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# Performance Report

## Quarter 2

### 2023/24 financial year

#### Adults and Health Committee

Governance & Performance  
Cambridgeshire County Council  
[business.intelligence@cambridgeshire.gov.uk](mailto:business.intelligence@cambridgeshire.gov.uk)

## Key



Data Item	Explanation
<b>Target / Pro Rata Target</b>	The target that has been set for the indicator, relevant for the reporting period
<b>Current Month / Current Period</b>	The latest performance figure relevant to the reporting period
<b>Previous Month / previous period</b>	The previously reported performance figure
<b>Direction for Improvement</b>	Indicates whether 'good' performance is a higher or a lower figure
<b>Change in Performance</b>	Indicates whether performance is 'improving' or 'declining' by comparing the latest performance figure with that of the previous reporting period
<b>Statistical Neighbours Mean</b>	Provided as a point of comparison, based on the most recently available data from identified statistical neighbours.
<b>England Mean</b>	Provided as a point of comparison, based on the most recent nationally available data
<b>RAG Rating</b>	<ul style="list-style-type: none"> <li>• <b>Red</b> – current performance is off target by more than 10%</li> <li>• <b>Amber</b> – current performance is off target by 10% or less</li> <li>• <b>Green</b> – current performance is on target by up to 5% over target</li> <li>• <b>Blue</b> – current performance exceeds target by more than 5%</li> <li>• <b>Baseline</b> – indicates performance is currently being tracked in order to inform the target setting process</li> <li>• <b>Contextual</b> – these measures track key activity being undertaken, to present a rounded view of information relevant to the service area, without a performance target.</li> <li>• <b>In Development</b> - measure has been agreed, but data collection and target setting are in development</li> </ul>
<b>Indicator Description</b>	Provides an overview of how a measure is calculated. Where possible, this is based on a nationally agreed definition to assist benchmarking with statistically comparable authorities
<b>Commentary</b>	Provides a narrative to explain the changes in performance within the reporting period
<b>Actions</b>	Actions undertaken to address under-performance. Populated for 'red' indicators only
<b>Useful Links</b>	Provides links to relevant documentation, such as nationally available data and definitions

## Indicator 230: Number of new client contacts for Adult Social Care per 100,000 of the population

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December 2023

Pro Rata Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	2150.7	1060.9	Improving
Statistical Neighbour Mean	England Mean	RAG Rating		
4477.9	4450.5	In Development		

## Indicator Description

Effective community prevention and information services should minimise the number of people needing to contact adult social care directly. A marked growth in the number of contacts might show that universal community services are not meeting need. Conversely a marked reduction might suggest that we are not providing the right pathways into adult social care for those who do need it.

This measure only includes requests for support relating to new clients. In line with statutory reporting guidance, the definition of "new" is that the client is not in receipt of any long term support at the time the contact was made.

Calculation:

$$(X/Y) \times 100,000$$

Where:

X = Total number of new requests for support from people aged 18+ as defined by SALT guidance (tables STS001 1a and STS001 1b)

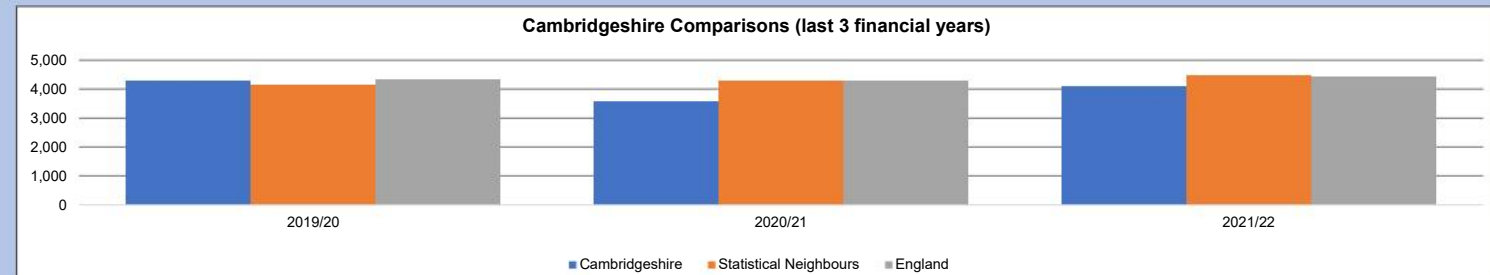
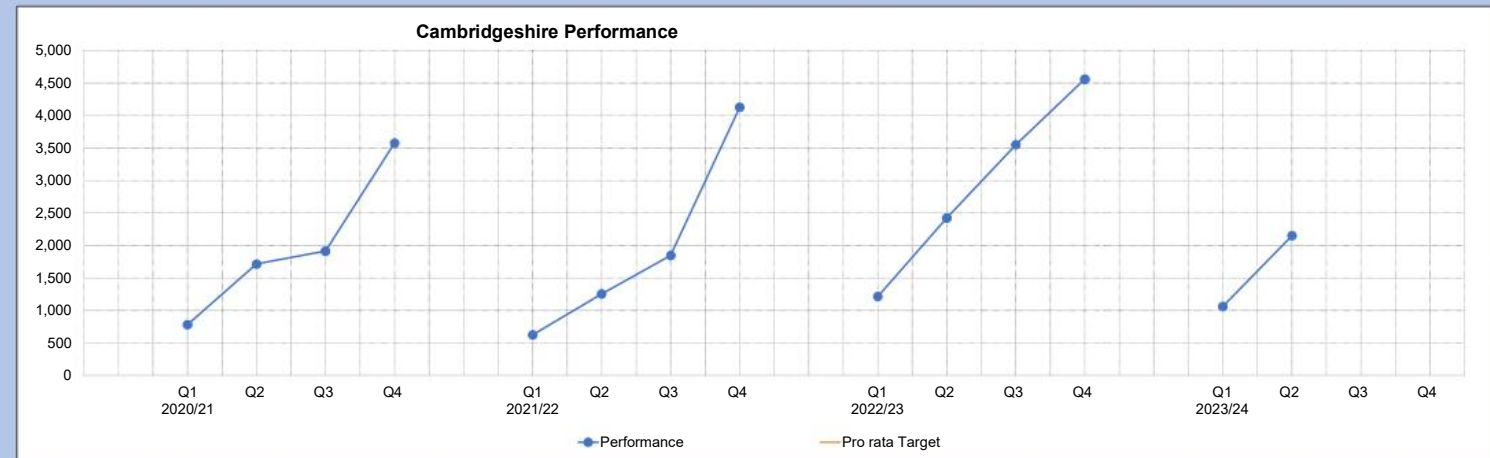
Y = 18+ population

## Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



## Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

New client contacts per 100,000 of population increased across all 4 quarters in 2022/23 compared to 2021/22. The demand continues to grow the lowers number of contacts in covid periods have not been sustainable and currently we are receiving a higher percentage of calls in to ASC requesting for support and remain on par with the equivalent quarters for 2021/22.

Cambridgeshire recorded a higher number of new client contacts in 2022/23 compared to the previous two financial years. In part this is attributable to the new reporting processes implemented in the latter part of the 2021/22 financial year, as well as normal statistical variation. However, there has been a level of increase in new client contacts that is felt to be linked to need in the community (see indicator 231), reflected in the increased numbers of new client assessments for care and support being undertaken (2021/22 monthly average of completed assessments/reassessments: 330, 2022/23 monthly average = 392). Part of the increase in contact numbers may also be due to proactive work with primary care social prescribers to increase awareness of prevention and early intervention services such as lifeline alarms. During the 2022/23 financial year, Cambridgeshire implemented a system to receive electronic referrals from GP and social prescribing systems to improve the referral route and increase the quality of information received.

