

Slough Borough Council

Report To:	Cabinet
Date:	20 April 2026
Subject:	2025-26 Q3 Corporate Performance Report
Lead Member:	Cllr Mabu Shaik - Lead Member for Customer Service, Front of House, IT and Performance
Chief Officer:	Will Tuckley - Chief Executive
Contact Officer:	Sonia Khan - Director of Strategy, Change, and Resident Engagement
Ward(s):	All
Key Decision:	No
Exempt:	No
Decision Subject to Call In:	No
Appendices:	A - Corporate Performance Scorecard 2025-26 Q3 B - Corporate Performance Dashboard 2025-26 Q3

1. Summary and Recommendations

This quarterly corporate performance report forms a core element of the Council's performance management framework. It enables the administration to identify, monitor and address areas of underperformance that have the greatest impact on residents, ensuring that resources and interventions are targeted where they are most needed. Strengthening this approach continues to be a key priority highlighted through feedback from external auditors, the Annual Governance Statement and ongoing oversight from the Secretary of State and Commissioners.

External scrutiny including Ofsted's focused visits to children's social care services (April–May 2024) and the Area SEND inspection (July 2025) has further reinforced the need for sustained improvement, transparency and robust performance accountability. This report provides the latest quarterly update under the refreshed corporate performance framework for the 2025/26 budget year and demonstrates the Council's continued commitment to openness, improved outcomes and progress against its key corporate priorities.

Recommendations

Cabinet is recommended to:

- Note and review the council's current performance as presented through the key performance indicators in the corporate performance report, scorecard and dashboard. This includes acknowledging any performance issues raised and the mitigating actions being taken by relevant services to address them.

Commissioner Review

It is good to see a comprehensive report being regularly published. As the reporting framework matures it will be helpful to see trend information as opposed to current performance level only. This will give the authority a greater understanding of direction of travel and assist in spotting issues early. It is important that Lead Members are familiar with their performance statistics and are able to talk confidently about them. The robustness of the management regime will test whether the organisation is truly owning the performance if it is measured.

2. Report

- This is the third quarterly report to Cabinet presenting progress against the key strategic indicators in the 2025/26 corporate performance scorecard. These indicators are aligned to the priorities set out in the [Corporate Plan 2023-2027](#) and are designed to support service improvement, drive recovery and maintain strong focus on the outcomes that matter most to residents. The indicators are also specifically linked to the Council's Improvement and Recovery Programme adopted by Cabinet in March 2026. There is a basket of indicators that are identified in that programme and included in this framework. Insights draw on a range of evidence including feedback from residents, Members, tenants, staff and complaints data. This report forms a core part of the Council's wider corporate assurance model, sitting alongside regular reporting on risk, finance and audit.
- Benchmarking continues to play an essential role in the performance framework, providing important context on how Slough compares nationally, regionally and against both CIPFA nearest neighbours and statistical neighbours. Each quarterly report includes the most relevant benchmarking data for key performance indicators, using regulatory, statutory or nationally published datasets to support robust analysis and informed decision-making.
- The national performance landscape continues to evolve. In February, the Government published the first full [Local Outcomes Framework \(LOF\)](#) moving from draft proposals to an operational national framework. The LOF replaces the previous Local Government Outcomes Framework and sets out 16 national priority outcomes to be delivered in partnership between central and local government. These cover areas such as housing, health, early years, adult social care, neighbourhood wellbeing, climate resilience and transport. The renaming reflects feedback from councils and partners that many outcomes depend on collaboration across the wider public sector rather than local government alone. The LOF forms part of a wider national reform programme aimed at reducing bureaucracy, strengthening outcome-based decision-making and creating a more coherent approach focused on real-world results for communities.
- As LOF implementation progresses, the Council will ensure that its corporate performance reporting aligns with emerging national expectations. Embedding LOF principles within the Council's performance framework will enhance transparency, accountability and comparability for residents while ensuring Slough remains well-positioned within the evolving national performance system. Government is also developing a new digital outcomes tool expected to launch later in 2026 which will further support reporting and improve access to national metrics.

- In parallel, the annual refresh of the Council's corporate performance metrics for 2026/27 is underway ensuring next year's scorecard reflects LOF requirements, national priorities and local strategic objectives.
- The corporate strategy workstream supporting the Council's Improvement and Recovery Plan continues to drive improvements in how the council uses data and evidence to inform decisions. Recent progress includes:
 - Embedding a refreshed quarterly corporate performance reporting cycle across services to enable a culture of continuous learning and improving and strengthen cross service and system collaboration.
 - A refreshed corporate planning process is underway with directorate storyboards being refreshed to align service planning and enable a more integrated approach.
 - Research is underway to identify best practice from other councils to embed a more insight-driven approach to service improvement, including the use of both quantitative and qualitative data.
 - The council's approach to partnership working is also being reviewed to strengthen alignment and cross system working.
 - There has also been progress in improving underpinning systems, data quality across statutory data sets and analytical capability, including the development of Power BI dashboards to enable more integrated analysis across multiple data sources.

