Appendix B - 2025-26 Q4 Corporate Performance Report
Slough Borough Council

1. Summary

This quarterly corporate performance report is a core component of the Council's performance management framework. It enables the Council to identify, monitor and respond to areas of underperformance that have the greatest impact on residents, ensuring that resources and interventions are targeted effectively. Strengthening this approach remains a key priority, informed by 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 (April–May 2024 and November 2025) and the Area SEND inspection (July 2025) has reinforced the need for sustained improvement, transparency and robust performance accountability.

This report provides the final quarterly update for 2025/26 under the refreshed corporate performance framework and demonstrates the Council's continued commitment to openness, improved outcomes and progress against its key corporate priorities. It supports Cabinet oversight of performance, enabling informed challenge, decision-making and accountability as part of the Council's wider recovery and improvement journey.

2. Report

- This report provides the final quarterly update to Cabinet on performance against the key strategic indicators within the 2025/26 corporate performance scorecard. These indicators align with the Corporate Plan 2023-2027 and support the Council's focus on recovery, service improvement and delivering better outcomes for residents. They incorporate priorities from the Improvement and Recovery Programme agreed by Cabinet in March 2026.

- The report draws on a broad evidence base including insight from residents, Members, tenants, staff and complaints data and forms part of the Council's wider assurance arrangements alongside reporting on risk, finance and audit.

- Benchmarking remains integral to the performance framework providing context for Slough's performance. Comparative analysis is included where available using national, regional, CIPFA nearest neighbour and statistical neighbour data to support evidence-based assessment and decision-making.

- During Q4, the performance framework and targets have been reviewed and refreshed for 2026/27. This ensures alignment with emerging national expectations including the Local Outcomes Framework (LOF) and supports the delivery of the Council's Best Value improvement priorities, Target Operating Model (TOM) and wider recovery programme.

- The Government's LOF digital tool is expected to be released later this year and will provide trend data and benchmarking of LOF aligned outcome measures. These metrics are drawn from a range of existing national data sources and are updated at different frequencies with many published annually. They will inform the Council's

Annual Performance Report and support in-year performance monitoring and benchmarking while also informing strategic planning and improvement activity including targeted director-led performance deep dives at Corporate Leadership Team level.

- A refreshed set of 40 corporate performance metrics and targets for 2026/27 are presented below including 11 new measures replacing 7 existing metrics. These reflect service-led proposals to strengthen strategic oversight by balancing LOF aligned outcome measures with selected indicators that provide visibility of demand and core service performance. Together, they provide a focussed and coherent framework offering a holistic view of performance and progress against priorities. This aligns with and complements the Government's forthcoming LOF digital tool.

- The corporate performance scorecard supports oversight of delivery, enabling informed decision-making, constructive challenge and accountability across priority areas.

Priority 1: A borough for children and young people to thrive			
Corporate performance measure	**Reporting**	**CLT Lead**	**2026/27 target**
Percentage of new EHC plans issued within 20 weeks including exceptions	Monthly	Executive Director of Children's Services	>=national average
**School readiness: Percentage of children achieving a good level of development at age 5	Annual	Executive Director of Children's Services	2025/26 70.8%
Child development: percentage of children achieving a good level of development in all five domains at 2 to 2.5 years old	Quarterly	Executive Director of Public Health, Public Protection, Engagement & Communities	>= national average
Proportion of children obese including severely obese at Year 6	Annual	Executive Director of Public Health, Public Protection, Engagement & Communities	<= national average
Percentage of 16–17-year-olds not in education, employment and training (NEET) or whose activity is not known	Monthly	Executive Director of Children's Services	<=national average
Percentage of care leavers in education, employment or training	Monthly	Executive Director of Children's Services	>=52%
Rate per 10,000 of Children Looked After (CLA)	Monthly	Executive Director of Children's Services	Metric monitored for trends
**Number of contacts received by children's social services	Monthly	Executive Director of Children's Services	Metric monitored for trends
**Rates per 10,000 of referrals received by children's social services	Monthly	Executive Director of Children's Services	Metric monitored for trends
**Children in low-income families	Annual	Executive Director of Children's Services	Metric monitored for trends

Priority 2: A town where residents can live healthier, safer and more independent lives			
Corporate performance measure	**Reporting**	**CLT Lead**	**2026/27 target**
**Percentage of people aged 18-64 who receive long-term support who live in their home or with family [ASCOF 2E2]	Annual	Executive Director of Adults Services	>=national average
Percentage of clients accessing long term support in the community at the end of the year [LTS001B)	Annual	Executive Director of Adults Services	>=national average
Percentage of eligible adults managing their care via a direct payment [ASCOF 3D2a]	Quarterly	Executive Director of Adults Services	>=national average
Percentage of safeguarding referrals that meet section 42	Quarterly	Executive Director of Adults Services	>=national average
Percentage of total eligible population aged 40-74 received an NHS Health Check in the quarter	Quarterly	Executive Director of Public Health, Public Protection, Engagement & Communities	>=national average
**Physical activity: percentage of adults aged 19 and over who are physically inactive	Annual	Executive Director of Public Health, Public Protection, Engagement & Communities	<=national average
Smoking prevalence in adults (18+) - self reported smokers in the Annual Population Survey (APS)	Annual	Executive Director of Public Health, Public Protection, Engagement & Communities	<=national average

