Annex A – Performance – Quarter 1 2025-26

SCORECARD: Quarter 1 2025-26 April-June

Direction of travel since previous reporting period	Description
₩	Performance has decreased since previous reporting period
\leftrightarrow	Performance and position maintained since previous reporting period
^	Performance has increased since previous reporting period
N/A	No previous position due to no previous data
Monitoring only	Measure has no target, and we are monitoring its performance for information purposes. E.g. To establish a target at a later date or to provide context.

Linked Items	Unit	Trend	ı	Period Performan	ice			
			Target	Actual	Indicator	Target	Actual	Indicator
OCC01.03 Total % of household waste which is reused, recycled or composted	%	Ψ	61.50	55.48	RED	61.50	55.48	RED

Comments: Continuing performance trend from last year. Overall likely to remain around this level during all of 2025/26, though a possible implementation of a food waste campaign in the autumn could help for the latter part of the year.

Oxfordshire residents consistently exceed the national average (44% 2023/24) for household waste recycling. In November 2024, the Central government made announcements around Simpler Recycling and Extended Producer Responsibility. It is anticipated that the implementation of national waste policy reforms expected in the next few years will improve performance. Figure reported one month in arrears.

OCC02.01 Digital Inclusion through libraries (number of hours of use of library public computers) #	6,000.00 7,031.00	GREEN 6,000.00	7,031.00	GREEN
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Comments: This figure remains above target as we progress the roll out of replacement PN devices on Chrome across all 44 sites (target completion by October). As of 30 June, 11 libraries

have been moved over to the new system and hard	ware.							
OCC02.03 Number of physical visits to Libraries	#	Ψ	130,000.00	157,338.00	GREEN	130,000.00	157,338.00	GREEN
Comments: The number of physical visits to librari activities (including school visits) that library staff o		ell above target an	d came in at just c	over 2 million for 20	024/25. This cont	inuing success is pa	rtly a result of the l	nigh number of
OCC03.01 Proportion of opiate users in treatment who are making substantial progress to being drug-free or have sustained reduction in drug use	%	•	48.00	49.00	GREEN	48.00	49.00	GREEN
Comments: Period 2024/25-Quarter 4								
This performance is above the national average of 4 high-quality community treatment that is flexible, hin line with the local and national drug strategy and	olistic and pe	erson-centred, and	supports people t	to reduce their drug	g use. This meast			
OCC03.06% of births that have received a face- to-face New Birth Visit, by the age of 12 months old	%	N/A	82.00	81.70	AMBER	82.00	81.70	AMBER
Comments: New measure for 2025/26 Quarterly r Reporting period 2024/25-Quarter 4	eporting patte	ern.						

Reporting period 2024/25-Quarter 4

This measure is reported on the basis of a quarter in arrears.

% of births that have received a face-to-face New Birth Visit. This universal review is offered to all children as they approach their first birthday. In the quarter the service completed 1427 reviews. Due to family commitments and parents working, families may choose to have their review after the child's first birthday up until 15 months. If a family declines or does not attend an appointment the service follows them up to offer another review and this may then be outside of the 12-month timescale. In this quarter 1625 babies or 89.7% have received a review by 15 months.

During Quarter 4 of the 2024/25 financial year, 81.7% of children (1,427 out of 1,746) were reviewed by health visitors as they turned 12 months old. This rate increased to 89.7% by 15 months of age, slightly below the target by 0.3 percentage points (6 children). Actions such as a text reminder service and additional staff have been implemented to improve timel iness. Oxfordshire's 12-month review rate (89.7%) by 15 months of age remains above the national average of 86.5%.