Latest insights on corporate performance

- At the end of Dec-25, the strategic performance picture remains variable. Of the 36 key performance indicators (KPIs) in the corporate performance scorecard:
 - 39% (14) performing at or better than target
 - 14% (5) marginally worse than target
 - 22% (8) performing below the red threshold
 - 22% (8) monitored for trend analysis
 - 3% (1) in development:
 - Corporate Health: Measurement of financial resilience
- Performance has improved compared with the same period last year (Dec-24 to Dec-25):
 - Green rated KPI's increased from 29% to 39%
 - Amber rated KPI's increased from 7% to 14%
 - Red rated KPI's reduced from 33% to 22%
 - Trend monitoring metrics reduced from 29% to 22%
 - Metrics in development remained stable at 1.

Overall, more metrics are now on track and fewer require improvement than in Dec-24.
- Direction of travel compared to the previous quarter or similar period from last year:
 - Performance improved (↑) for 42% (15) of KPIs
 - Remained the same (→↔) for 22% (8)
 - Declined (↓) for 28% (10)
 - No previous trends 6% (2)
 - In development 3% (1)

This reflects continued forward momentum with improvements outnumbering declines.

- Seven KPIs changed RAG status this quarter:
 - Priority 1: Percentage of new EHC plans issued within 20 weeks including exceptions improved from **red** to **green**.
 - Priority 1: Percentage of eligible 2-year-old children benefitting from funded early education improved from **red** to **green**.
 - Priority 1: Percentage of 16–17-year-olds not in education, employment and training (NEET) or whose activity is not known changed from **green** to **red**.
 - Priority 1: Percentage of care leavers in education, employment or training changed from **green** to **amber**.
 - Priority 2: Percentage of safeguarding referrals that meet section 42 changed from **green** to **red**.
 - Priority 3: Number of homeless cases prevented improved from **red** to **green**.
 - Corporate Health: Percentage of suppliers paid within 30 days changed from **green** to **amber**.
- In terms of reporting frequency, 12 KPIs are reported annually, 8 quarterly, 1 by school term and the remaining 15 follow monthly trends which are reported at the end of each quarter.
- Further details are provided in the appendices:
 - Appendix A outlines the corporate performance scorecard highlighting latest performance across the 36 strategic KPIs along with associated mitigating actions and named action owners. Each KPI is assigned to an Executive Director who is accountable for performance and delegates delivery to relevant officers.
 - Appendix B details the corporate performance dashboard with trend charts for each metric showing progress over time and performance against targets.

Areas of success where performance is meeting or exceeding the agreed target (RAG status: **Green)**

Priority 1: A borough for children and young people to thrive

- Slough Child and Family Wellbeing Service continues to show a positive trend in early child development outcomes. By the end of Q3 2025/26, 90.4% of children (376) achieved a good level of development across all five domains, an improvement from 88.6% (304 children) in Q2. Performance remains well above the most recently published national average (81.4%) and South-East regional average (81.3%) for 2024/25. This improvement is supported by the increased uptake of 2–2.5-year developmental reviews. In Q3, 75.1% (419) of eligible children received a review, up from 60.4% (346) in Q2. Ongoing work aligns with the Department for Education's strategy to improve early development which sets a national ambition for 75% of five-year-olds in England to achieve a good level of development by 2028. The 0–19 service provider (HCRG) is progressing with licensing and governance arrangements to enable training for early years staff to deliver universal 2–2.5-year reviews. Where developmental concerns are identified, children are escalated to Health Visitors for targeted follow-up. This model, already adopted by several local authorities, supports efficient use of Health Visitor capacity while maintaining appropriate clinical oversight.
- The percentage of eligible two-year-old children in Slough benefitting from funded early education increased to 70.5% (320) in the autumn term of 2025/26, up from 64.2% (333) in the autumn term of 2024/25. Latest performance is above the local target of 60% and also above the 2025 national (65.2%), the South-East regional (62.8%) and the statistical

neighbour average (58.8%). Nationally, take up of funded early education for disadvantaged two-year-olds fell from 74.8% in 2024 to 65.2% in 2025 following the expansion of the Working Families entitlement. This influenced local patterns with some families in Slough applying only for the Working Families entitlement even when also eligible for Bright Futures funding. Slough's take up has historically been lower than national and regional averages and continues to fluctuate across the year. This is partly due to parents choosing to begin early education in the term when their child turns three which affects demand among eligible two-year-olds. Providers also tend to have more two-year-old spaces available during the autumn term contributing to higher take up during that period.

