

Corporate Performance Report

To: Adults and Health Committee

Meeting Date: 5 March 2026

From: Executive Director for Adults, Health and Commissioning

Electoral division(s): All

Key decision: No

Forward Plan ref: Not applicable

Executive Summary: This report provides an update to the committee on the performance monitoring information for Quarter 3 of 2025/26, 1 October to 31 December 2025.

Recommendation: The committee is asked to scrutinise and comment on the performance information presented.

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1. A healthy, fair and sustainable Cambridgeshire

1.1 This report analyses the strategic key performance indicators (SKPIs) which directly link to the following of the Council's ambitions and priorities:

- Ensure fairness and opportunity wherever we can:
 - The best start in life for children and young people: Work with partners to provide a safe and healthy environment for children and young people to live, learn and develop strong mental health from their earliest moments through their school years.
 - Jobs for the future: Work alongside other providers to ensure people have the right skills and opportunities to build successful working lives, including those with care experience, learning disabilities and mental health conditions

- Enable full, healthy lives for all:
 - Eating well: Work with partners on targeted interventions that help provide enough good food for every home, aiming to have no family hungry or under-nourished.
 - Stronger ties: Support people to build strong connections with their families, communities and the natural environment to combat loneliness and improve mental and physical health
 - Active living: Create more safe cycling and walking routes and work with partners and communities to promote accessible ways to get active
 - Independent living: Provide social care that supports adults and unpaid carers to live safely in the way they choose and prevents the need for more intensive support and care where possible.

Due to the complex nature of SKPIs, some indicators may also impact other ambitions.

2. Background

- 2.1 The Performance Management Framework builds a clear performance process, linking individual services' performance all the way through to strategic decision-making, supporting the Council to embed performance at the heart of everything it does.
- 2.2 The Performance Management Framework sets out that Policy and Service Committees should:
- Set outcomes and strategy in the areas they oversee.
 - Track progress quarterly.
 - Consider whether performance is at an acceptable level. Request further information on different SKPIs each quarter to effectively assess performance.
 - Seek to understand the reasons behind the level of performance and identify remedial action.
- 2.3 This report, delivered quarterly, continues to support the committee with its performance management role. It provides an update on the status of the selected Adult Social Care & Public Health SKPIs and tracks the performance of the services the committee oversees.

- 2.4 These indicators enable members of this committee to have the best overview of performance in line with our strategic ambitions. These indicators will, where possible, be benchmarked against national and regional performance and set appropriate targets to allow fair scrutiny.
- 2.5 From quarter 1 2025/26 onwards, quarterly corporate performance reports submitted to Policy and Service Committees will be presented in the format of a scorecard. This will support the delivery of a transparent view of performance and will enable each committees' scorecards to be brought together into a holistic scorecard for the organisation for consideration by the Strategy, Resources and Performance committee. Each Policy and Service Committee scorecard will continue to have an appendix providing further detail for each SKPI.
- 2.6 The report covers the period of quarter 3 2025/26, up to the end of December.
- 2.7 The most recent data for indicators for this committee can be found in the dashboard at Appendix 1. The dashboard includes the following information for each SKPI:
- Current and previous performance and the projected linear trend.
 - Current and previous targets. Please note that not all SKPIs have targets, this may be because they are being developed, or the indicator is being monitored for context.
 - Red / Amber / Green (RAG) status.
 - Direction for improvement to show whether an increase or decrease is good.
 - Change in performance which shows whether performance is improving (up) or deteriorating (down).
 - The performance of our statistical neighbours. This is only available, and therefore included, where there is a standard national definition of the indicator.
 - SKPI description.
 - Commentary on the KPI and path to green.
- 2.8 The following RAG criteria are being used:
- Red – current performance is 10% or more from target.
 - Amber – current performance is off target by less than 10%.
 - Green – current performance is on target or better.
 - Baseline – indicates performance is currently being tracked in order to inform the target setting process.
 - Contextual – these KPIs track key activity being undertaken, to present a rounded view of information relevant to the service area, without a performance target.
 - In development - KPI has been agreed, but data collection and target setting are in development.

3. Main Issues

- 3.1 Current performance of available indicators monitored by the Committee is as follows:

Status	Number of KPIs	Percentage of KPIs*
Red	6	26%
Amber	6	30%
Green	9	35%

Baseline	-	-
Contextual	1	4%
In Development	1	4%

**Figures may not add to 100 due to rounding.*

3.2 There is one indicator that is currently in development and will be added to the dashboard when finalised:

- Indicator 014, Percentage of children in 20% most deprived areas achieving a good level of development at age 2-2 ½ years.