Priority 3: A cleaner, healthier and more prosperous Slough			
Corporate performance measure	**Reporting**	**CLT Lead**	**2026/27 target**
Average re-let time in days for HRA standard voids [BVPI 212]	Monthly	Chief Executive	<=35 days
Percentage of SBC emergency housing repairs completed within agreed timescale	Monthly	Chief Executive	100%
Tenant satisfaction survey: Percentage of tenants who responded satisfied with the overall service provided by Slough Borough Council Housing [TPO1]	Annual	Chief Executive	>=55%
**Rate of households with children in temporary accommodation per 1,000 households	Quarterly	Chief Executive	Metric monitored for trends
**Percentage of duties owed where homelessness was prevented or relieved	Quarterly	Chief Executive	Metric monitored for trends
**Employment rate for 16-64-year-olds	Quarterly	Executive Director of Regeneration, Environment & Planning	Metric monitored for trends
Percentage of decisions made on major planning applications within 13 weeks or timescale agreed with applicant	Quarterly	Executive Director of Regeneration, Environment & Planning	>=65%
Percentage of household waste sent for reuse, recycling, anaerobic digestion or composting	Monthly	Executive Director of Regeneration, Environment & Planning	>=40%

Corporate Health			
Corporate performance measure	**Reporting**	**CLT Lead**	**2026/27 target**
**Business rates in-year collection	Monthly	Chief Operating Officer	End of year 97.0%
**Council tax in-year collection	Monthly	Chief Operating Officer	End of year 93.5%
Members survey: I have confidence in Slough Borough Council senior officers	Annual	Chief Operating Officer	Metric monitored for trends
Members survey: There is a healthy culture and good ways of working overall between Members and officers	Annual	Chief Operating Officer	Metric monitored for trends
Interim staffing costs (£)	Quarterly	Chief Operating Officer	Metric monitored for trends
Percentage of staff equalities data recorded on Agresso	Quarterly	Chief Operating Officer	Metric monitored for trends
Staff turnover rate	Quarterly	Chief Operating Officer	Metric monitored for trends
Number of working days lost due to sickness absence per FTE employee	Quarterly	Chief Operating Officer	Metric monitored for trends
Staff survey: I would recommend Slough Borough Council as a great place to work	Annual	Chief Operating Officer	>=65%
Staff survey: I am proud to work for Slough Borough Council	Annual	Chief Operating Officer	>=75%
Percentage of customer service calls answered	Monthly	Executive Director of Public Health, Public Protection, Engagement & Communities	>=75%
Percentage of customer facing enquiry box emails responded to within 5 working days	Monthly	Executive Director of Public Health, Public Protection, Engagement & Communities	100%
Percentage of complaints escalated from stage 1 to stage 2	Monthly	Executive Director of Public Health, Public Protection, Engagement & Communities	Metric monitored for trends
Resident survey: Percentage of Slough respondents said they were very or fairly satisfied with ‘the way Slough Borough Council runs things’	Annual	Executive Director of Public Health, Public Protection, Engagement & Communities	>= national average
Resident survey: Percentage of Slough respondents said that they trust Slough Council a great deal or a fair amount.	Annual	Executive Director of Public Health, Public Protection, Engagement & Communities	>= national average

** New metric introduced for 2026/27

- 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 while strengthening 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.
    - The council's approach to partnership working is being reviewed and refreshed 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 Mar-26, the strategic performance picture remains variable. Of the 36 key performance indicators (KPIs) in the corporate performance scorecard:
    - 33% (12) performing at or better than target
    - 17% (6) marginally worse than target
    - 25% (9) 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 (Mar-25 to Mar-26):
    - Green rated KPI's improved from 22% to 33%
    - Amber rated KPI's increased from 11% to 17%
    - Red rated KPI's improved from 36% to 25%
    - Trend monitoring metrics reduced from 29% to 22%
    - Metrics in development remained stable at 1.

  Overall, more metrics are now on track with fewer performing below target compared to Mar-25.

- Direction of travel compared to the previous quarter or similar period from last year:
    - Performance improved (🡅) for 33% (12) of KPIs
    - Remained the same (➔🡄) for 19% (7)
    - Declined (🡇) for 39% (14)
    - No previous trends 6% (2)
    - In development 3% (1)

  This reflects a mixed performance position with a higher proportion of indicators declining than improving although a significant number are maintaining or improving performance.