- To support continued improvement all early years providers now check eligibility against both the Working Families entitlement and Bright Futures funding to ensure accurate identification and recording. The entitlements team receives regular lists of eligible families and contacts those not yet accessing early education to explain the offer and provide support. Families who need help with applications can receive assistance by telephone or through family hubs. Family hubs provide additional opportunities for engagement including the distribution of two-year-old learning packs and learn and play sessions which help families understand the benefits of early education. The entitlements team also supports families in finding suitable early years places and provides transition support including tailored guidance for children with additional needs. Awareness raising continues through strong partnership working with health visitors, Jobcentre staff, early help services and social care. This includes identifying families at the two-and-a-half-year development review and encouraging participation in terrific twos groups which support early learning and help identify children who may be eligible for Bright Futures funding.
- Using the Department for Education (DfE) measure which counts all EHC plans issued in the month regardless of their due date, 47.6% (20) met the statutory 20-week timeframe in December. This reflects improvement from 25.0% (9) in November and exceeds the last published national average of 45.9% indicating stronger overall throughput. For EHC plans due that month, 68.0% (17) were issued within 20 weeks in December, a significant rise from 35.3% (12) in October and 42.9% (9) in November. Demand remained high throughout the year. Between January and December 2025, the council received 501 requests for statutory EHC needs assessments. November (57) and December (53) were the highest months since July 2024 contributing to increased operational pressure. Despite this, the backlog of overdue assessments has reduced substantially from 172 in January 2025 to 76 in October, 62 in November and 49 by the end of December showing steady progress in clearing historic delays. Performance progress has been affected by staffing gaps, rising demand and data-quality issues. Two vacancies left the assessment team under-resourced until mid-January while a sharp increase in EHC needs assessment requests, many submitted with inaccurate or incomplete information, added significantly to processing time. Higher caseloads and statutory advice requests created further pressure on teams to meet the 20-week deadline. Progress was also slowed by historic data anomalies and limitations within Capita One.
- Newly appointed team managers are now addressing systemic issues, supporting staff and driving improvement with a renewed focus on reducing reliance on manual trackers and strengthening system functionality. Complaints previously elevated due to historic annual review issues and communication gaps have begun to stabilise. Stage 1 complaints have reduced from 25 (Q1) and 26 (Q2) to 22 (Q3) while stage 2 complaints have dropped sharply from 18 (Q1) and 11 (Q2) to 2 (Q3).

Priority 2: A town where residents can live healthier, safer and more independent lives

- In Q2 2025/26, Slough continued to perform strongly in the NHS Health Check Programme exceeding both national and South-East regional uptake rates. A total of 3,593 eligible residents (8.1%) aged 40–74 were offered a Health Check compared with 5.1% regionally and 5.9% nationally. Of those offered, 1,258 residents (2.8%) received a check, outperforming the South-East (1.9%) and national average (2.0%). Targeted engagement with GP practices with lower uptake remains a core focus. Following dedicated support to Orchard Medical Centre in the previous quarter, the number of NHS Health Checks completed increased by 87% rising from 16 to 30 checks. Engagement is now being extended to other practices with lower uptake in Q2 including Kumar Medical Practice. Meetings with practice managers and healthcare assistants are being used to explore operational barriers and opportunities for improvement. Bespoke data and performance packs are supporting practices to review invitation processes, follow-ups and completion rates. Community-based NHS Health Checks continue to be delivered through the commissioned Integrated Health and Wellbeing Service, prioritising areas with the highest need including Britwell, Baylis and Salt Hill, Chalvey and Wexham Court. During Q3, 319 residents received a community health check. To strengthen system oversight and drive sustained improvement, an East Berkshire NHS Health Check Quality Assurance Group is being established. Slough also continues to work collaboratively at a regional level through the OHID South-East NHS Health Check Network and the South-East NHS Data Management Action Learning Set, sharing best practice to enhance service delivery and quality.
- The Council continues to perform strongly in supporting adults with long-term care needs to remain in their own homes. The latest published 2025 performance shows that 54.5% of adults in Slough receiving long-term support are supported in the community. This is above both the national average at 48.7% and the South-East regional average at 43.5%, demonstrating a strong and sustained focus on community based long term support. Nationally, Slough is ranked 62 out of 153 local authorities placing the borough firmly within the second quartile for this measure. This outcome reflects the effective delivery of the 'Home First' approach where staff prioritise strengths-based practice, early intervention and reablement opportunities before progressing to long term care decisions. The stability of performance between years indicates consistent frontline practice and strong oversight. Audit activity continues to support consistent application of strengths focused care planning across teams while commissioning reviews are assessing community service capacity to ensure provision remains aligned to local need. These combined actions will help maintain Slough's strong performance and continue supporting residents to remain independent in their own homes for as long as possible.
- Performance for 2025/26 Q3 shows that 30.8% (427) of eligible adults in Slough are managing their care through a direct payment. While this represents a small reduction from 32.0% (443) in the previous quarter, Slough continues to perform strongly when compared with the latest published 2024/25 national average (24.5%) and South-East average (23.7%). Using the new client level dataset, Slough is now ranked 18th out of 153 authorities nationally placing the borough in the top quartile. Regionally, Slough continues to benchmark well within the SE ADASS group, ranking 2nd out of 18 authorities behind only the Isle of Wight. This strong performance reflects well embedded practice where all new requests for care and support are considered for a direct payment as the first option supporting choice, control, and personalisation for residents.
- Although performance remains comparatively strong, growth in direct payment uptake has plateaued. The main constraint relates to the hourly rate paid to Personal Assistants