## Actions

## Indicator 231: % of new client contacts not resulting in long term care and support

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December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	88.3%	87.6%	Improving
Statistical Neighbour Mean	England Mean	RAG Rating		
91.7%	91.8%	In Development		

## Indicator Description

This indicator is important to look at in line with indicator 230 as it shows whether change in contact numbers are from people needing long term care, or people whose needs could be met with preventative or low level community support. It helps us understand what might be driving a growth or reduction in contacts.

This measure only includes requests for support relating to new clients. In line with statutory reporting guidance, the definition of "new" is that the client is not in receipt of any long term support at the time the contact was made.

Calculation:

$$(X/Y)*100$$

Where:

X = Total number of new requests for support from people aged 18+ as defined by SALT guidance (tables STS001 1a and STS001 1b) that do not result in the need for long term care and support

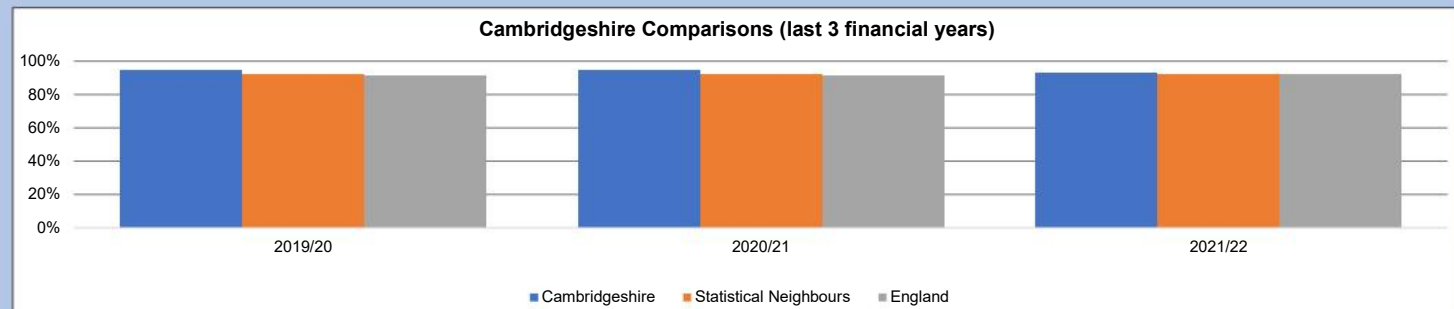
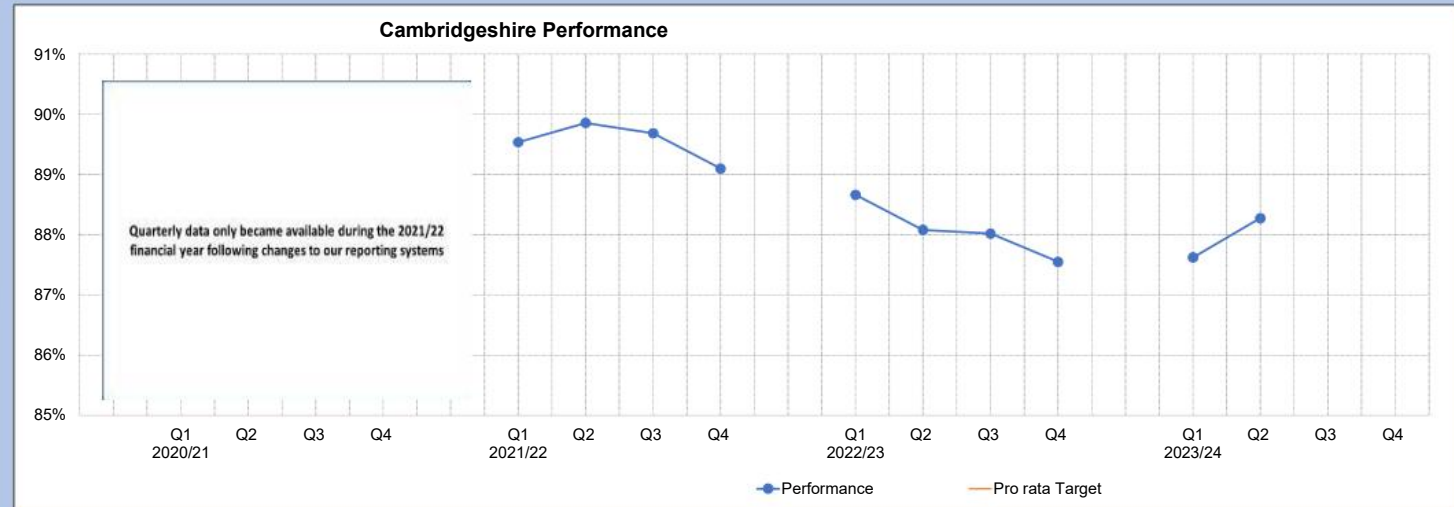
Y = Total number of new requests for support from people aged 18+ as defined by SALT guidance (tables STS001 1a and STS001 1b)

## Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



## Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

The percentage of new client contacts not resulting in long-term care and support has shown a decreasing trend over the last year but has now stabilised around 88%. This figure is slightly higher than the overall percentage for 2021/22 but remains below the equivalent quarter last year. When interpreted in line with indicator 230, which presents slightly less contacts for Q2 2023/24 compared to 2022/23, the overall picture is that the need for Long Term services remains high compared to 2021/22 but has provisionally stabilised in terms of contact numbers and the % progressing to Long Term support.

## Actions

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↓	18.3%	19.3%	Improving
Statistical Neighbour Mean	England Mean	RAG Rating		
41.3%	45.0%	In Development		

### Indicator Description

It is a statutory duty to review long term care and support plans at least once a year. Regular reviews can help safeguard from risk, but also support personalisation by continuing to support people to connect to their communities and make the most of the local assets.

Calculation:

$$(X/Y)*100$$

Where:

X = Number of people receiving long-term support for over 12 months who had not received a review in the last 12 months