- Four KPIs changed RAG status this quarter:
    - Priority 1: Percentage of new EHC plans issued within 20 weeks including exceptions changed from **green** to **amber**.
    - Priority 3: Percentage of SBC emergency repairs completed within agreed timescale changed from **green** to **red.**
    - Corporate Health: Percentage of suppliers paid within 30 days improved from **amber** to **green**.
    - Corporate Health: Percentage of customer facing enquiry box emails answered within timescale 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

Child development: percentage of children achieving a good level of development in all five domains at 2 to 2.5 years old

- Slough Child and Family Wellbeing Service continues to deliver consistently strong early child development outcomes with performance remaining high relative to benchmarks despite a modest fluctuation this quarter. By the end of Q4 2025/26, 85.5% of children (371 out of 434) achieved a good level of development across all five domains compared to 90.4% (376 out of 416) in Q3.
- While the percentage has reduced, the number of children achieving a good level of development has remained broadly unchanged, reflecting an increase in the cohort assessed rather than a material shift in overall outcomes. This indicates a stable and resilient performance profile as service reach expands.
- Performance continues to sit comfortably above the latest national (81.4%) and South-East regional (81.3%) averages maintaining Slough's strong comparative position. The service has also sustained progress in increasing the visibility of children through developmental reviews supporting earlier identification and intervention where needed.

- This work remains aligned to the Department for Education's ambition for 75% of children nationally to reach a good level of development by age five by 2028. The 0–19 service provider (HCRG) continues to embed its delivery model including progressing licensing and governance arrangements to enable early years practitioners to undertake universal 2–2.5-year reviews. These reviews incorporate signposting to additional support through the Best Start Family Hubs.
- In addition, an enhanced pathway is being embedded introducing a targeted 3-year developmental check for children who do not achieve a good level of development across all five domains at the 2–2.5-year review. This approach is designed to provide earlier targeted support to improve outcomes and increase the likelihood of children reaching a good level of development by age five.

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

Percentage of total eligible population aged 40-74 received an NHS Health Check in the quarter

- In Q3 2025/26, Slough sustained strong performance in the NHS Health Check Programme continuing to outperform both the South-East region and national averages. A total of 4,355 eligible residents aged 40–74 were offered a health check, representing 9.9% of the eligible cohort, well above the regional rate of 4.8% and the national average of 5.4%. Of those offered, 1,200 residents received a health check (2.7%), again exceeding the South-East (1.7%) and national (1.8%) benchmarks.
- During Q4 2025/26, productive engagement with general practice has continued through regular practice meetings. These sessions have focused on developing a more detailed understanding of current delivery and exploring factors influencing the effectiveness of NHS Health Checks and subsequent outcomes for residents. They have also provided an opportunity to set out a collaborative approach to quality assurance and continuous improvement ahead of the planned rollout of the Ardens Manager contract dashboard in 2026/27.
- NHS Health Check delivery is reported on an annual and five-year cycle with final Q4 2025/26 outturn to be published in July at the end of the financial year. Based on current performance, Slough is expected to maintain levels significantly above both regional and national averages. The focus moving into 2026/27 will be on strengthening quality improvement, with particular emphasis on outcomes and pathway effectiveness within primary care as part of wider cardiovascular disease (CVD) prevention.

Percentage of eligible adults managing their care via a direct payment [ASCOF 3D2a]

- In Q4 2025/26, 29.5% (410) of eligible adults in Slough were using a direct payment to manage their care. This is a slight decrease from 30.8% (427) in the previous quarter however performance remains strong when compared to the latest available benchmarks, exceeding both the national average (24.5%) and the South-East (23.7%).
- Performance continues to be supported through routine DLT oversight and ongoing benchmarking through SE ADASS. Current activity is focused on strengthening the sustainability of the local Personal Assistant market, improving accessibility of direct payments and ensuring residents are supported to make informed choices and retain greater control over their care arrangements.

Priority 3: A cleaner, healthier and more prosperous Slough

Number of homeless cases prevented

- Homelessness prevention activity strengthened further during Q4 with performance consistently exceeding the monthly target of 12 cases. Prevented cases increased from 38 in January to 42 in February before remaining high at 36 in March demonstrating sustained delivery across the quarter rather than a one-off spike.
- In total, 116 homelessness cases were prevented in Q4, a notable increase compared to 86 in Q3, 24 in Q2 and 32 in Q1. Across the full year, 258 cases were prevented in 2025/26 compared to 171 in 2024/25 and 119 in 2023/24 indicating a clear upward trajectory and step change in performance.
- This improvement reflects the introduction of dedicated prevention and early intervention capacity from November 2025 strengthening the service's ability to identify and support households at risk earlier and improve outcomes. Activity is focused on sustaining households in existing accommodation and securing alternative housing options where needed to reduce reliance on temporary accommodation.
- Teams are maintaining timely follow-up and escalation to ensure consistent case progression alongside continued engagement with landlords and the use of incentive schemes to protect and grow private rented housing supply. The backlog team continues to progress older cases to reduce delays supported by regular performance review and proportionate quality checks to ensure decisions are made in a timely and consistent way.