OCCO3.08 Average response time for attendance at an emergency incident in Oxfordshire by a fire service vehicle	#	•	563.00	565.00	AMBER	563.00	565.00	AMBER
Comments: Quarterly reporting period. 9 minuaimed for 10 min and 14 min, 80% and 95% of the disproportionate reduction of calls near wholeting period, three significant changes to out wholetime crew moving to cover the Bicester and difference in response times between the two a overall response times, attending remote incideres ponse time towards this national level. During seconds. Oxfordshire Fire and Rescue Service (Ominutes (540 seconds).	he time. The new ime resources, me ur normal operation oxford Coreas is explained ents in more ruraling Quarter 1, the a	metric is challenge aning an average ng model have oc city for 6 weeks du by the fact that wareas clearly resuaccumulated response	ging to achieve due calculation of the curred with three for the Bicester Mailstour wholetime alts in a negative impose time was 9 mi	to a variety of fac response times ac re stations workin lajor Incident on t e crews attend a la pact. Work contir nutes and 25 seco	tors: the reduction ross the county rangfrom their bushe 15th May, where remarks with the intends (565 second	on in Automatic Fire to longer benefits for iness continuity loc ich has a slightly ne ncidents within the rim response mode s) slightly below the	e Alarms (AFA) has rom these times. D cation due to build egative effect in bo city, resulting in a el which aims to try e target of 9 minut	resulted in a furing this ing works, and a th areas. The positive impact and improve or es and 23 (563)
OCC03.10 Number of accidental fires in people's homes per 100,000 population	#	•	8.73	7.20	GREEN	8.73	7.20	GREEN
Comments : From Quarter 4 2024/25 performa	nce has declined	from 5.56% to 7.2	 % in Quarter 1 202	5/26. Q1 actual is	s below both targe	et and the national	average, based on	10 years of dat
OCC04.01% of people who received short- term services during 25/26 with no further support request	%	•	79.40	74.20	RED	79.40	74.20	RED
Comments: Monthly reporting period. To impro	•	•	• • •			rs and this is now bely with system part	_	•

OCC04.02 % of residents 18-64 with Learning Disability support who live on their own or with family (Monitoring only)	%		89.25		89.25	
Comments: This measure is monitoring only, theref	ore no trend information is ava	ailable				
OCC04.03 % Section 42 safeguarding enquiries where identified risk was reduced or removed	%	93.00	93.00 GREEN	93.00	93.00	GREEN
Comments: Monthly reporting period. Although period average which is 91%. Risk cannot be removed in all		•		as remained consist	ently high, and abo	ve the national
OCC04.04 Adults aged 65+ (per 100,000) admitted to residential and care homes	#	0.00	527.83	0.00	527.83	
Comments: Missing target and variance. The service	e area is continuing to develop	the performance mo	etric.			
OCC04.05 Number of carers assessments completed (Monitoring only)	#		224.00		224.00	
Comments This measure is monitoring only, therefo 635 assessments during Quarter 1	re no trend information is avai	lable. Monthly repo	rting period. April 209 assessmer	its, May 202 assessi	ments, June 224 ass	essments total
OCC04.06 % of young people referred who have an ASC assessment in place by their 18th birthday	N/A %	90.00	GREEN 93.00	90.00	93.00	GREEN
Comments : Quarterly reporting period. Continue to	achieve this target despite sor	me challenges in rel	ation to staffing and complexity o	case work.		
OCC04.07 The number of people supported into employment (Monitoring only)	#		11.00		11.00	

CC05.03 KM of footway / cycleway naintenance undertaken	km	\leftrightarrow	0.00	6.47	GREEN	0.00	6.47	GREEN
omments: Quarterly reporting pattern. The servi potway maintenance was delivered in Q1, contrib		•		•	of the reporting y	ear, hence the targ	get of 0 Km. A total	of 6.47 km of
OCC05.07 Percentage of gullies cleaned against ne annual cyclical gully programme	%	N/A	100.00	69.00	RED	100.00	69.00	RED
omments: Quarterly reporting period. The progr , this was 69% of our pro-rata target of 31,231. V earend target will be met.	•	_				•	-	
OCCO5.08 Highways - Number of non- hargeable defects (NCD) identified (works not ompleted as instructed or failed due to orkmanship)	#	\leftrightarrow	25.00	34.00	AMBER	75.00	102.00	AMBER
omments: Monthly reporting pattern. 4 NCDs recorded in June but note a potential furt	her 170 identif	ied as part of a q	uality assurance dr	ive by the team bu	ıt not yet recorded	l (will be captur ed	next month)	
ouring Quarter 1, a total of 102 non-chargeable de he Service is actively working to ensure contracts nd challenge the quality of work delivered. A step	are being deliv	ered according to	o specifica tions. Be	tween April and M	lay, a dedicated re	source was appoi		tract completi
CC05.09 Length of roads identified as in need frepair, restored to a good condition	km	^	14.70	15.50	GREEN	14.70	15.50	GREEN