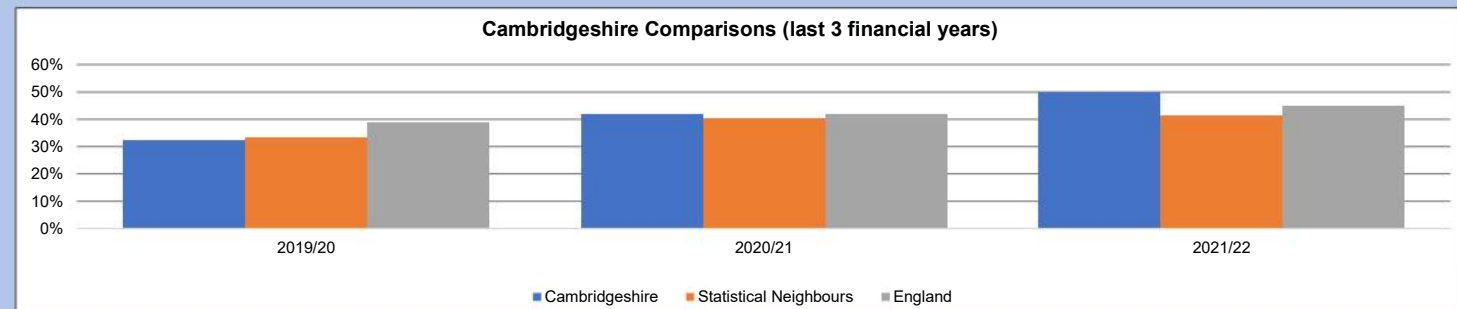
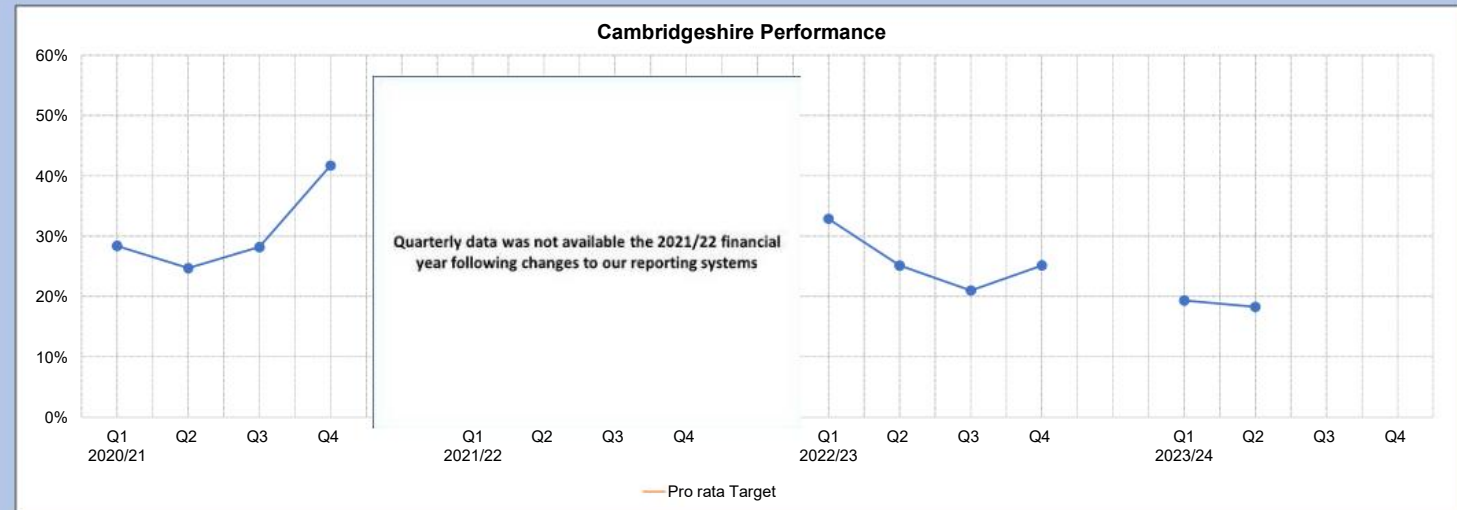
Y = Total number of people receiving long-term support for over 12 months at the end of the period

### Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



### Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

The % of clients at the end of Q2 2023/24 with no review in the last 12 months is the lowest across the last 3 financial years.

During 2022/23, there was a significant level of activity undertaken to clear review backlogs that built up during the pandemic. An external agency was commissioned from March 2022 to work through the backlog of reviews for clients receiving long-term services. This additional capacity significantly increased the number of reviews being completed; in 2021-22 there was an average of 294 reviews completed per month, increasing to an average of 472 reviews for the completed financial year 2022-23.

### Actions

## Indicator 233: Number of carers assessed or reviewed in the year per 100,000 of the population

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December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	27.9	14.1	Improving
Statistical Neighbour Mean	England Mean	RAG Rating		
440.8	1398.3	In Development		

## Indicator Description

Reviews are also an important time to make contact with carers to check that they remain able to offer their critical support. Assessments and reviews can be done jointly or separately from the cared for person. It is an opportunity to support carers to continue their caring role but also to plan for the future.

Calculation:

$$(X/Y) \times 100,000$$

Where:

X = Total number of carers with a carers assessment or review in the period

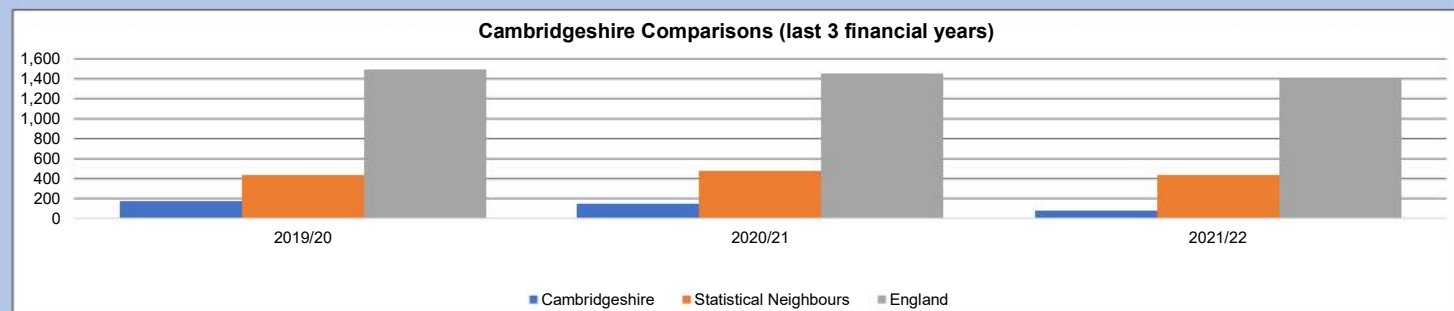
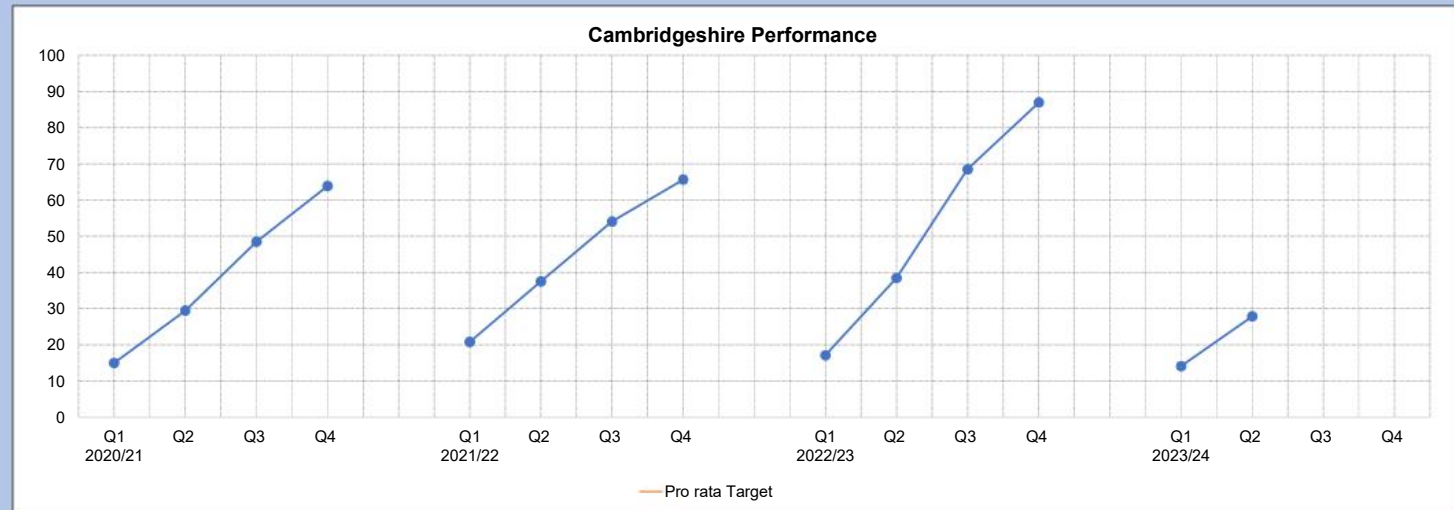
Y = 18+ population

## Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



## Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

A move away from carers assessments by default to a more constructive and timely conversation accounts for the lower volume of carers assessments. This should be seen alongside our carers conversation and carers triage activity. During Q2 2023/24 we have completed 152 assessments and reviews. A paper of carers recommissioning is being presented to committee which will set the road map for future carers provision.