Percentage of decisions made on major planning applications within 13 weeks or timescale agreed with applicant

- Slough continues to perform strongly on major planning applications maintaining high levels of performance despite some pressures on non-major applications. For Q3, figures have been revised following a discrepancy in the published data. The updated position shows 100% (4) performance exceeding both the national average (91.4%) and the South-East average (91.2%). This reflects effective case management and consistent service delivery.
- Performance on non-major applications reduced from 80.6% (129) to 69.2% (90) and remains below the national average (91.0%) and the South-East average (89.9%). However, the 12 months position to December 2025 is 75.6% (451) indicating a more stable underlying trend. The recent decline reflects current capacity pressures primarily due to the recruitment freeze which has increased officer caseloads. Progress has also been affected by delays in finalising Section 106 agreements linked to resource constraints within HB Public Law.
- Targeted action is already in place to support improvement. The service is prioritising early case reviews, timely site visits and reduced reliance on time extensions. Weekly management meetings track progress supported by panel sessions and major case meetings to strengthen quality and consistency. Caseloads for officers handling complex applications are being reviewed with interim support in place and recruitment planning underway to build longer-term resilience.

- Complaint themes remain stable and are mainly linked to delays associated with high caseloads and disagreement with planning decisions. A revised Statement of

Community Involvement will help manage expectations around consultation and decision-making while formal appeal routes remain available.

Corporate Health

Business rates arrears reduction (%)

- At the end of March 2026, the council achieved a 24.1% (£2.642m) reduction in business rate arrears (adjusted to exclude changes in rateable value) significantly outperforming the year-end target of 12.0% (£1.315m).
- The council continues to take firm action to recover outstanding business rates. Where Liability Orders have been secured through the Magistrates' Court, cases are passed to Enforcement Agents for collection. This remains a key part of the council's recovery strategy to ensure businesses meet their financial obligations.

Council tax arrears reduction (%)

- At the end of March 2026, the council achieved a 13.7% (£3,434) reduction in council tax arrears exceeding the end of year target of 12.0% (£3.011m). The council is actively pursuing recovery of unpaid council tax.
- To strengthen recovery, three enforcement measures have been introduced: placing Charging Orders on properties with persistent arrears where the resident is the legal owner, initiating bankruptcy proceedings in cases of significant non-payment and applying to the Magistrates' Court for committal to prison in cases of wilful refusal or culpable neglect. Each case is reviewed before action is taken and the preferred approach is to agree payment plans so enforcement is used as a last resort.
- The council is also assessing the propensity to pay across outstanding accounts to prioritise cases most likely to result in successful recovery. External providers may be used to pursue accounts with a lower likelihood of collection. These actions aim to ensure fairness and accountability in the collection process.

Percentage of supplier invoices paid within 30 days

- In March, 80.9% (4,312) of invoices were paid within 30 days meeting the 80% target. Performance for the year to date is 77.5%, with Q4 at 80.7% compared to 71.9% in Q1, 83.4% in Q2 and 75.3% in Q3. Work continues with services to ensure purchase orders are raised before services are delivered.
- Suppliers have been advised that invoices without a valid purchase order will be returned. In addition, all suppliers have been instructed to send invoices directly to the Accounts Payable team to reduce delays.

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

Percentage of new EHC plans issued within 20 weeks including exceptions

- The percentage of new Education, Health and Care (EHC) plans issued within 20 weeks continued to improve during Q4. Using the Department for Education (DfE) measure which counts all EHC plans issued in the month regardless of their due date, 44.4% (16 plans) issued in March met the statutory 20-week timescale, an increase from 26.1% (6 plans) in January and 43.3% (13 plans) in February, bringing performance close to the latest national average of 45.9%.
- For plans due within the month, 48.6% (17 plans) were completed within 20 weeks in March, up from 44.4% (12 plans) in February. While January recorded 50%, this reflected a lower volume of plans (8). Demand remained consistently high throughout 2025/26 with 523 assessment requests received. Peak volumes in November (60), December (55) and March (58) have continued to place pressure on capacity and timeliness.
- Despite this, significant progress has been made in reducing historic delays. The backlog of overdue assessments reduced from a peak of 212 in December 2024 and 90 at the start of the financial year to 32 by the end of March 2026. This demonstrates sustained progress in addressing legacy cases alongside managing ongoing demand.
- Importantly, improvements in timeliness have not been at the expense of quality. A recent audit found 5 out of 6 EHC plans sampled were judged Good, with overall quality improving from “just Good” to “mid Good”, providing assurance that performance gains are underpinned by strengthened practice.
- Performance across the year has been impacted by a combination of high demand, staffing capacity and legacy data quality challenges, alongside constraints in Educational Psychology (EP) capacity, timeliness and increasing complexity in securing appropriate school placements. These factors have contributed to delays at key stages of the process.
- Overall, Q4 performance shows a clear positive trajectory. The priority now is to sustain improvements in timeliness and quality while addressing system pressures particularly EP capacity, placement sufficiency and implementing a focused programme to reduce the backlog of annual reviews to support continued improvement into 2026/27.