OCC05.11% of the projected 1,400 tonnes of arbon savings achieved in the delivery of the highways service through the use of lowarbon techniques and materials	N/A %	100.00	99.00	AMBER	100.00	99.00	AMBER
Comments: Quarterly reporting pattern. Carbon Savings of 1400 Tonnes total end of year to The service has achieved 99% of the quarters savi		ed upon 2025/26 prog	ramme outturn, dete	ermined prio	r to the 2025-26 p	programme being is	sued.
OCC06.03 Volunteer hours on the public right of way (PRoW) network through established croups	#	1,750.00	1,738.00	AMBER	1,750.00	1,738.00	AMBER
Comments: Quarterly reporting pattern.							
OCC07.01% of Education Health & Care Plans ompleted within 20 weeks (excluding exceptions) (Monitoring only)	%		46.00			46.00	
Comments: Monthly reporting pattern. This meas	ure is monitoring only.						
OCC07.03 Percentage of children we care for iving in county/within 20 miles	%	75.00	59.00		75.00	59.00	

OCC07.04 Number of referrals to children's social care (Monitoring only)	#		588.00		588.00
Comments: Monthly reporting pattern. Monitoring	only			1	
OCC07.05 Percentage of referrals to children's social care which are within 12 months of a previous referral	%	22.00	33.00	22.00	33.00
Comments: Monthly reporting pattern. The service	area is continuing to develop t	he variance for this	metric.		
OCC07.06 Number of Oxfordshire children we care for (excludes unaccompanied asylumseeking children) (Monitoring only)	#		716.00		716.00
Comments: Monthly reporting pattern. This measur	e is monitoring only.				
OCC07.07 Percentage of children we care for living with foster carers, friends or family	%	66.00	69.00	66.00	69.00
Comments: Monthly reporting pattern. This measur	e is monitoring only.				
OCC07.08 Percentage of children with an education, health and care plan (EHCP) supported in mainstream education	%	0.00	0.00	0.00	0.00
Comments: Monthly reporting pattern. The service	area is continuing to develop tl	ne target for this me	etric.	1	
OCC07.09 Percentage attendance of pupils in primary, secondary and special schools	%	0.00	92.90	0.00	92.90

Comments: Monthly reporting pattern. The servic Terms 1-5 as with last month's reporting	e area is continuing to develop	this metric.					
OCC07.10 Rate of permanent exclusions (cumulative through academic year)	#	0.00	0.03		0.00	0.03	
Comments: Monthly reporting pattern. The servic Terms 1-5 as with last month's reporting	e area is continuing to this met	ric.					
OCC07.11 Percentage of young people aged 16-18 who are in education, employment or training	%	0.00	95.08		0.00	94.53	
Comments: Monthly reporting pattern. The service	e area is continuing to develop	this metric.					
OCC07.12 Percentage of 2 to 2½ year reviews using Age and Stages Questionnaire (ASQ-3 third edition of the developmental screening tool)	N/A %	82.00	96.20	GREEN	82.00	96.20	GREEN
Comments : Quarterly reporting pattern. Period 24-Q4							
This indicator is well above target. The Health Visit family are offered advice and support and referred		•		•		·	
OCC09.01 Percentage of businesses that were either compliant when visited or brought into compliance during the period (Trading	N/A %	90.00	72.00	RED	90.00	72.00	RED
Standards)	/0	50.00	72.00		50.00	72.00	

Comments: Quarterly reporting pattern.