## Actions

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	95.1%	96.3%	Declining

Statistical Neighbour Mean	England Mean	RAG Rating
97.1%	95.4%	In Development

### Indicator Description

The Care Act 2014 (Section 42) requires that each local authority must make enquiries, or cause others to do so, if it believes an adult is experiencing, or is at risk of, abuse or neglect. An enquiry should establish whether any action needs to be taken to prevent or stop abuse or neglect, and if so, by whom.

As part of the statutory reporting of safeguarding cases, those adults at risk may be asked what their desired outcomes of a safeguarding enquiry are. Where desired outcomes have been expressed, after completion of the safeguarding enquiry, the achievement of these outcomes is reported. This data is collected as part of the statutory Safeguarding Adults Collection.

This indicator links to indicator 236 and monitors how well we have been able to support the person to achieve the outcomes they wanted from the safeguarding enquiry.

Calculation:

$$(X/Y) \times 100$$

Where:

X = The number of concluded enquiries where outcomes were either achieved or partially achieved.

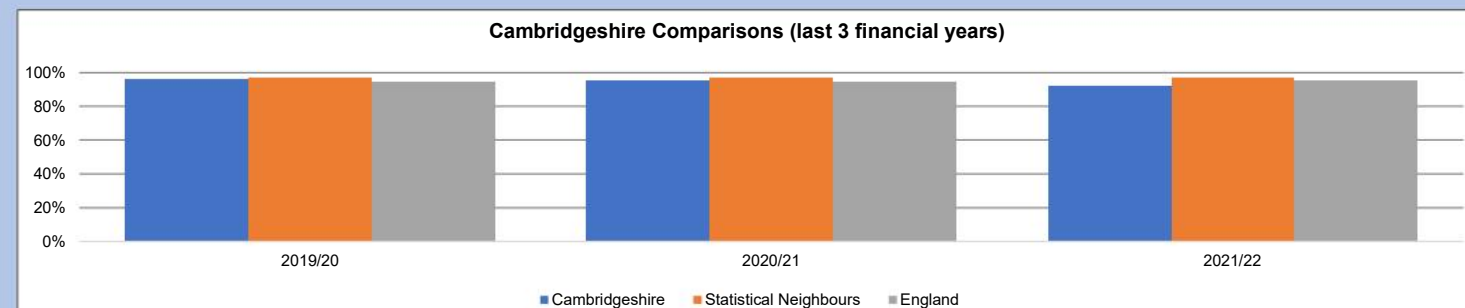
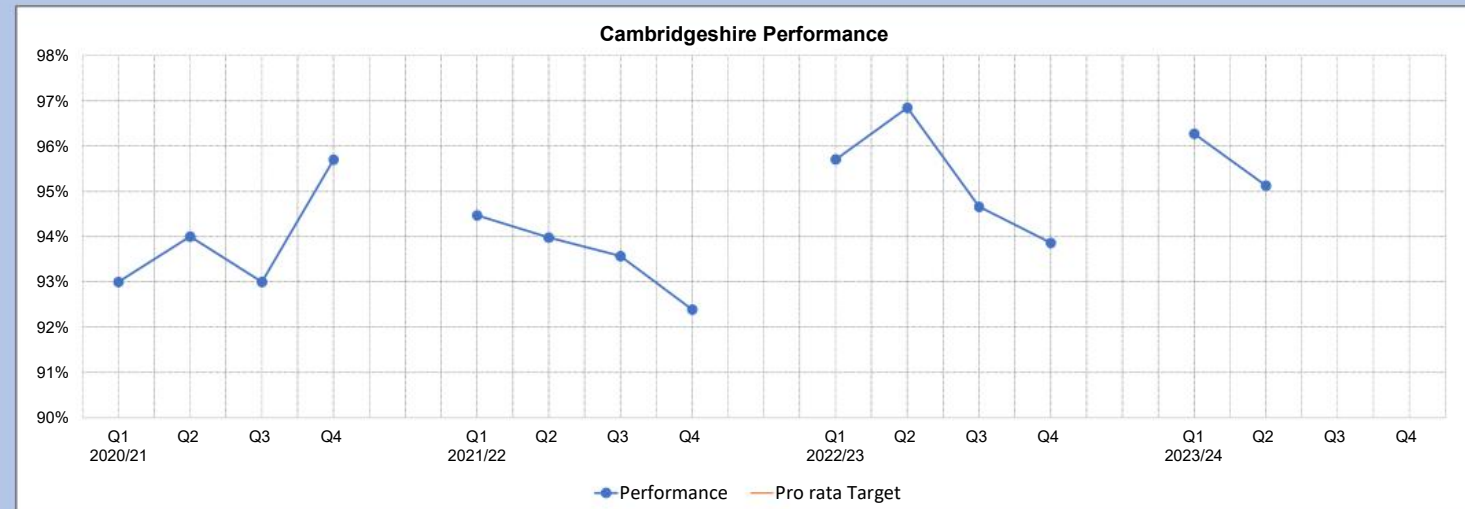
Y = The number of concluded enquiries where the adult(s) expressed desired outcomes.

### Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



### Commentary

Performance in this area continues to be high and comparable with national and statistical neighbour averages. The % of fully or partially achieved outcomes for Q2 2023/24 (95%) is slightly lower than for Q2 2022/23 (96%). Overall figures for the number of enquiries where outcomes were expressed and the number with fully or partially achieved outcomes remained fairly stable.

We continue to have reporting gaps for safeguarding. New dashboards are currently in development meaning not all the data needed to inform these indicators is available for routine use by staff.

### Actions

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards



## Indicator 126: Proportion of people using social care who receive direct payments

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December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	17.2%	17.8%	Declining
Statistical Neighbour Mean	England Mean	RAG rating		
27.6%	26.7%	In Development		

## Indicator Description

Direct payments provide people with more choice and control over how they meet their care and support needs.

The scope of this indicator is limited to people who receive long term support only. These include people whose self directed support is most relevant. This will better reflect the council's progress in delivering personalised services for users and carers.

Both measures for self directed support and direct payments have also been split into two. They will focus on users and carers separately. This measure reflects the proportion of people who receive a direct payment either through a personal budget or other means.

Calculation:

$(X/Y) \times 100$

X = The number of users receiving direct payments and part direct payments at the end of the period.