(PAs) which is linked to the National Living Wage (NLW). Around 50% of direct payment recipients employ their own PA rather than using an agency. However, the current PA rate is not sufficiently competitive to encourage new PA recruitment at the scale required to increase uptake. As a result, the overall number of direct payment packages has remained stable rather than increasing. Work is underway to explore options for revising the PA rate. Increasing the rate to around £16 per hour would make PA roles more attractive within the local market. This also presents an invest to save opportunity as commissioned home care costs the council an average of £23 per hour. Enabling more residents to employ their own PA through direct payments would therefore strengthen personalisation while delivering improved value for money. Performance continues to be monitored monthly at DLT and through quarterly SE ADASS benchmarking, alongside work to strengthen both the sustainability and attractiveness of the direct payment and PA model.

Priority 3: A cleaner, healthier and more prosperous Slough

- Emergency housing repairs performance remained strong throughout December with 100% (708) completed within the agreed timescale. Operational efficiency also remained high with 86.4% (1,540) of all housing repairs completed in a single visit, exceeding the 75% target and demonstrating sustained effectiveness for straightforward jobs. Although the percentage of responsive repairs completed on time dipped to 85.7% (1,975) following a strong performance peak of 95.0% (1,871) in November, this reduction occurred during a period of significantly increased seasonal demand. Cardo has responded by increasing resources and improving repair planning to stabilise performance. Complaint levels and timeliness have also improved. Stage 1 complaints reduced from 85 in Q2 to 59 in Q3, with on time responses improving from 48.2% to 69.5% and average response time reducing from 12.0 days to 8.9 days. 40.7% were partially or fully upheld mainly driven by communication delays, quality of work and unclear or inconsistent resident messaging. Stage 2 complaints also reduced from 20 in Q2 to 13 in Q3, with an average response time improving from 38.5 days to 32.0 days and the proportion partially or fully upheld falling from 50.0% to 41.7% indicating better resolution at the initial stage and fewer escalations. Voids performance continues to improve building on progress made last quarter. The Decent Homes planned programme remains on track for completion by March with preparations for next year's programme already underway. Wave 2.2 is now 98% complete and works on Wave 3.0 have commenced supporting continued delivery momentum.
- The number of homeless cases prevented rose from 23 in November to 37 in December, exceeding the monthly target of 12 and continuing the strong upward trend seen throughout the quarter. In total, 86 cases were prevented in Q3, compared to 24 in Q2 and 32 in Q1. This improvement reflects the impact of two interim teams introduced to strengthen prevention activity. The early intervention team launched in October is proactively supporting households at risk of homelessness by offering practical prevention options. This includes helping households stay with friends or family where appropriate, improving access to private rented housing and delivering landlord incentive packages to increase private rented sector supply. The backlog team is progressing older cases to ensure prevention work is completed promptly and outcomes are recorded accurately.
- Slough continues to perform strongly on major planning applications maintaining 100% performance in Q2. This exceeds both the national average (90.4%) and the South-East average (89.8%) reflecting effective case management and consistent service delivery. Performance on non-major applications has improved from 74.2% to 80.6%. While this remains below national (90.9%) and South-East regional (91.1%) benchmarks, it is still

above target. Current performance pressures are primarily due to capacity gaps created by the recruitment freeze and maternity leave resulting in high officer caseloads. In addition, there have been some delays to Section 106 agreements linked to resource constraints within HB Public Law but they are actively pursuing recruitment so we expect these to improve. To improve performance the service is prioritising early case reviews, timely site visits and reducing reliance on time extensions. Weekly management meetings continue to monitor progress and officers are supported through panel sessions and major case meetings to strengthen quality and consistency. Caseloads for officers managing complex applications are being reviewed with interim support now in place and recruitment planning underway to strengthen longer-term capacity. Complaint themes remain stable mainly relating to delays from high caseloads and disagreement with planning outcomes. A revised Statement of Community Involvement will help manage expectations around consultation and decision-making, while formal appeal routes remain available for applicants. The Local Validation List (LVL) goes live on the Council's website on 30 January 2026. The LVL sets out national and local information requirements for submitting a planning application in Slough. Its introduction will promote greater clarity, consistency and confidence in the planning process by ensuring decision-makers, consultees and the public have all the necessary information from the outset.