There will be an updated data set to finalise this indicator; Officers are confident of completing the update for this indicator for the next iteration of this quarterly performance report.

3.3 There is 1 indicator which is identified as contextual, Indicator AHC 002: Number of new client contacts per 100,000 of the population.

Local contacts remain higher than both statistical neighbours and national comparisons. Work is underway to improve the Adult Social Care information and advice offer to ensure that people are able to find relevant support easily. There is also a programme of work underway to improve the Customer Experience for people contacting the Council.

4. Summary of Performance

4.1 An overview of the current performance for Adult Social Care Services (Indicators AHC 001-AHC 013) monitored by the Committee is as follows:

- Results for the 24/25 Adult Social Care survey were published in December 2025 with the Social Care Quality of Life score for Cambridgeshire reducing from 19.3 to 19.1. This is in line with a reduction seen across both Peer Neighbours (19.05) and England (19) comparators. Cambridgeshire is ranked 65 out of 153 Councils where a lower rank is better. (AHC001)
- New contacts for Adult Social Care remain high per 100,000 of population but the conversion rate to people requiring formal care and support continues to remain low indicating an effective prevention, information, and advice offer. (AHC002)
- There continues to be strong performance within delivery of short-term services which are maximising independence for people contacting the Council for support (this includes reablement, occupational therapy and technology enabled care services). Using the benchmarking figures for 2023/24, Cambridgeshire compares favourably with its statistical neighbours and England overall. (AHC003)
- An increasing number of adults aged 18-64 require their needs to be met within a residential or nursing setting but the proportion of people supported within the community remains above target. Although the number of adults requiring residential

or nursing care is below target the current position is an improvement from last year and reflects a very small number of individuals. National and regional work around this cohort is being used to support an analysis of the long-term needs and commissioning implications for this cohort. (AHC004 and AHC006)

- A large proportion of adults aged 65+ are having their long-term support needs met in their own home or another community setting with less people needing admission to residential and nursing care homes. Cambridgeshire compares favourably with its statistical neighbours and England overall with significantly less people requiring an admission to a residential or nursing setting to meet their needs. There is a focus on ensuring that there are appropriate community options for people aged 65+ including expanding extra care provision and other community support options such as Community Micro Enterprises. (AHC005 and AHC007)
- The number of people who have not received a review of their long-term care and support needs within the last 12 months remains at a lower level than statistical or national comparators. ASCOF ratings for 24/25 were published at the end of December and will enable us to update our benchmarking information. Digital tools are currently being rolled out to 3 community teams with the aim of increasing efficiency and will be monitored in the coming months to measure any improvement to the completion of planned reviews. (AHC008)
- Safeguarding continues to be an effective area of practice with performance in line with national and statistical neighbour averages for reducing or removing risk, however this indicator has been declining over recent months, and further work is being carried out by the Practice Standards and Quality team to review this. (AHC009)
- The number of Carer Conversations carried out remains above target although the rate of carers assessed or reviewed per 100,000 population remains at a low level when compared to regional and national comparators due to Cambridgeshire's local approach to support for Unpaid Carers. (AHC010 and AHC011)
- The number of people receiving a Direct Payment continues to make incremental improvements with a small increase compared to the previous quarter. Dedicated work is underway to improve this area of performance with a range of initiatives. (AHC012)
- The percentage of Care Homes rated Good or Outstanding by CQC remains above the target of 80% and unchanged at 81.2% for Quarter 3. This includes all care homes in Cambridgeshire and not just those which are commissioned by the Council. (AHC013)

4.2 An overview of the current performance for Public Health (Indicators AHC015 – AHC023) monitored by the Committee is as follows:

Please note data updates were only available for four Public Health indicators this quarter.

- A&H 015: Percentage of children with free school meal status achieving a good level of development at the end of Reception in Cambridgeshire.

Annual data for 2024/25 shows the percentage of children eligible for Free School meals achieving a good level of development at age 5 has increased by 5.5% from last year, a quicker rate of increase than the overall improvement for England. However, this is still 5% lower than the national rate for this cohort.

In year improvements have been supported by improved capacity within the health Visiting service that has enabled earlier intervention and targeted support for more families. Our Early Years service has put in place a number of targeted interventions to support schools and settings with high numbers of children in receipt of free school meals including updating assessment guidance focusing on inclusion, transition support between Early years settings and primary schools, and an enhanced training offer.

- A&H 016: The proportion of children aged 10 to 11 years classified as living with obesity in the 20% most deprived areas in Cambridgeshire.