Percentage of care leavers in education, employment or training

- The proportion of care-experienced young people aged 19–21 participating in education, employment or training (EET) has shown steady improvement in recent months.
- As of March 2026, 51.9% (67 young people) were in EET, up from 49.6% (61) in December 2025. While this is marginally below the local target of 52%, it should be viewed in the context of a significantly expanded cohort which has grown by 19.4% over the past year (from 108 to 129 young people).

- Although the percentage is lower than the same point last year (59.3%), the actual number of young people in EET is higher (67 compared to 64) indicating that the change in rate reflects cohort growth rather than reduced participation.
- The 18 plus service continues to provide strong operational support with the Virtual School working closely alongside Thrive Teams to deliver targeted information, advice and guidance. This partnership focuses on raising aspirations, building confidence and supporting young people to access and sustain EET opportunities. Ongoing tracking of individual progress has helped maintain momentum and support improved outcomes across the year.

Rate per 10,000 of Children Looked After (CLA)

- The number of Children Looked After (CLA) has continued to rise, increasing from 172 (36.8 per 10,000) in March 2025 to 207 (44.3 per 10,000) in March 2026.
- Despite this upward trend, Slough's rate remains below that of its statistical neighbours (46.2 per 10,000), as well as significantly lower than both the national (67.0 per 10,000) and South-East averages (55.0 per 10,000).
- Growth within the cohort has been influenced in part by an increase in Unaccompanied Asylum-Seeking Children (UASC) who now account for 14.5% of the CLA population, slightly above the statistical neighbour comparator of 13.4%. As of 31 March 2026, Slough remains below its National Transfer Scheme threshold by 16 children indicating that further arrivals are likely.
- Over the past 12 months, there have been 118 new entries into care including 22 UASC (19%) alongside 82 children exiting the system. A notable proportion of recent entrants 47% (55 children) are aged 13–17 highlighting ongoing demand pressures at the adolescent edge of care and the need to strengthen support to help more young people remain safely within their families where appropriate.
- The increase in overall CLA numbers (207) compared to the same period last year (172) reinforces the importance of robust oversight and timely decision-making. Regular scrutiny through CLT continues to monitor trends and assess system pressures particularly those linked to national transfer arrangements and external factors. In parallel, all children subject to Child Protection plans for over nine months are kept under review to ensure timely progression and reduce the risk of unnecessary escalation into care.

Corporate Health

Staff turnover rate

- Staff turnover increased slightly from 9.8% (rolling year to December 2025) to 10.8% (rolling year to March 2026). The resignation rate also rose from 8.0% to 8.6% over the same period.
- Despite this increase both measures remain broadly in line with the benchmark of around 10% for a healthy level of workforce movement. Turnover is expected to remain relatively elevated, but stable in the short-term reflecting planned service restructures which may lead to some workforce movement.
- HR continues to strengthen understanding of workforce trends by encouraging all departing employees to complete exit interviews. Feedback indicates that organisational culture and career development are contributing factors in some resignations. These insights are being used to inform ongoing work to improve workplace culture, promote inclusivity and enhance the overall employee experience.

- Analysis of tenure data highlights two key retention pressure points. Around 36% of leavers exit within their first two years indicating an early attrition challenge. While attrition reduces significantly after five years' service a second concentration of departures is seen between five- and ten-years accounting for around 34% of leavers. This suggests a mid-career retention risk potentially linked to progression opportunities and career mobility. Encouragingly 70% of respondents to the 100-day new starter survey reported a positive experience of recruitment and onboarding indicating that early engagement and integration are working well for the majority of new hires.
- HR is working closely with the Corporate Leadership Team (CLT) to support a more inclusive and supportive working environment including investment in staff trained as Mediators Mental Health Contacts and Speak Up Guides. The Pathways framework continues to provide a structured approach to career development for both new and existing staff with its use being reinforced through one-to-one meetings and end-of-year reviews to support progression and longer-term retention.