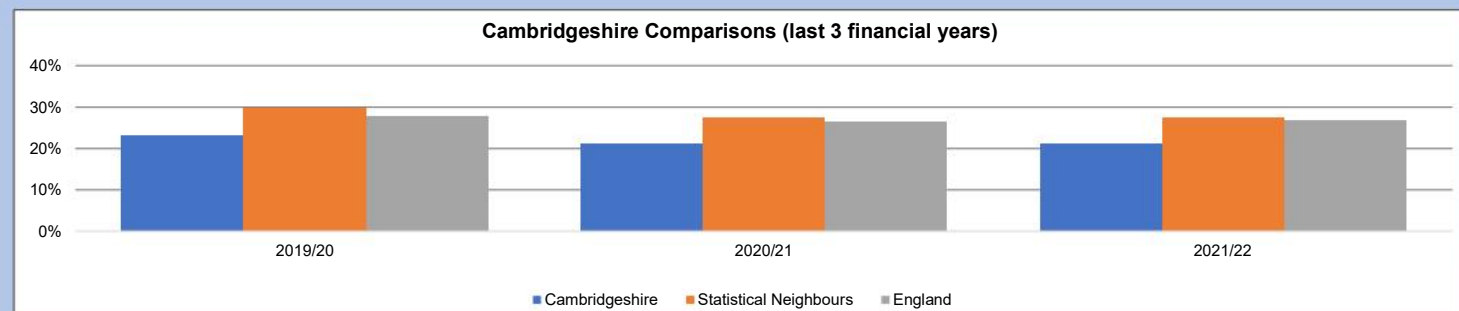
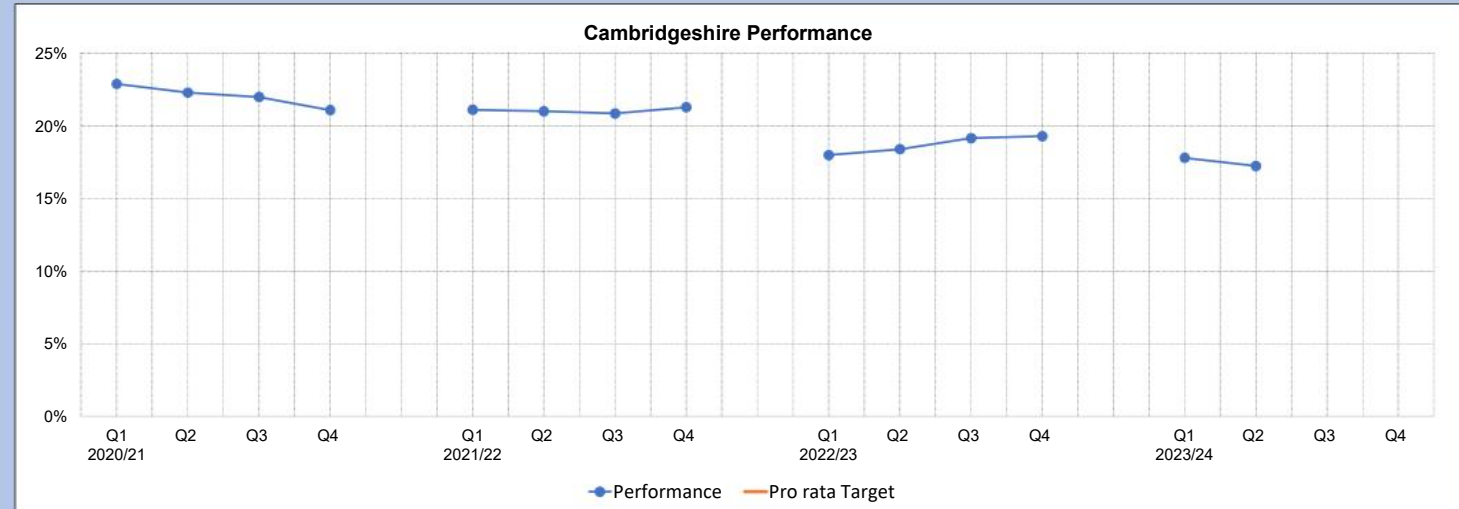
Y = Clients aged 18 or over accessing long term support at the end of the period.

## Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions](#)



## Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

The percentage of people receiving direct payments in Q2 2023/24 continues to be low, reflecting the challenge in making direct payments an attractive solution. The general decrease in performance across the last year compared to 2021/22 is mostly driven by an increase in the number of people using social care rather than the number of people receiving direct payments, which has remained relatively stable (828 at the end of Q4 2021/22 compared to 808 at the end of the latest quarter). The alternative options like individual service funds are being explored to increase choice of control to Adults receiving care in the community.

Our work with Community Catalyst around micro enterprises seeks to build more opportunities for people to use direct payments to access care and support opportunities local to them.

The council has recently introduced Individual Service Funds, a personal budget managed by a provider of the persons choice rather than held by themselves. This alongside the work to develop place based micro-enterprises within the Care Together programme should help to build on the range of options available.

## Actions

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards. We now have a programme manager in place to oversee the work to increase direct payments and hopefully this will support progress to begin to deliver a noticeable impact.



## Indicator 140: Proportion of people receiving reablement who did not require long term support after reablement was completed

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December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	86.7%	87.9%	Declining
Statistical Neighbour Mean	England Mean	RAG Rating		
79.3%	77.6%	In Development		

## Indicator Description

This indicator shows the proportion of new clients who received short term services during the year, where no further request was made for ongoing support. Reablement support has best results for those who can be prevented from requiring long term care and support. However, it can also benefit people in receipt of long-term care and support by supporting improvement and enhancing their level of independence. Setting a target too high on this indicator can be a perverse incentive to reduce the service for those with more complex needs. A target should be set that reflects a balance of use. This indicator can be viewed alongside the trends on new clients with long term service outcomes (indicator 231) to ensure that more complex cases are not being diverted straight into long term care.

Short term support is designed to maximise independence. Therefore, it will exclude carer contingency and emergency support. This stops the inclusion of short term support services which are not reablement services.

Calculation:

$(X/Y) \times 100$

Where:

X = Number of new clients where the sequel to "Short Term Support to maximise independence" was "Ongoing Low Level Support", "Short Term Support (Other)", "No Services Provided - Universal Services/Signposted to Other Services", or "No Services Provided - No identified needs".