This is a new measure and the data collection process was implemented within the quarter, therefore we expect accuracy to be greater from Q2 onwards. Officers are waiting for additional information from several businesses, before more specific advice can be provided to them and their updated compliance status recorded. This will see this performance measure improve. During Quarter 1, processes were implemented to measure the compliance rate of businesses with legal requirements enforced by trading standards. A total of 54 (72%) out of 75 business visited were found to be compliant, or brought into compliance, with legal requirements. At the end of the quarter, 28% of businesses visited were assessed as not compliant with legislation and there are ongoing efforts to bring them into full compliance. The data provided for this quarter is not a full quarter's data, as the process implementation occurred during the quarter. Performance is expected to improve in the next quarter, due to a more complete data set and continuing efforts to support businesses into compliance.

OCC09.02 Percentage of businesses that were either compliant when visited or brought into compliance during the period (Protection)	%	N/A	90.00	100.00	GREEN	90.00	100.00	GREEN
Comments: Quarterly reporting pattern. All businesses inspected during the period were fo fire protection team.	und either to b	e compliant/broa	dly compliant with	n legal requiremer	nts, or brought in to	o compliance via a	advice, support and/	or action by the
OCC09.04 Value of retained Apprenticeship Levy in Oxfordshire measured in £Millions	£							
Comments: The service area is continuing to devel	lop this metric.							
OCC10.06 Adult social care complaints completed outside of timeframe	%	N/A	20.00	9.00	GREEN	20.00	9.00	GREEN
Comments : Quarterly reporting nattern								

Comments: Quarterly reporting pattern.

Of the 26 stage 1 complaints received, 18 closed during the quarter, 17 within timescale and 1 complaint was closed outside of the standard timescale. 8 remain open within timescale

Of the 6 stage 2 complaints received, 4 were closed at the end of the quarter, 3 within timescale and 1 complaint was closed outside of timescale. 2 remain open within timescale.

During Quarter 1, a total of 32 complaints were logged. The standard resolution timescale for Statutory Stage 1 complaints is 15 working days and Statutory Stage 2 is 20 working days.

OCC10.07 Children's Social care complaints completed outside of timeframe	%	N/A	20.00	15.00	GREEN	20.00	15.00	GREEN
Comments : Quarterly reporting pattern. During Quarter 1, a total of 27 complaints were log	ged.		1					
Of the 19 stage 1 complaints received, 12 were clos	sed, 10 within	timeframe and 2 c	complaint were clo	os ed outside of the	e standard times ca	ale. 7 still remain c	pen.	
Of the 5 stage 2 complaints received all remain ope	en and within t	imescale.						
Of the 3 stage 3 complaints received, 1 was closed	within times ca	ale and 2 remain o	pen within times c	ale.				
The standard resolution timescale for Statutory Sta	ge 1 complair	nts is 20 working da	ays, Statutory Stag	e 2 is 65 working o	day and Statutory	Stage 3 is 50 work	ng days.	
OCC10.08 Corporate complaints completed outside of timeframe	%	N/A	20.00	22.50	AMBER	20.00	22.50	AMBER
Comments: Quarterly reporting pattern. During Quarter 1, a total of 135 complaints were lo	gged. The star	ndard resolution ti	mes cale for Stage	1 complaints is 10) worki ng days and	d Stage 2 is 20 wor	king days.	
Of the 109 stage 1 complaints received, 62 were clo	osed within tir	nescale, 18 (22.5%) were closed outs	idethe standard	ti mes cale, 27 rema	ain open within tir	nes cale. 2 are open	outside of
Of the 26 stage 2 complaints received, 6 were close	ed within times	scale, 1 (14.3% co	mplaint was closed	d outside of times o	cale. 19 remain op	en within timescal	e.	
The customer service continues to work with service	es to ensure p	prompt resolution	of the complaints	logged.				
OCC10.09 Number of FOI's completed outside of timescale	%	\leftrightarrow	10.00	0.00	GREEN	10.00	0.00	GREEN
Comments: Quarterly reporting pattern. A total of 451 requests were logged as FOI/EIR duri	ng Q1-2025							
361 requests have been closed during Q1, all within	n the 20 worki	ng days of receivir	ng the initial reque	st. No requests we	ere closedoutside	of timescale.		