Percentage of staff equalities data recorded on Agresso

- The percentage of staff with fully completed equality data on Agresso remains unchanged at 58%. A further 72% of staff have partially completed their declarations with key gaps most commonly seen in ethnicity data. Improving the completeness and quality of equality monitoring data remains a priority.
- Both new starters and existing employees are encouraged to complete all relevant declaration fields to support data accuracy, transparency and compliance with statutory and organisational reporting requirements. Equality data continues to be collected as part of the application process and while this remains optional the introduction of a data sharing consent question allows information provided at application stage to be transferred to Agresso where individuals opt in. This is expected to improve overall completion rates over time.
- The Learning and Development team has also strengthened messaging on equality data through the corporate induction and LEAD programme reinforcing expectations at both entry and leadership levels. These actions are intended to drive a sustained improvement in declaration rates and overall data quality.

Number of working days lost due to sickness absence per FTE employee

- The average number of working days lost due to sickness absence per FTE has remained stable at 9.4 days (rolling year to December 2025 and March 2026). This indicates a stabilising position, although absence levels remain an area of ongoing focus.
- The Sickness Absence Policy has been revised to improve clarity and reduce unnecessary bureaucracy, making it more accessible for both managers and staff. This supports earlier intervention, strengthens case management and helps reduce overall days lost.
- The Employee Relations Team continues to work proactively with line managers to ensure cases are managed effectively and in line with policy. Regular contact, reminders and follow ups are used to support timely and consistent case progression.

- In response to staff feedback the wellbeing offer has been enhanced. A new Occupational Health provider, Health Partners and an updated Employee Assistance Programme (EAP), Health Heroes, were introduced in February 2026. The new Occupational Health service is providing faster access to advice and a more responsive service, with early indications showing more balanced and constructive outcomes from referrals.

Interim staffing costs (£)

- Interim staffing costs decreased between Quarter 3 and Quarter 4 of 2025/26 reducing from £6.442m to £5.629m. This represents a positive reduction although costs remain under close review as they continue to be influenced by short-term operational factors including reduced activity over the Christmas and New Year period.
- Work is ongoing to reduce reliance on interim staff through strengthened workforce planning and tighter cost control. Interim recruitment is managed through HR expenditure control panels, with all requests required to demonstrate clear business need and criticality. Proposals are reviewed by CLT with Executive Directors responsible for presenting a formal business case for approval.
- HR is also working with services to develop clearer organisational structures providing greater oversight of roles and resourcing. Planned service restructures in 2026/27 will create further opportunities to align staffing to service needs and reduce reliance on interim roles. In addition, agency placements have been converted onto the council payroll where appropriate reducing agency fees and improving overall cost efficiency.

Percentage of complaints escalated from stage 1 to stage 2

- During Q4, there were 341 Stage 1 complaints (124 in January, 92 in February and 125 in March), an increase compared to 294 in Q1, 302 in Q2 and 275 in Q3. Despite higher volumes performance improved significantly. The average response time reduced from 20.0 days in Q1 to 11.2 days in Q4 while the proportion responded to on time increased from 58.8% to 73.6%.
- A similar trend is seen for Stage 2 complaints with 87 cases in Q4 (30 in January; 28 in February and 29 in March) compared to 65 in Q1, 82 in Q2 and 55 in Q3. While response times improved from 28.2 days in Q1 to 18.9 days in Q4, timeliness has not yet shown consistent improvement with 47.1% responded to on time in Q4 compared to 55.4% in Q1, 41.5% in Q3 and 50.9% in Q3.
- The proportion of complaints escalating from Stage 1 to Stage 2 is increasing highlighting the need to strengthen the quality of Stage 1 investigations and ensure all aspects of a complaint are fully resolved at the earliest stage. To support improvement, all complaints and related casework (including Member enquiries, MP enquiries, FOIs and SARs) are recorded in Intelex, providing a single source of truth and improving consistency, transparency and reporting across the council and Slough Children First. The council continues to align its approach with the Housing Ombudsman and LGSCO Complaint Handling Codes.
- A revised Corporate Complaints Policy and a new Remedies and Compensation Policy are in development and will be presented in June. Complaint handling training has been delivered and additional capacity is being introduced through recruitment to a Complaints Casework and FOI Officer role.

- A strengthened governance framework is now in place supported by mapped processes and regular reporting: weekly monitoring of overdue cases, monthly updates to the Lead Member, quarterly reporting to CLT Assurance and an annual report to Full Council. This supports improved oversight, accountability and continuous improvement.