The aggregated data from 2020/2021 to 2024/25 shows that 28% of children in school year 6 and living in the 20% most deprived areas were obese. In comparison to other areas in Cambridgeshire where the average was 17.3%.

There are a number of ongoing and planned interventions tackling obesity and many are targeting areas of greater deprivation. Unhealthy weight needs to be addressed from birth, Health Visiting and Early Years services identify high risk families often in deprived areas and provide information and support. There are school based activities that are provided by the Healthy Schools Service across all areas. Over the past two years schools have secured seed funding and have initiated and maintained a range of programmes. This has recently been evaluated for impact, and we are reviewing next steps. Children who are identified in the annual National Child Measurement Programme are proactively followed up by the Programme and the data enables targeted activities with families. Public Health also commissions an Integrated Child Weight Service that offers three levels of service - prevention, weight management, and intensive weight management for more complex cases.

- A&H 017: The percentage of births that receive a New Birth Visit by a Health Visitor within 14 days. This is a mandated check carried out by Health Visitors as part of the Healthy Child Programme

In quarter 3 the percentage of visits carried out within 14 days was sustained at 94%. The local stretch target of 95% was almost met at 94% and the national target of 83% was exceeded. This is 6% better than this same period last year. 97% of babies had their checks completed within a few days of the fourteen-day target. Line managers are currently working hard to put in processes to deliver first visits within ten days which would allow revisits within the time period.

- A&H 018: The percentage of smoking cessation service users who quit as part of a structured quit attempt.

During quarter 2, 760 service users set a quit date as part of a structured quit attempt, 50% (381) of those setting a quit date quit smoking for at least 4 weeks.

Stop smoking support was delivered through GP practices, the Healthy You Behaviour Change Service, the Allen Carr group-based programme, the Smokefree App and the Ferry Project in Wisbech. The respective quit rates within each setting were GP Practices (50%), Healthy You (46%), Allen Carr (60%), Smokefree App (49%) and Ferry Project (63%). The GP practice and Allen Carr quit rates both increased during quarter 2 compared to quarter 1 which has meant the overall target was achieved during quarter 2.

- A&H 019: Achievement against the target for completed NHS Health Checks. The NHS Health Check Programme aims to identify the risks and prevent cardiovascular disease and other conditions. Targeted at 40–74-year-olds without a diagnosed condition it checks for risks associated with cardiovascular disease every 5 years and provides advice and support. In quarter 3 the Programme achieved 60% of the eligible population completing a health check in the five year period against the new annual target of 67.5%.

The eligible population has also grown by 0.75% since last year.

Performance in quarter three was also affected by system factors. The Healthy You Behaviour Change Service transitioned to a new provider on 1 December 2025, which led to a temporary drop in activity while one contractor exited and the new provider mobilised. In addition, GP delivery is likely to have been impacted by a significant flu season during the quarter, which diverted clinical capacity.

Despite these pressures, the current result remains close to the target.

- A&H 020: Emergency hospital admissions due to falls in people over 65 and 100,000 population.

Falls are the largest cause of emergency hospital admissions and the need for long term care amongst older people. In 2023/24 quarter 2 continued the upward trend in the rate of falls with 2050 per 100,000 against the national rate of 1984 per 100,000. A review of local falls prevention services has informed plans to refresh the system-wide Falls Prevention Strategy. Public Health is recommissioning services across all three tiers:

- **Tier 1** (strength and balance) will launch a new service in July 2026.
- **Tier 2** (FaME) has been recommissioned but now requires additional primary care input due to new NICE guidance.
- **Tier 3** continues to be provided by CPFT for high-risk frailty patients.

Rising demand, funding pressures, and the absence of a unified strategy are key challenges. Public Health is exploring ways to manage demand—such as increasing virtual self-assessments and supporting long-term self-management—and preparing business cases for additional grant funding. Work with Place Board leads and the Local Medical Committee is underway to develop a new strategy over the next 3–6 months once organisational changes have stabilised.

- A&H 021: Sexual Health, late diagnosis in people first diagnosed with HIV in the UK. Late diagnosis of HIV is the most important predictor of morbidity and mortality among those with a HIV infection. Early diagnosis and treatment can mean a life expectancy comparable to those not infected with HIV. In 2022/24 the numbers of those diagnosed late was low but the proportion is higher at 49% than the national figure of 43.3%.

In April 2025 Cambridgeshire County Council Public Health commissioned a sexual ill health prevention service. This will increase opportunistic testing both by physically testing and by providing information and resources to health professionals and by supporting people to adopt safe sexual practices. Other parts of the service will support peer groups to develop a sense of community and shared experience.