90 requests remain open and on-time within 20 working days of receiving the initial requests, with none remaining open outside of timescale. OCC11.01 Overall forecast revenue variance GREEN % 0.00 0.00 (1,100,000.00) (1,100,000.00)across the Council GREEN Comments: N/A OCC11.02 Achievement of planned savings % GREEN 90.00 100.00 90.00 100.00 GREEN Comments: N/A OCC11.03 General balances are forecast to **GREEN** remain at or above the risk assessed level 85.00 117.00 85.00 117.00 GREEN Comments: N/A OCC11.04 Directorates deliver services and GREEN achieve planned performance within agreed GREEN % 1.00 0.20 1.00 0.20 budget Comments: N/A OCC11.05 Total Outturn variation for DSG GREEN 0.00 0.00 0.00 0.00 funded services (schools/early years) GREEN Comments: N/A OCC11.06 Total Outturn variation for DSG RED funded services (high needs) £ 26,700,000.00 44,800,000.00 26,700,000.00 44,800,000.00 RED

Comments:

Services and Debt Recovery Officers.

In January 2025, the budget proposal cabinet paper outlined the initial funding and deficit for 2025/26 High Needs Dedicated Schools grant funding and deficit of £26.7m. Following the 2024/25 outturn position and further assessments, the High Needs Budget for 2025/26 has been revised to an in-year deficit of £42.3m. Based on the latest forecast is expected to overspend that by £2.5m driven by continuing demand outstripping grant funding increases.

OCC11.07 Use of non-DSG revenue grant funding	%	^	95.00	100.00	GREEN	95.00	100.00	GREEN
Comments : N/A								
OCC11.08 % of agreed invoices paid within 30 days	%	Ψ	95.00	95.50	GREEN	95.00	95.50	GREEN
Comments: Performance is 95.50%, surpassing the while purchase orders fell just short at 94.81%.	ne 95% target bu	ut down from Mai	rch 96.28%. Both C	hildren's Social Car	re (96.83%) and	Adult Social Care (9	8.99%) systems exc	eeded targets
OCC11.09 Invoice collection rate - Corporate Debtors	%	•	97.00	97.79	GREEN	97.00	97.79	GREEN
Comments: This measure identifies the percentag was 97.79%, slightly down on performance in the						in voices is sued in N	lovember 2024. The	e collection r

There has been an improvement in the debt requiring impairment, with an additional payment of £293k further reducing the total and bringing it very close to the target for corporate debt.

Debt requiring impairment this month is £0.831m. The top five cases, including two which are in liquidation, account for 59% of the total bad debt and is being actively worked on by Legal

an overall increase in the value of invoices at risk, we are required to top up the impairment balance. Consequently, this figure is tracked through the year.

This further reduction will reflect in the next reporting period.

OCC11.11 Debt requiring impairment - Adult Social Care contribution debtors

£

1

4,300,000.00 4,560,392.99

RED

4,300,000.00

4,560,392.99



Comments: The 2024-25 year-end adults care contribution impairment for bad debt was £4.51m. At the end of this period, it is £4.56m, an increase of £0.05m.

As reported previously, wider economic factors have had a significant effect on means tested social care contribution debt levels, as have delays with the court of protection and related activity. This tracks with other local authorities' experience.

We are revising our approach to overdue debt and bringing together a debt reduction and recovery plan.

OCC11.12 Invoice Collection Rate - Adult Social Care contribution debtors

%



94.00

93.80

RED

94.00

93.80



Comments: In this period, we measured invoices issued in November 2024. The 120-day invoice collection rate was 93.80% for this period, below the new stretch target of 94%.

As a result of an increase in target for 2025/26, the collection rate has for the first time in 12 months fallen below its target by a slight decline in performance by 0.20 percentage points

Linked Items	Unit	Trend	Period Performance			YTD Performance		
			Target	Actual	Indicator	Target	Actual	Indicator
OCC01.01 Reduction in corporate emissions within our "Carbon Neutral by 2030" target	#	\leftrightarrow	240.00	204.00	RED	240.00	204.00	RED

Comments: Annual reporting pattern, April 2024 - March 2025

The emissions under scope of OCC's Carbon Neutrality 2030 target covers four areas i.e., property, highways electrical assets, fleet and staff mileage. Note: This KPI is reported on an annual basis, with a three-month delay due to the time required for data collection (particularly business mileage data).