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

Percentage of 16–17-year-olds not in education, employment and training (NEET) or whose activity is not known

- Slough's NEET and not known rate for February 2026 stands at 6.5% (339 young people), an improvement from 7.7% (394) in February 2025. However, the rate remains above the England average of 5.4% for February 2026, with Slough ranked 121st out of 151 local authorities placing them in the bottom quintile nationally. This highlights the ongoing need for targeted support and additional resource.
- To support young people into education, employment or training, the council continues to prioritise face-to-face information, advice and guidance (IAG) sessions in community venues supplemented by telephone contact where appropriate. Delivery locations are regularly reviewed to target areas of highest need. Support focuses on employability and progression including CV writing, job searching, applications and interview preparation alongside signposting to specialist services including mental health, wellbeing and substance misuse support. Proactive contact is maintained with all 16–17-year-olds to confirm participation status and enable early intervention where plans are not yet in place.
- However, service capacity remains limited currently operating at 1.5 FTE, significantly lower than comparable authorities. While Cabinet has recognised the need for additional resource, a business case for an additional NEET worker is awaiting approval. This constraint continues to limit the pace and scale of improvement.

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

Percentage of safeguarding referrals that meet section 42

- In Q4, 23.6% (34 cases) of safeguarding referrals progressed to a Section 42 enquiry, an increase from 16.0% (26 cases) in Q3. While this shows improvement, performance remains below the last published 2024/25 national average of 28.9% and the South-East average of 32.3%.
- This reflects ongoing variation in how Section 42 thresholds are applied across referral pathways. To address this, strengthened governance arrangements, enhanced quality assurance and focused multi-agency engagement are in place to support more consistent and proportionate decision-making.
- The Head of Service continues to provide oversight through targeted auditing and practice review, helping to ensure appropriate application of thresholds and robust safeguarding decisions.

Priority 3: A cleaner, healthier and more prosperous Slough

Average re-let time in days for HRA standard voids [BVPI 212]

- Performance in managing housing voids improved during Q4 particularly when the impact of long-standing historic cases is taken into account. At the end of March, there were 90 void properties including 48 HRA standard voids (V1–V3). Of these, 5 were in pre-works, 13 were in works and 30 were ready to re-let, indicating a strong pipeline of homes close to being returned to use.
- In March 26 HRA standard voids were re-let with an average turnaround time of 178 days. However, this was heavily influenced by a single long-standing case that took 1,400 days to complete. Excluding this case reduces the average to 47 days, which better reflects current performance and progress towards the 35-day target. Re-lets have increased steadily from 9 in January (68 days) to 15 in February (46 days) and 26 in March. The higher average re-let time in March reflects the clearing of older cases rather than a decline in performance.
- Across Q4, 50 HRA standard voids were re-let with average turnaround time of 119 days. This represents increased activity compared to Q2 (32 voids re-let taking 51 days) and Q3 (35 voids re-let taking 60 days) although lower than Q1 (66 voids re-let taking 84 days). The higher average time reflects the ongoing clearance of more complex long-standing cases and improvements to the condition of housing stock.
- For 2025/26 overall, 183 voids were re-let with an average turnaround of 83 days, a significant reduction in average re-let time compared 2024/25 (263 voids re-let taking 194 days) and 2023/24 (131 voids re-let taking 252 days). Although fewer properties were re-let compared to 2024/25, this reflects a strategic focus on clearing long-standing cases and improving the efficiency of the voids process.
- Delays continue to be driven by subcontractor turnaround times and the three-stage verification process. To address this, the weekly Voids Taskforce is maintaining targeted oversight with escalation of verification delays as a critical blocker.
- Contractor performance is being strengthened through improved scheduling and capital works batching for more complex voids (V2/V3), while a continued focus on early pre-void notification and early offers aims to reduce downtime. In parallel, targeted intervention on long running cases is being prioritised to prevent ongoing distortion of average re-let times and support sustained performance improvement into 2026/27.

Percentage of SBC emergency housing repairs completed within agreed timescale

- Housing repairs performance showed a mixed picture during Q4. Emergency repairs completed within agreed timescale declined to 86.8% (243) in March 2026 down from 100% (708) in December 2025. This reduction has been linked to reported issues with Cardo's IT systems which impacted repair reporting.
- Cardo has been tasked with resolving these issues and providing assurance that clear and reliable reporting will resume. Performance will continue to be closely monitored to ensure emergency repairs are completed within agreed timescales.

- The proportion of housing repairs completed in a single visit was 81.7% (1,368) in March 2026 remaining above target despite a fall from 86.4% (1,540) at the end of December 2025. The percentage of responsive repairs completed on time also slightly declined to 84.3% (1,590) in March 2026 compared with 85.7% (1,975) in December 2025. Changes in Cardo's management arrangements have been cited as a contributing factor and actions are in place to stabilise performance and improve consistency.
- Voids performance continued to improve over the quarter with average relet times falling below the 20-day target by March. This supports a faster turnaround of homes and helps meet housing demand.
- The 2025/26 planned works programme has now been completed and the 2026/27 programme will commence in April as scheduled. Delivery of the Social Housing Decarbonisation Fund (SHDF) programme is progressing well with Wave 2.2 works completed and the first properties under Wave 3.0 already finished. A further 220 properties are scheduled for delivery during the year supporting improved energy efficiency and better living conditions for residents.