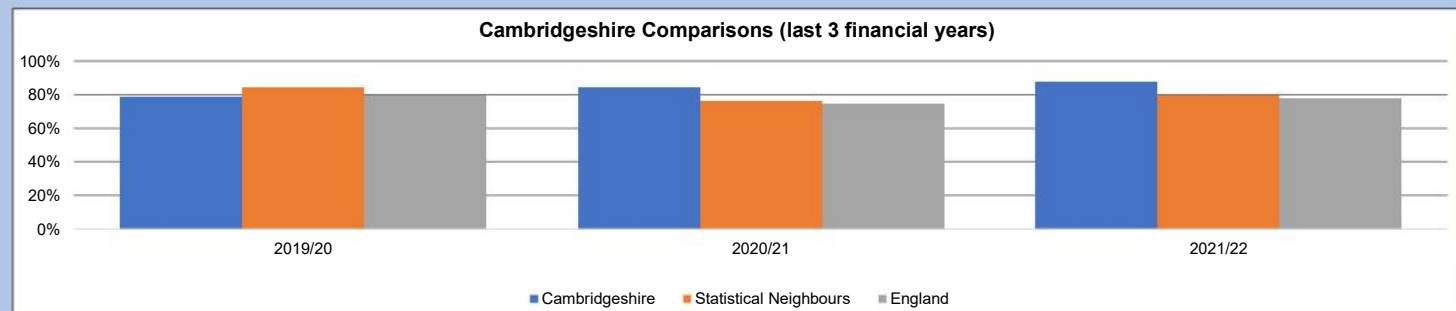
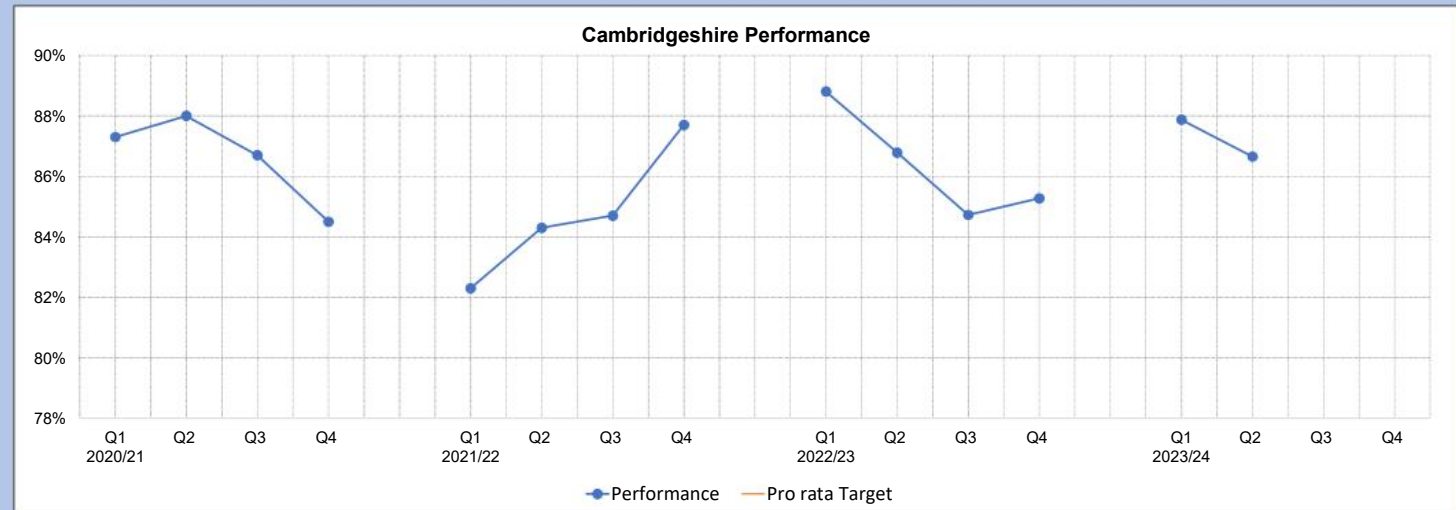
Y = Number of new clients who had short term support to maximise independence. Clients with a sequel of either early cessation due to a life event, or who have had needs identified but have either declined support or are self funding are not included in this total.

## Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



## Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

The proportion of people not requiring long-term support after a period of reablement remains high compared to the national and statistical neighbour average. Q2 2023/24 has decreased showing the complexity of cases coming through needing further support following a short-term intervention.

## Actions

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards

## Indicator 234: % total people accessing long term support in the community aged 18-64

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December 2023

Target	Direction for Improvement	Current Month	Previous Month	Change in Performance
In Development	↑	90.8%	90.7%	Improving
Statistical Neighbour Mean	England Mean	RAG Rating		
82.4%	84.7%	In Development		

## Indicator Description

We want people to be supported in a community setting whenever that is best for them. Community settings include sheltered housing and extra care housing. Residential and nursing homes are the right choice for those with the most complex needs but good performance on this indicator should reflect partnership working with housing to provide alternatives for housing with support. Using an indicator that splits ages helps monitor equity between client groups.

Calculation:

$(X/Y) \times 100$

Where:

X = Total number of people accessing long-term support in the community aged 18-64

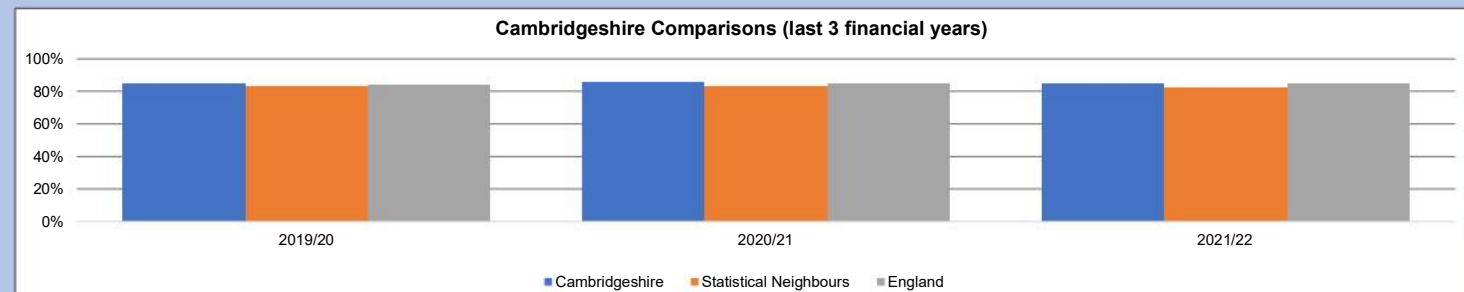
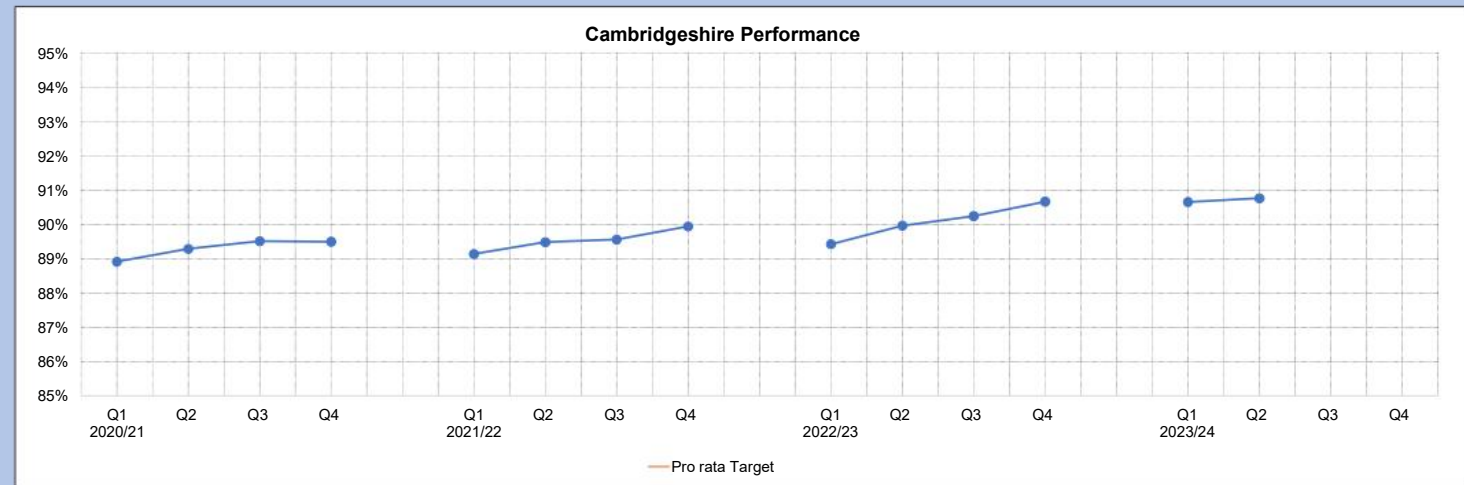
Y = Total number of people accessing long-term support aged 18-64

## Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



## Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

The percentage of clients accessing long term support in the community aged 18-64 has remained relatively static over the last 12 months but increased slightly to 90.77% in Q2 2022/23. The overall number of community-based clients has also increased, from 2243 in Q2 2022/23 to 2360 in Q2 2023/24. Increasing need for long term services in general and community clients specifically has been experienced throughout the last year for 18-64 clients.