In 2024/25, the Council reduced its carbon emissions by 204 tonnes of CO2e compared to the previous year. However, this is 36 tonnes below the target of 240 tonnes.

The reason for this is slow paced in delivery of property and fleet decarbonisation programme. This is due to delay in procurement of delivery mechanism for property retrofit works and

volatility in electric vehicle market and changing procurement rules.

Property Decarbonisation: As mitigation, procurement for property has now been finalised and delivery started. However, there is risk that delivery for 2025/26 might creep in to 2026/27 risking underachievement also for 2025/26, due to complicated mechanical a electrical design across some of our bigger building.

Fleet Decarbonisation: The delay in meeting outline target of replacing 99 EVs in 2024/25 was not realised because of reviewing appropriate procurement route related to new procurement act requirements that led to unplanned delays. As a result of this, we have carried forward 14 EVs from 2024/25 The 14 vehicles FM had identified did not make the timeline for the financial year 2024/25 and therefore been carried forward into 2025/26 making the target for this year of 74 electric vehicles.

To improve performance, services are introducing service level KPIs as part of the operational plan delivery for next 2 years and carbon management plan. These will be monitored monthly by the services leading the delivery of decarbonisation work, such as property and fleet services.

OCC02.02 Domestic abuse victims - Number of times refuge bedspaces have been occupied # N/A 39.00 36.00 AMBER 39.00 36.00

Comments: Annual reporting pattern. Reporting period April 2024 - March 2025, data is provided 3 months in arrears.

In total, 36 adults and children have moved into refuge. This does not include those who declined a space. The service is facing challenges, especially with housing larger families due to space constraints and the lack of suitable long-term accommodation in Oxfordshire, which has led to some residents staying beyond their six-month limit and facing eviction.

We're working to resolve these issues. Oxfordshire Domestic Abuse Service is raising them through the Oxfordshire Domestic Abuse Safe Accommodation Strategy and its working group to find better solutions and support.

This is an annual measure with a three-month reporting lag. In 2024/25, refuge bedspaces were occupied 36 times, falling slightly short of the target of 39. Although the decline is minimal, it highlights demand for safe accommodation for domestic abuse victims. The Council continues to seek ways to support residents in need of refuge. Plans are in place to increase the number of spaces available for victims of domestic abuse.

AMBER

4.40

AMBER

4.80

OCC02.04 Female Inequality in life expectancy at Birth # 4.40 4.80

Comments : Annual reporting pattern. Reporting Period 2021-2023

Oxfordshire Inequality in life expectancy at birth for females has increased by 0.2 from the previous year (4.6) and remains higher than levels reported before the pandemic (2018-20 - 4.0).

A total of 14 Community Insight Profiles have now been completed. The final profile for Bicester West is due to be published online by the end of June 2025. All reports are available on the Oxfordshire data hub along with a link to access to the new Interactive Community Insight Profile (ICIP) Dashboard. Grant funding rounds for the initial 10 priority areas and Berinsfield are now complete with grant schemes for Witney Central area, Wood Farm and Bicester West currently in the planning stages. Community Health Development Officers (CHDOs) are in place to cover 13 of the 14 profile areas, and contracts for the CHDOs in the initial 10 priority areas are being extended following an evaluation of their roles.

This is an annual KPI relating to 2021/23 financial years, with a three-month reporting lag. This KPI looks at the average number of additional years a female baby born in the least deprived 20% of areas can expect to live compared to one born in the most deprived 20% has exceeded its target

The target is set at 4.40, while the performance 4.80. This indicates a wider gap in life expectancy than anticipated, sugges ting that life expectancy inequality between the most and least deprived areas have increased beyond the target. While performance indicates an increase, it highlights the need for continued efforts to reduce disparities in health outcomes across the county.

Although inequality increased during the 2021–2023 period, the number of community profiles produced rose by one compared to the 2020–2022 period. The final profile for Bicester West was scheduled to be published online by the end of June 2025.