Tenant satisfaction survey: Percentage of tenants who responded satisfied with the overall service provided by Slough Borough Council Housing [TPO1]

- Tenant satisfaction with the overall service has improved but remains below national benchmarks. The 2025/26 survey shows 53% of tenants are satisfied with the overall service provided by Slough Borough Council Housing, an 8-percentage point increase from 45.1% in 2024/25. While this represents a significant improvement performance remains below the national median of 71.8% indicating further progress is required.
- The 2025/26 survey was delivered in three waves (July–August, September–October and October–February) with tenants responding either online or via telephone. A total of 712 tenants responded (12%) broadly in line with the 13% response rate achieved in 2024/25 providing a comparable evidence base year-on-year. Positive improvements across key service areas. Alongside the overall increase there have been notable gains in several areas:
    - Satisfaction with time taken to complete the most recent repair increased from 45% to 53%
    - Overall satisfaction with repairs increased from 53% to 58%
    - Satisfaction that the home is safe increased from 59% to 63%
    - Agreement that the landlord treats tenants fairly and with respect increased from 53% to 59%
    - Satisfaction that the landlord keeps tenants informed about things that matter to them increased from 42% to 46%
    - Satisfaction with communal area cleanliness and maintenance increased from 53% to 58%
- Senior management continue to meet bi-monthly with the Regulator following the C3 Regulatory Judgement issued last year. The Service Improvement Plan is progressing well with clear actions, defined deadlines and continuous improvement embedded across housing services. Staff objectives and workloads are aligned to delivery of the plan supporting sustained progress and compliance with regulatory requirements.

- Housing teams remain appropriately resourced to support effective service delivery and ongoing improvement. The Resident Involvement Team is also fully resourced and has delivered staff engagement sessions to help embed a stronger culture of resident involvement across housing services. This ensures residents are at the heart of service delivery with outcomes, evidence and accountability informing decision-making.

Percentage of household waste sent for reuse, recycling, or composting

- The household recycling rate for Q4 2025/26 shows a marked improvement over the previous quarter although direct comparison should be treated with caution due to a change in methodology.
- The KPI now includes kerbside food waste collections representing a step change from the previous measure which only captured dry recycling and green waste.
- Performance strengthened steadily across the quarter increasing from 22.5% in January to 24.7% in February and 26.5% in March. This is a clear improvement on Q3 where performance remained around 20–21% and from March 2025 (19.4%). While part of this increase reflects the inclusion of food waste within the KPI, there has also been an underlying improvement in recycling performance. Although the rate remains below the borough's long-term target of 40%, the upward trend in the latter part of the quarter indicates early signs of stabilisation.
- This has been driven by the accelerated rollout of borough-wide food waste collections ahead of the 1 April 2026 legislative deadline alongside a reduction in rejected recyclables and a seasonal increase in green waste. Separated food waste has increased significantly during the quarter, with March tonnages around ten times higher than at the start of Q3 and now approaching 10% of residual waste, demonstrating the growing impact of the service on overall waste composition.
- The rollout of the food waste service is now complete and further improvement is expected as resident participation increases and behaviours continue to adapt particularly for residents in flats.

Corporate Health

Percentage of customer service calls answered

- Customer services continued to experience significant operational pressures during 2025/26. The service delivered 5% savings as part of the Medium-Term Financial Strategy alongside a recruitment freeze which limited the ability to fill vacant posts. Approval was subsequently given to recruit 3.5 FTE in the new financial year to strengthen capacity. Of these, 2.5 FTE started in April with the remaining 1 FTE due to start in May.
- During Q4, the team handled approximately 3,800 calls per month. While overall call volumes were broadly in line with the previous year, council tax related call demand increased by 15.9% rising from 26,014 to 30,149 calls in 2025/26 compared with the previous financial year.
- This increase is largely linked to a near 40% rise in recovery activity resulting in more complex and longer customer interactions. Customer services is working closely with the council tax service on a mitigation action plan which is being closely monitored to manage increased demand while supporting collection rate targets.

- Customer access point usage also increased during the year rising by 10.2% from 9,256 to 10,203 visits between April and March. For the first three quarters of the year the service operated from five hubs, including Observatory House.
- In Q4, customer services supported the introduction of a proof-of-concept pilot at the Britwell Hub launched in January 2026. The initial three-month pilot is testing a redesigned face-to-face offer with a stronger focus on resolving customer issues and supporting access to wider council services.
- The aim is to assess whether demand can be met more effectively through enhanced service delivery from fewer locations helping to inform decisions on the future shape of the customer services offer.