Corporate Health

- Slough is on track to meet its target of a 12% (£1.315m) reduction in business rate arrears by the end of the budget year. At the end of December 2025, the council has already achieved a 26.42% (£2.896m) reduction when adjusted to exclude changes in rateable value. However, arrears fluctuate month on month. The Council continues to take firm action to recover outstanding debts including passing cases with liability orders to enforcement agents. To strengthen its approach, from February 2026 we will begin initiating bankruptcy and liquidation proceedings against persistently non-paying businesses. These escalated measures aim to tackle long-term arrears and reinforce the importance of financial compliance as part of a robust recovery strategy.
- Slough is also progressing towards its target of a 12% (£3.011m) reduction in council tax arrears by the end of the budget year with a 9.77% (£2.452m) reduction achieved by the end of December 2025. In addition to existing recovery methods, three new enforcement measures will be in place from February 2026: placing charging orders on properties where the resident is the legal owner, initiating bankruptcy proceedings for significant and persistent non-payment and applying for committal to prison in cases of wilful refusal or culpable neglect. Recovery efforts will then be enhanced through a planned assessment of the propensity to pay across all outstanding accounts enabling the council to prioritise cases with the highest likelihood of successful collection. These actions aim to ensure a balanced approach across fairness (alongside our debt support and council tax hardship [schemes for residents](#) struggling with payments, including discretionary reductions), ensuring accountability, and improved collection outcomes. Each case for action will be considered on an individual basis, taking everything into account.

Areas to monitor where performance is not fully on track or where the metric is being monitored for emerging trends or early signs of risk (RAG status: **Amber or **monitoring trends over time**)**

Priority 1: A borough for children and young people to thrive

- The proportion of 19–21-year-old care experienced young people in education, employment or training (EET) has decreased over recent months, with 49.6% (61 young

people) recorded in December 2025 compared to 56.3% (67) in September 2025. Although performance is below the local target of 52%, it is important to note that the overall cohort size has increased significantly by 29.5%, rising from 95 young people in December of the previous year to 123 this year. As a result, even with the percentage decrease, the actual number of care leavers in EET remains higher than the same point last year (61 compared with 55). This decline in percentage therefore reflects growth in the care leaver population rather than a reduction in engagement. The 18+ service continues to provide close operational input, with the Virtual School working in partnership with the Thrive Teams to deliver tailored information, advice and guidance. This support focuses on developing career aspirations, building confidence, and helping young adults prepare effectively for EET opportunities. The joint approach has contributed to improved EET outcomes across the year and the service continues to track individuals closely to maintain progress.

- The number of Children Looked After (CLA) has increased over recent months rising from 187 (40.1 per 10,000) in September 2025 to 200 (42.8 per 10,000) in December 2025. Although the rate has increased it remains below the statistical neighbour average of 46.2 per 10,000 and significantly below national (67.0 per 10,000) and South-East (55.0 per 10,000) rates. The overall increase includes a continued rise in Unaccompanied Asylum-Seeking Children (UASC) who now make up 16.5% of the CLA population compared with the statistical neighbour proportion of 13.4%. Slough remains 13 children below its National Transfer Scheme threshold as of 31 December 2025 and therefore further increases in UASC numbers are expected. Over the last 12 months, 97 children have entered care including 24 UASC (25%) while 80 children have exited during the same period. Entries since April show that 33% (27 children) are aged 13–17 indicating that the edge of care offer for adolescents needs continued strengthening to help more young people remain safely at home. The increase to 200 CLA also places the number above the same period last year (183) highlighting the importance of ongoing scrutiny and early decision making. Regular CLT oversight supports monitoring of trends particularly where increases relate to national schemes or external pressures. All children who have been subject to Child Protection plans for over nine months continue to be reviewed to ensure decisions are timely and do not drift into care unnecessarily.

Corporate Health

- In December, 79.8% (3,507) of invoices were paid within 30 days missing the target of 80% by 0.2%. Year-to-date performance stands at 76.56%. We have been working closely with services to ensure purchase orders are raised before services are delivered and have informed suppliers that invoices without a quoted purchase order will be returned. Additionally, suppliers have been instructed to send invoices directly to the Accounts Payable team to minimise payment delays. The team will start analysing invoices that are not paid in 30-days to identify why and communicate these to budget holders.
- The staff turnover rate has remained broadly stable with a slight reduction from 9.9% (rolling year to September 2025) to 9.8% (rolling year to December 2025). Similarly, the staff resignation rate has reduced from 8.2% to 8.0% over the same period. These figures remain in line with the benchmark for a healthy turnover rate of approximately 10%. To support a clearer understanding of workforce turnover and inform improvement actions, HR continues to encourage all departing employees to complete exit interviews. Feedback gathered has identified organisational culture as a contributing factor in some resignations and this insight is actively informing ongoing initiatives to strengthen workplace culture, inclusivity and employee experience. While these actions are expected to support improved retention over time, turnover rates are anticipated to

remain broadly consistent in the short term due to the impact of planned service restructures which are likely to result in some workforce movement.