OCC02.05 Male Inequality in life expectancy at

Birth # 5.80 5.40 GREEN 5.80 5.40 GREEN

Comments: Annual reporting pattern Period (2021-23)

Oxfordshire Inequality in life expectancy at birth for males has increased by 0.2 from the previous year (4.6) and remains higher than levels reported before the pandemic (2018-20 - 4.0).

A total of 14 Community Insight Profiles have now been completed. The final profile for Bicester West is due to be published online by the end of June 2025. All reports are available on the Oxfordshire data hub along with a link to access to the new Interactive Community Insight Profile (ICIP) Dashboard. Grant funding rounds for the initial 10 priority areas and Berinsfield are now complete with grant schemes for Witney Central area, Wood Farm and Bicester West currently in the planning stages. Community Health Development Officers (CHDOs) are in place to cover 13 of the 14 profile areas, and contracts for the CHDOs in the initial 10 priority areas are being extended following an evaluation of their roles.

OCC02.06 Number of completed profiles for local communities with the greatest health inequalities # 14.00 14.00 14.00 14.00 14.00

Comments: Annual reporting pattern, period A total of 14 Community Insight Profiles have now been completed. The final profile for Bicester West is due to be published online by the end of June 2025. All reports are available on the Oxfordshire data hub along with a link to access to the new Interactive Community Insight Profile (ICIP) Dashboard.

OCC03.02 % of the eligible population aged 4074 who have been offered NHS Health Check % N/A 18.00 18.54 GREEN 18.00 18.54

Comments: Annual reporting pattern, period 2024/25

The annual achievement of 18.54% is within a thre	shold that meet	ts the annual targ	ets set for Primary	/ Care for this meas	sure (18% - 22%).			
			I					
OCC03.05 Of those residents invited for a NHS		•						
Health check, the % who accept and complete	%	•	42.90	44.24	GREEN	42.90	44.24	GREEN
the offer								
Comments: Annual reporting pattern, Period 2024	1/25							
Comments :/ will duri reporting pattern, i errod 202-	+, 23							
2024/25 sawanincrease in the number of NHS Hea		•	•	•			chose to take up th	e offer of an NHS
Health Check either in the community or Primary C	Care, although a	bove target this i	s a decline in perfo	ormance from Apri	l 2023 – March 20	024 50.9%.		
OCC03.12 Numbers in treatment: Alcohol only								
during the financial year	#	•	794.00	1,002.00	GREEN	794.00	1,002.00	GREEN
Comments: Annual reporting pattern, Period 202	4/25							
In line with national strategic aims, extensive partr	pershin work an	d outreach with t	hose with health i	negualities has sur	norted the nartn	ershin to continue	to increase the nu	mher of neonle in
treatment over the last year, and rates of increase	•					•		
strategy.		0 0		·		3		
			I					
OCC05.04 % of Annual change in average		•						
nitrogen dioxide concentrations in AQMAs	%	•	10.00	3.00	RED	10.00	3.00	RED
Comments: Annual reporting pattern. measure re			-	•				_
(AQMAs) in Oxfordshire declared in relation to nitr	•		_			in Oxfordshire we	re recorded by the	District and City
Councils. The average of the highest levels recorde	d was 31.26 μg,	m3 which is less	than the UK's stat	utory ilmit of 40 µg	g/m3.			
The 2024/25 figure is a 3 % reduction in the average	ge of highest nit	rogen dioxide lev	els recorded in eac	ch of the 9 AQMAs	(under the 10 % t	arget by 7 %) com	pared to 2023 leve	Is and a 39 %
reduction compared to the baseline year of 2019.	_	-					•	
monitoring site. However, the downward trend is a			_	_	_		-	
vehicles having to meet stricter emission standard	s and the uptak	e of electric road v	vehicles. A nationa	a I move away from	coal usagein po	wer generation ha	s a I s o impacted niti	rogen dioxide

The Service is working in line with the Council's Air Quality Strategy and Route Map actions, and the Environment Act 2021 duty to co-operate with the District and City Councils' Air Quality

levels.

