FTE - Rolling Year	Smaller Is Better	Rolling Year	8.50	8.55	8.20	8.10	8.00		8.70

Corporate Governance

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments ↑	Comparator Group
Number of audit recommendations rated "high" outstanding beyond target date	Smaller Is Better	Latest Quarter			4	6	4	4	★		
Number of reportable security incidents	Smaller Is Better	Latest Quarter	1	1	1	4	2	14	★	There were 2 security incidents this quarter which reached the threshold for reporting to the ICO.	
% FOI/EIR request responses within legal time limits	Bigger Is Better	Latest Quarter	97.0%	93.0%	92.0%	93.0%	96.0%	90.0%	★	• Number of official requests for information closed - 387 • Number of official requests for information closed out of time - 17 96% of requests were on time this quarter, a performance increase when compared with Q3 2024/25 (93%).	
% Subject Access Request responses within legal time limits	Bigger Is Better	Latest Quarter	90.0%	83.0%	88.0%	86.0%	81.0%	90.0%	▲	81% of requests were on time this quarter, a performance decrease of 5% when compared with Q3 2024/25 (85%). Performance has decreased when compared with Q4 2023/24 (90%). There have been some capacity issues tin Q4 which has contributed to this deduction in performance. Closer management of overdue SARs is helping to ensure a backlog does not form.	
Number of information decision notices upholding requestors position	Smaller Is Better	Latest Quarter	0	0	0	0	0	2	★	There have been no ICO decisions upholding the requester's position.	
Number of Cases Upheld by Local Government Ombudsman	Smaller Is Better	Latest Quarter	4	9	9	6	6	4	▲		
Number of RIDDOR reportable incidents	Smaller Is Better	Latest Quarter	0	4	5	4	1	5	★		

Measure Description	Tolerance Type	Reporting Basis	Mar-24	Jun-24	Sep-24	Dec-24	Actual Mar-25	Target Mar-25		Comments	Comparator Group
Total number of ICT Priority 1 incidents raised per quarter	Smaller Is Better	Latest Quarter	5	4	8	1	4	4	★	All Priority 1 incidents during Q4 were for the social care systems supported by the third party, System C. There were no P1s caused by/owned by GCC teams. 04/02 - All System C systems were unavailable from 04/02 to 11/02 due to a major incident in the System C hosting environment. 19/02 - System C EHM was unavailable for one business day due to their error in executing a planned upgrade. 11/03 - System C Liquidlogic Children's System was unavailable for 2 hours due to the application running out of memory. 17/03 - System C ContrOCC was unavailable for 3 hours. No root cause has been advised, to date.	