- The percentage of staff equalities data recorded on Agresso has shown slight improvement, increasing from 58.1% in September 2025 to 58.7% in December 2025. While progress remains gradual, this indicates a positive direction of travel. Efforts to improve the completeness and quality of equality monitoring data continue. Both new starters and existing employees are strongly encouraged to complete all relevant declaration fields to support data accuracy, transparency and compliance with statutory and organisational reporting requirements. HR Learning & Development has embedded clear messaging on equality data declaration within the corporate induction programme and the LEAD Programme, reinforcing expectations at both entry and leadership levels. These actions aim to support sustained improvement in declaration rates over time.
- The average number of working days lost due to sickness absence per FTE has marginally improved, reducing from 9.5 days (rolling year to September 2025) to 9.4 days (rolling year to December 2025). This suggests a stabilising trend although absence levels remain an ongoing focus. The HR Casework Team continues to work proactively with services to ensure sickness absence is managed consistently and effectively across the organisation. This includes providing targeted advice and support to managers and ensuring the absence management policy is applied fairly and appropriately. Further improvements are expected following the revision of the Sickness Absence Policy, which aims to reduce unnecessary bureaucracy and improve clarity for both managers and staff, supporting earlier intervention and improved case management. In addition, the introduction of a new Occupational Health provider in February 2026 is anticipated to lead to more timely and effective management of occupational health referrals, alongside an enhanced Employee Assistance Programme (EAP), strengthening support for staff wellbeing and contributing to a reduction in sickness absence over time.
- Interim staffing costs improved between Quarter 2 and Quarter 3 of 2025/26, reducing from £6.772m to £6.442m. While this represents a modest reduction, costs remain under close review and continue to be influenced by short-term operational factors, i.e. interims were required to stop working for 2 weeks during Christmas break. Efforts to reduce reliance on interim staff are ongoing, supported by a range of measures designed to strengthen workforce planning and improve cost control. Interim recruitment continues to be tightly managed through HR expenditure control panels, with all appointments required to be clearly justified as necessary and business critical. These requests are reviewed by the Corporate Leadership Team (CLT), where Executive Directors are required to present a formal business case for approval. In addition, the introduction of a new HR establishment and salary forecasting report is supporting budget holders to develop a clearer understanding of their workforce profile and the financial implications of staffing decisions, particularly where interim arrangements are used to cover permanent roles. HR is also working with services to develop comprehensive organigrams, providing Directors and Heads of Service with greater clarity on organisational structures. Several service restructures scheduled for 2025/26, supported by HR, will provide opportunities to reassess staffing requirements and reduce dependency on interim roles by more closely aligning resources with service delivery needs.
- Stage 1 complaints reduced from 100 in November to 88 in December resulting in 275 complaints in Q3, an improvement from 302 in Q2. During Q3, 59.3% of stage 1 were responded to on time with an average response time of 10.0 working days. Just over half at 53.1% were partially or fully upheld. Stage 2 complaints also reduced slightly from 21

in November to 20 during December, totalling 56 in Q3 compared to 82 in Q2. Of these 44.6% were responded to on time with an average response time of 18.4 working days. A high proportion at 72.7% were partially or fully upheld mainly linked to objections to decisions and quality of work. All complaints across the council including those previously recorded separately by Slough Children First are now logged within Intalex. This ensures a single version of factual data, improving transparency, consistency and accuracy across all reporting. To strengthen practice the council continues to align its approach with the Joint Complaint Handling Code from both the Housing Ombudsman and the Local Government and Social Care Ombudsman.

Updated self-assessments have been published on the Council's website and the 2024/25 Annual Complaints Report has been presented to the Audit & Corporate Governance Committee confirming progress and priority areas for improvement. Operational improvements are ongoing including weekly case reminders to managers, continued Housing Complaints Task Force meetings, updated complaint-handling guidance, revised templates and mandatory Ombudsman training. There is a renewed emphasis on ensuring cases are actioned promptly to prevent repeat complaints and escalation of issues. A "How to Complain" video has been published to help residents better understand the process and what they can expect. Further enhancements continue to be delivered through the council's wider Improvement and Recovery Programme supporting long-term improvements in complaint management and service responsiveness.