## Actions

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards

## Indicator 235: % total people accessing long term support in the community aged 65 and over

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December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	61.9%	60.7%	Improving
Statistical Neighbour Mean	England Mean	RAG rating		
59.3%	62.4%	In Development		

## Indicator Description

We want people to be supported in a community setting whenever that is best for them. Community settings include sheltered housing and extra care housing. Residential and nursing homes are the right choice for those with the most complex needs but good performance on this indicator should reflect partnership working with housing to provide alternatives for housing with support. Using an indicator that splits ages helps monitor equity between client groups.

Calculation:

$(X/Y) \times 100$

Where:

X = Total number of people accessing long-term support in the community aged 65 and over

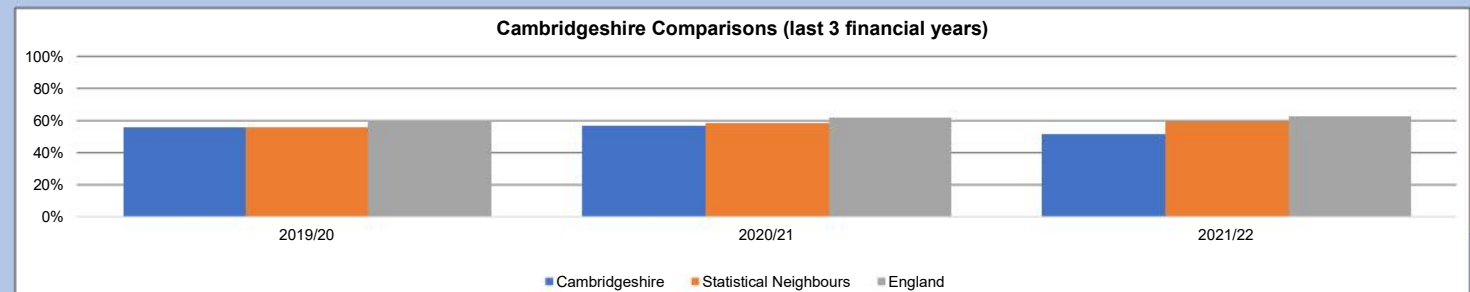
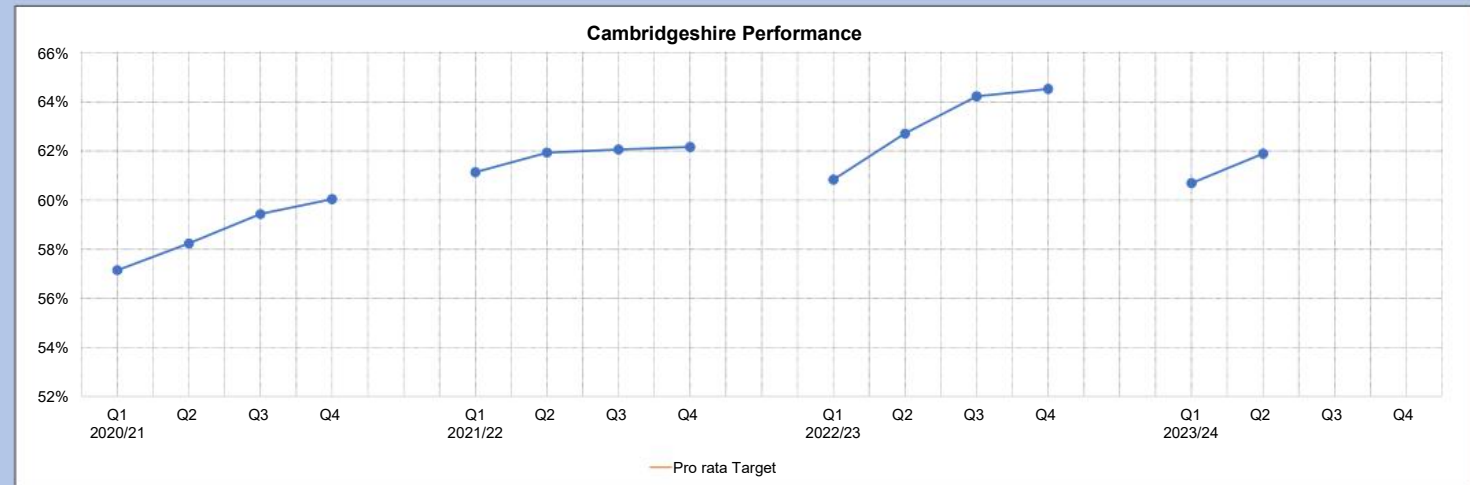
Y = Total number of people accessing long-term support aged 65 and over

## Useful Links

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)



## Commentary

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

The percentage of clients aged 65+ accessing long term support in the community had increased during 2022/23 but has now dropped to a comparable rate with last year (62% in Q2 2022/23, 61% in Q2 2023/24). The number of clients receiving long term support and support in the community specifically have both increased marginally in the last 12 months.

## Actions

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards

**Indicator 236: Percentage of Cases where Making Safeguarding Personal (MSP) questions have been asked**[Return to Index](#)

December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	96.0%	96.4%	Declining
Statistical Neighbour Mean	England Mean	RAG Rating		
81.6%	79.7%	In Development		

**Indicator Description**

It is important when undertaking a safeguarding enquiry that the person to whom it relates is engaged and is able to say what they want as an outcome, where they have capacity to do so. This indicator monitors how well we are involving people in this way.

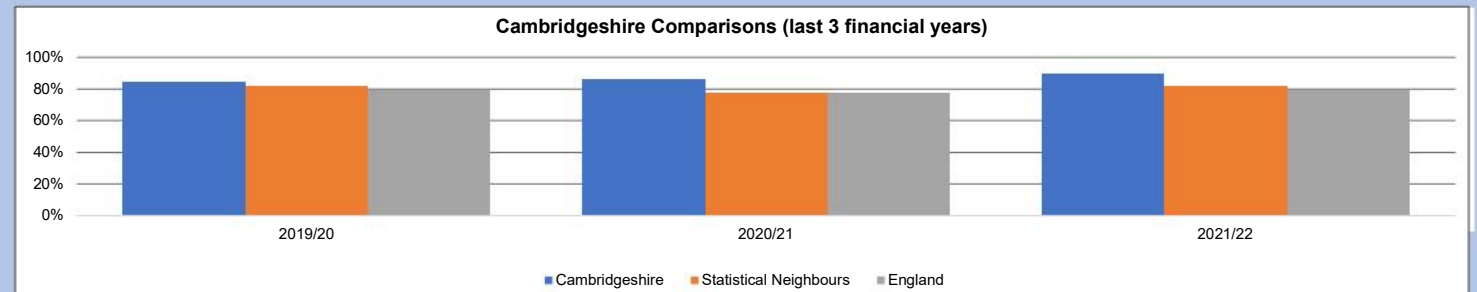
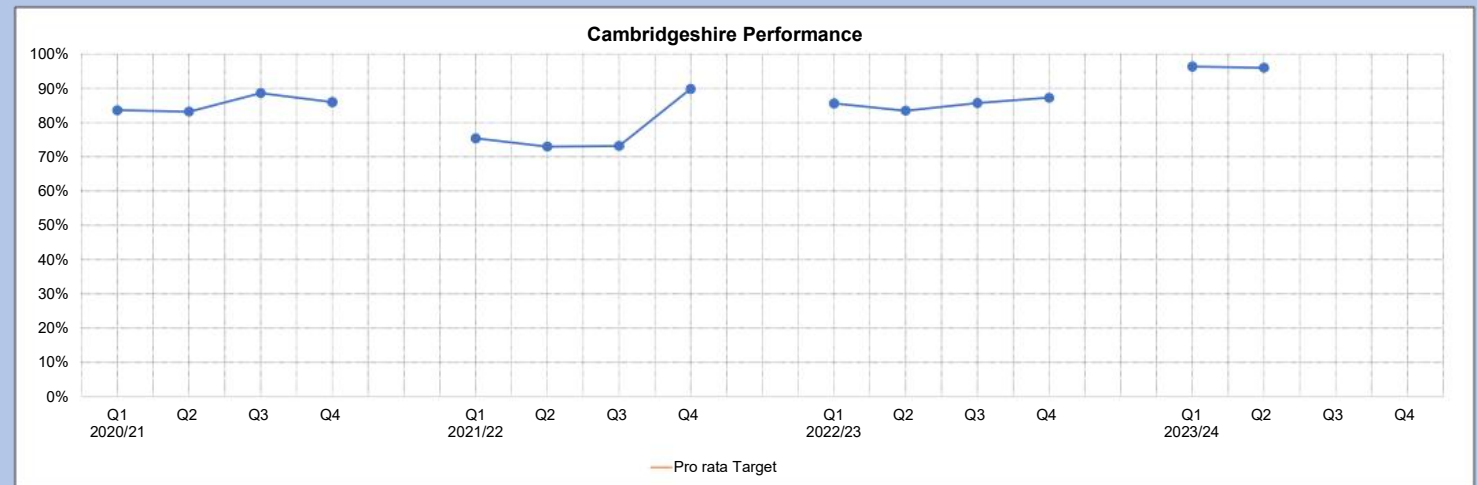
Calculation:

$$(X/Y)*100$$

Where:

X = The number of concluded enquiries where the adult or adult's representative was asked what their desired outcomes were

Y = The number of concluded enquiries

**Commentary**

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

Performance in this area continues to be high and comparable with national and statistical neighbour averages (96% in Q2 of 2023-24)

We continue to have reporting gaps for safeguarding. New dashboards are currently in development meaning not all the data needed to inform these indicators is available for routine use by staff. However, current performance suggests that the Making Safeguarding Personal agenda is fully imbedded in the safeguarding process.

**Useful Links**

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)

**Actions**

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards

**Indicator 229: Percentages of safeguarding enquiries where risk has been reduced or removed**[Return to Index](#)

December 2023

Target	Direction for Improvement	Current Quarter	Previous Quarter	Change in Performance
In Development	↑	88.5%	91.7%	Declining
Statistical Neighbour Mean	England Mean	RAG Rating		
92.0%	91.2%	In Development		

**Indicator Description**

This indicator tracks the effectiveness of safeguarding enquiries in reducing or removing risk. It should be viewed alongside indicators 236 and 105, which reflect the desired outcomes of the person at risk. This is to ensure that there is not a perverse incentive to go against the person's wishes and eliminate risk when that person has capacity to decide on a level of risk that is acceptable to them.

Calculation:

$(X/Y) \times 100$

Where:

X = The number of enquiries where the risk had been reduced or removed when the enquiry concluded

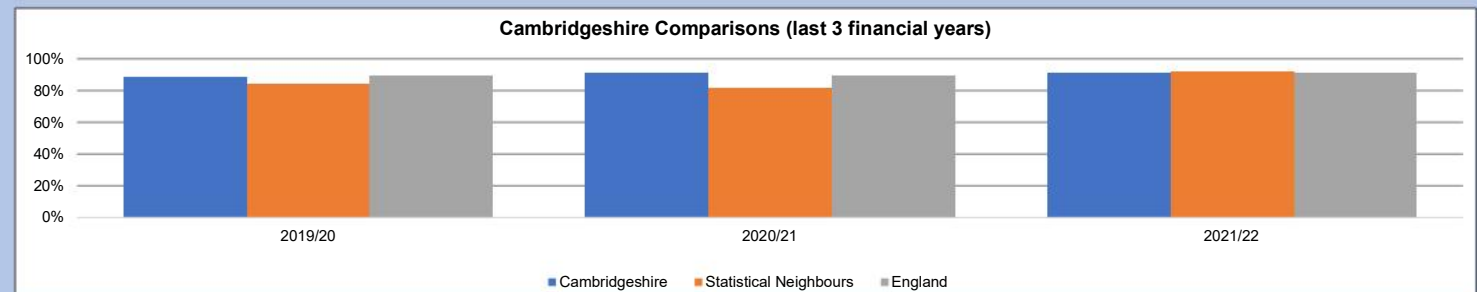
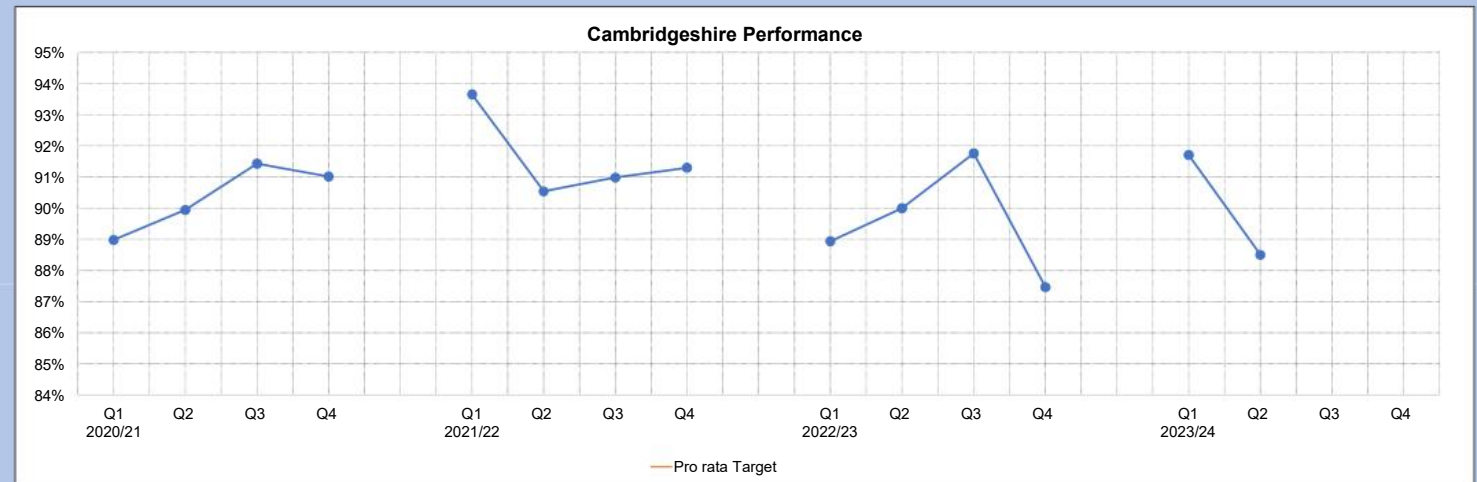
Y = The number of concluded enquiries where a risk was identified

**Useful Links**

[Measures from the Adult Social Care Outcomes Framework from NHS Digital](#)

[The local area benchmarking tool from the Local Government Association](#)

[The Adult Social Care Outcomes Framework 2018/19 Handbook of Definitions:](#)

**Commentary**

Please note, Q4 data for Cambridgeshire is only provisional and will be updated to reflect statutory returns once published. Annual comparisons with statistical neighbours and England will also be available further to the national publication of statutory data for 2022/23.

We have been consistent in our approach and have been managing risk well and in over 88% of safeguarding cases risk is removed or reduced. Safeguarding pathways are being revisited to increase the number of S42's to give further considerations to risks.

**Actions**

Data contained in this report will be used to inform a target setting process and targets will be reported from Q4 onwards