Currently the Sexual and Reproductive Health Strategy is in development which will further develop interventions and a focus on securing support throughout the system.

- A&H 022: Behaviour Change Service: percentage achievement against target for adult referrals to the Service from the 20% most deprived wards.

In quarter 2 the target of 30% was achieved. To increase and maintain the number of referrals from deprived areas the Behaviour Change Service continues to undertake engagement work in deprived areas by attending additional events and working more closely with partners who refer into the service.

- A&H 023: Proportion of those in drug and alcohol treatment services who are making substantial progress. (Complete treatment, are drug free or have sustained reduction in drug use.)

Data is available up until quarter 1 2025/26 as there are restrictions over the release of this data which is collected nationally. However, commissioners do have access to more recent data. The Service performance figure is 47.62%, above the national average of 46.38%.

Commissioners work closely with the Provider to ensure that this performance is maintained and remains on track during the recommissioning of the new Service which will commence on 1 April 2026.

5. Conclusion and recommendations

5.1 3.1 shows the breakdown of RAG status for this committee's indicator set. Of the seventeen indicators updated this quarter that monitor change in performance, nine indicators saw an improvement in performance.

- A&H 003: Requests from new clients where the outcome was short term support to maximise independence per 100,000 population. This indicator retains Green RAG status.

- A&H 004: Long term support needs of adults (18-64) met by admission to residential and nursing care homes per 100,000 population (YTD). This indicator remains RAG rated as Red, but performance is improving when compared to the same period last year.
- A&H 005: Long term support needs of adults (65+) met by admission to residential and nursing care homes per 100,000 population (YTD). This indicator remains Green.
- A&H 006: Total people accessing long term support in the community aged 18-64, per 100,000 population (YTD). This indicator retains Green RAG status.
- A&H 011: Carers Conversations carried out (monthly average). This indicator retains Green RAG status.
- A&H 012: Proportion of people using social care who receive direct payments as part of self-directed support. This indicator remains RAG rated as Red.
- A&H 015: Percentage of children with free school meal status achieving a good level of development at the end of Reception in Cambridgeshire - This indicator remains RAG rated as Red, but performance is improving.

5.2 Of the seventeen indicators updated this quarter that monitor change in performance, 7 indicators saw a decline in performance.

- A&H 001: Social care quality of life score. This indicator remains RAG rated as Amber, but performance has declined slightly.
- A&H 007: Total people accessing long term support in the community aged 65+, per 100,000 population (YTD). This indicator remains RAG rated as Amber.
- A&H 008: Percentage of people in receipt of long-term support for more than 12 months that have received a review in the last 12 months. This indicator remains RAG rated as Red.
- A&H 009: Percentages of safeguarding enquiries where risk has been reduced or removed. This indicator remains RAG rated as Amber.
- A&H 010: Number of carers assessed or reviewed in the year per 100,000 of the population. This indicator has remained RAG rated as Green, however has seen a decline in performance when compared to the same period last year.

5.3 Of the seventeen indicators updated this quarter that monitor change in performance, four indicators saw no change in performance.

- A&H 013: Percentage of Cambridgeshire Care Homes rated good or outstanding by CQC (ASCOF 6B). This indicator remains Green.
- A&H 017: Percentage of births that receive a New Birth Visit by a Health Visitor within 14 days. This indicator is Amber and remains unchanged since Q2.

- A&H 018: The percentage of smoking cessation service users who quit for at least 4 weeks as part of a structured quit attempt. This indicator remains Amber.
- A&H 019: Achievement against target for completed NHS Health Checks - This indicator remains RAG rated as Red and performance is unchanged since last quarter.

5.4 This Performance report is a monitoring paper. There are no recommendations for this quarter.

6. Significant Implications

6.1 Finance Implications

Whilst there are no direct financial implications, poor performance can have an impact on the Council's finances. This is why it is important to consider the relationship between the SKPIs and financial performance.

6.2 Legal Implications

Performance of some indicators is linked to statutory duties. Tracking performance is therefore important as not meeting statutory requirements could have legal consequences for the Council.

6.3 Risk Implications

This report provides the latest performance information for this committee. The SKPI's performance should be scrutinised with a consideration towards to how improving or declining performance may impact risk.

6.4 Equality and Diversity Implications

The individual policies that relate to activity represented by these SKPIs will be underpinned by consideration of the outcome of Equality Impact Assessments.

6.5 Climate Change and Environment Implications

Where relevant the individual areas of activity represented by these SKPIs will be supported by an Environmental Impact Assessment.

7. Source Documents

7.1 None.