Areas with challenges where performance is significantly below target and requires focused improvement (RAG status: **Red)**

Priority 1: A borough for children and young people to thrive

- Slough's NEET and not known rate for November 2025 stands at 12.0% (614 young people), an improvement from 13.2% (661) in November 2024. However, Slough remains above both the England average (8.3%) and the South-East (10.5%), placing Slough in the bottom quartile nationally and highlighting the continued need for targeted support. To help young people progress into education, employment or training the council continues to deliver face-to-face IAG sessions in community venues supported by telephone contact where appropriate. These sessions provide practical support with CVs, job searching, applications and interview preparation and include signposting to specialist services such as mental health, wellbeing and substance misuse support. Young people can access up to six personalised IAG sessions, with delivery locations reviewed regularly to ensure support is targeted where it is most needed. The NEET cohort is closely monitored throughout the year with proactive engagement to confirm destinations and identify young people at risk of becoming NEET. However, the service currently operates with 1.5 FTE staff, significantly lower than comparable local authorities, following the deletion of the NEET Team Manager post. This continues to restrict capacity at a time of rising demand. A business case for additional resource has been submitted several times but has not been approved. A NEET Scrutiny Committee review has been completed and presented to Cabinet with a formal outcome pending.

Priority 2: A town where residents can live healthier, safer and more independent lives

- In Q3, 14.6% (23 cases) of safeguarding referrals progressed to a Section 42 enquiry, a decrease from 31.4% (44 cases) in Q2. Although the quarterly figure has fallen, the rolling 12-month position remains more stable at 24% providing a more reliable measure of performance over time. However, this rolling figure remains below the last published 2024/25 national average of 28.9% and the South-East average of 32.3%, reflecting a

higher volume of safeguarding concerns being submitted relative to a stable flow of Section 42 enquiries. The decline in the quarterly percentage is linked to an increase in lower-level concerns being reported rather than any deterioration in threshold application or decision making. This increase in concerns has widened the total volume of referrals reducing the overall proportion that meet Section 42 criteria. Despite this, triage processes continue to operate effectively with decisions made in line with Care Act requirements. Targeted work has been undertaken to strengthen data quality, ensure consistent and accurate application of Section 42 thresholds and improve recording practice within the safeguarding module. Safeguarding performance data is regularly presented to the Slough Safeguarding Partnership and a programme of awareness raising events is planned to support partners in understanding statutory responsibilities, risk assessment expectations and the need to clearly record the adult's views and wishes.

Priority 3: A cleaner, healthier and more prosperous Slough

- At the end of December, there were 102 void properties including 60 HRA standard voids (V1–V3). Within the 60 HRA standard voids, 1 was in pre-works, 37 were in works, 20 were ready to re-let, and 2 were pending demolition. During December 13 HRA standard voids were re-let with an average re-let time of 42 days, continuing the improving monthly trend and moving closer to the target of 35 days or less. This compares with October when 14 voids were re-let in an average of 83 days and November when 8 voids were re-let in an average of 47 days. However, this monthly improvement is not reflected in the overall Q3 position where a total of 35 HRA standard voids were re-let with an average re-let time of 60 days compared with Q2 where 32 voids were re-let with an average of 51 days. The increase in Q3 turnaround times is largely due to several older long-standing voids being completed earlier in the quarter which pushed up the average re-let time. Delays continue to arise from subcontractor turnaround times and the duration of the three-step verification process. However, the reduction in average re-let time in December shows early signs of improvement. While the measures introduced in Q2 strengthened consistency and quality assurance, they also extended timelines. Q3 activity has therefore focused on streamlining and accelerating these processes with further improvements expected in Q4.
- The household recycling rate for quarter 3 2025/26 shows mixed performance compared with the same period last year. October recorded a lower rate at 20.0% (down from 22.2%), while November increased to 20.2% (up from 19.0%) and December rose to 19.4% (up from 18.6%). Although the rate remains below the borough's long-term target of 40%, the latter part of the quarter indicates early signs of stabilisation. Recycling performance continues to be affected by fluctuations in green waste tonnages which remain variable year-on-year and below historic peak levels. As green waste forms a significant proportion of total recycling tonnage, seasonal factors particularly prolonged hot and dry weather continue to suppress volumes and impact the overall rate. The Sustainability Officers recruited in October 2025 are now fully active prioritising support for the borough-wide food waste rollout. Their engagement work has focussed on direct communication with residents to improve understanding of correct food waste separation and encourage sustained behaviour change as new collection areas go live.
- Participation in the food-waste service is increasing as the rollout expands and residents adapt to the new arrangements. Borough-wide participation averaged around 27% in November, rising to 35% in December and 36% in January. One collection round reached 60.58% participation on 06-Jan-26 compared with 18.34% when first introduced on 04-Dec-25 demonstrating a clear uplift as awareness improves. Tonnages are expected to exceed 100 tonnes per month from January with around 30,000 properties

now included and further phases such as flats still to follow. As participation grows the food-waste service is expected to strengthen recycling performance by diverting organic material from residual waste and reducing reliance on seasonally variable green waste. Residual waste tonnages continue to fall with 2025 recording the lowest annual total since reporting began in 2003. A similar pattern was seen following the introduction of borough-wide recycling collections in 2008 when general waste reduced from 34,610 tonnes to 29,223 tonnes in subsequent years. Current trends suggest the borough is entering a comparable transition period as the food-waste service becomes embedded and resident behaviours evolve.

Corporate Health

- Customer services continue to face significant operational pressures. The service delivered 5% Medium Term Financial Strategy (MTFS) savings in 2025/26 and a recruitment freeze during the year prevented vacant posts from being filled. A business case has now been approved to recruit 3.5 Full-Time Equivalent (FTE) in the new financial year which will restore staffing levels to 2024/25 capacity. During Q3, the team handled approximately 3,800 calls per month. While overall call volumes remain consistent with last year, demand relating to council tax has increased by over 21% over the three quarters this year compared to same period last year. Additionally, council tax recovery activity has risen by around 40% compared with the same period last year resulting in more complex enquiries and longer call durations. A mitigation action plan is in place and is being closely monitored to manage the increased demand and maintain service delivery. Footfall at the customer access points has increased by 20% compared with the same period last year rising from 6,417 to 8,068 visits between April and December. The service continues to operate across five hubs including Observatory House. The team has also introduced a proof-of-concept pilot at the Britwell Hub launched in the week commencing 26 January. This three-month pilot supports the phased redesign of the face-to-face offer, shifting the focus towards resolution of issues and providing 'good help' by connecting residents to the right services. The aim is to test how enhancing the service offer within an existing hub can meet demand differently and assess whether future delivery could be achieved from fewer locations.

3. Implications of the Recommendation

Financial implications

- The strategic performance indicators are directly aligned with the priorities outlined in the Corporate Plan. This plan reinforces the Council's commitment to financial prudence and delivering Best Value for residents. Any additional funding required to improve performance must be sourced from within existing council revenue budgets.
- A separate quarterly finance report will be presented to Cabinet detailing Slough Borough Council's financial performance and complementing the insights provided in this report. Maintaining strong financial discipline is essential to delivering the Corporate Plan and ensuring the Council achieves and sustains a stable financial position. On 16th February 2026 the Quarter 3 position showed a significant projected overspend on the General Fund revenue budget of £15.5m.
- The quarterly corporate performance report highlights several areas with both direct and indirect financial implications for the Council, underscoring the importance of aligning performance with sound financial management.

Legal implications

- Whilst there is no statutory requirement to report performance to Cabinet regularly, the Council, as a best value authority under the Local Government Act 1999, has a legal duty to secure continuous improvement in how its functions are exercised, with regard to economy, efficiency and effectiveness.
- Regular performance reporting supports the Council in demonstrating Best Value. The national Best Value Framework, now finalised following consultation, is used by the Council to guide further improvement actions.
- The Government's Best Value guidance encourages local authorities to be open to challenge and support. It promotes the use of performance indicators, benchmarking and transparency. Key themes include:
 - Service Delivery: using data to assess service efficiency and benchmarking against comparable authorities.
 - Continuous Improvement: regular monitoring, performance reporting and updating of improvement plans.
 - Governance: ensuring performance data measures outcomes effectively and is used to address underperformance.

Risk management implications

- Mitigating actions are in place for strategic performance indicators where trends show early signs of concern. These actions are proposed by the responsible service lead and monitored through quarterly performance reviews at Assurance CLT forum led by the relevant Executive Director (or their delegate). Targeted deep dive sessions are also held with service leads at CLT and Corporate & Service Improvement Board. This approach ensures that emerging issues are identified early enabling timely intervention and maintaining oversight of key risks.
- The Assurance CLT forum provides a comprehensive view of the organisation's health by reviewing finance, risk and performance together supporting informed decision-making and improvement planning.

Environmental implications

- Strategic performance indicators aligned to priority 3 of the corporate plan retains and expands upon environmental commitments under the following strategic objective *'reducing Slough's carbon footprint, promoting active travel and sustainable forms of transport and taking action to prevent or minimise the impact of climate change'*.

Equality implications

- Under the Equality Act 2010, the Council must have due regard to eliminating discrimination, advancing equality of opportunity and fostering good relations between people with and without protected characteristics.
- The Council is required to consider how to reduce disadvantage, meet the needs of protected groups and encourage their participation in public life. As set out in the council's Equality Plan 2025-27, having a robust evidence base and proactively

monitoring performance data is key to ensuring the council meets its statutory equality objectives and tackles inequality.

4. Background Papers

None