



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	27 November 2019
Agenda Item	5
Title	Mid-Year Performance Report 2019-20
<p>Summary</p> <p>This report provides the Performance and Audit Committee with the performance measures developed to monitor progress in the delivery of the strategic priorities set out in the HSCP Strategic Plan 2018-2021. Where data is available mid-year this is included.</p>	
Presented by	Steven Reid Policy, Planning and Performance Manager
<p>Action Required</p> <p>Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Report 2019-20.</p>	

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EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

27 November 2019

Report by Chief Officer

MID-YEAR PERFORMANCE REPORT 2019-20

PURPOSE OF REPORT

1. This report provides Performance and Audit Committee with the performance measures developed to monitor progress in the delivery of the strategic priorities set out in the new HSCP Strategic Plan 2018-2021. Where data is available mid-year this is included.

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Report 2019-20.

BACKGROUND

3. The last meeting Performance and Audit Committee discussed the report on the development of performance measures to monitor progress in the delivery of the strategic priorities set out in the new HSCP Strategic Plan 2018-2021.

REPORT

4. The attached report contains performance measures and actions set out under the new strategic priorities, with mid-year data provided where available.
 - Mental wellbeing is improved among children, young people and families in need
 - People are supported to stop offending and rebuild their lives through new community justice pathways
 - Wellbeing is improved in our communities that experience shorter life expectancy and poorer health
 - People are supported to maintain their independence at home and in their local community.
 - People who experience mental ill-health are supported on their journey to recovery
 - Unplanned admissions to hospital are reduced
 - People who care for someone are able to exercise choice and control in relation to their caring activities
5. The final section contains a number of organisational indicators relating to our staff and customers. Annex 1 contains a list of the performance measures that will be included in the end of year report for which mid-year data is not available.
6. The report presents each indicator with a RAG status in relation to the target for the reporting period (where a target is set), along with long-term and short-term trend arrows and commentary on performance. Where performance is weak we include commentary on remedial action that is underway and planned for the future.

7. We are working to continuously improve the quality of reporting including the commentaries provided with performance indicators. New Business Analyst posts are being established at the HSCP to support performance and we will provide training to ensure a high quality and consistent approach to reporting (including writing commentary).
8. The available data shows strong performance in relation to: supporting children subject to child protection measures; helping people subject to Community Payback Orders (CPOs) to look at how to stop reoffending; supporting women who have experienced domestic abuse; adult protection; helping people to stop smoking, and supporting older people and people with long-term conditions to live independently at home. There has also been strong performance on reducing delayed discharges from hospital, reducing hospital admissions, supporting unpaid carers and handling complaints to the HSCP.
9. Areas that remain challenging include: waiting times for CAMHS and psychological therapies (although we have seen improving performance for both in the first half of the year following targeted activity); completing CPOs within court timescales; reducing attendances at A&E; and staff absence.

RECOMMENDATIONS

10. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Report 2019-20.

REPORT AUTHOR AND PERSON TO CONTACT

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November 2019

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

25-09-2019 PAC Paper: Performance Update Report – Quarter 1 2019-20
<https://www.eastrenfrewshire.gov.uk/CHttpHandler.ashx?id=25172&p=0>

HSCP Strategic Implementation Plan - Mid Year Report 19-20






Green	performance is at or better than the target
Amber	Performance is close (approx 5% variance) to target
Red	Performance is far from the target (over 5%)

Trend arrows point upwards where there is improved performance (inc. where we aim to decrease the value).





ERC ODP measures





Scorecards Title							
1 - Mental wellbeing is improved among children, young people and families in need							
Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
DECREASE -Child & Adolescent Mental Health - longest wait in weeks at month end	H1 2019/20	37	18	Red	↓	↓	The monthly average longest wait during the first half of 2019/20 was 37 weeks. This was a slight increase from 34 weeks at end-year. We continue to perform below the NHSGGC average on this measure. Improving access and waiting times for CAMHS remains a key area of focus for the HSCP. We are taking forward a local action plan for CAMHS which includes regular review and the introduction of group based support which will increase team capacity. We are also continuing to roll out our Family Wellbeing Service which supports children and young people with mental and emotional wellbeing concerns.
INCREASE - Percentage of positive response to Viewpoint question "Do you feel safe at home?"	H1 2019/20	95%	91%	Green	↓	↑	This measure captures the % of positive responses of children subject to child protection measures and those looked after at home and away from home. Staff continue to use Signs of Safety approaches to capture children's' perceptions of their safety. Response in the first half of 2019/20 was low with just 8 respondents. We plan to review our method of capturing this data to ensure a stronger response in future.

INCREASE - Children and young people starting treatment for specialist Child and Adolescent Mental Health Services within 18 weeks of referral	H1 2019/20	76%	90%	Red			At the half year point the average weekly performance was 76% of children on the CAMHS waiting list having waited no more than 18 weeks. While we continue to miss target on this measure although there has been improved performance in the first half of the year – up from 73% for the previous six months. Performance was at or above 80% throughout September. The latest weekly performance figure (17 Oct) showed that 78% of those on the waiting list had been waiting for no more than 18 weeks. Of the 95 children accessing CAMHS services in the first half of 19/20, 56 (59%) were seen within 18 weeks. We are taking forward a local action plan for CAMHS which includes regular review and the introduction of group based support which will increase team capacity.
INCREASE - % of children/ young people attending Family Wellbeing Service with improved emotional health at end of programme	2018/19	93%	100%	Red			Latest annual figure for 2018/19 is based on 29 children/young people whose participation with the programme has ended. This PI will be replaced by the new PIs agreed by Robertson Trust and HSCP. Following the successful pilot of the service we will continue to roll out the service across East Renfrewshire.

Scorecards Title



2 - People are supported to stop offending and rebuild their lives through new community justice pathways

Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
INCREASE - Community Payback Orders - Percentage of unpaid work placement completions within Court timescale.	H1 2019/20	72%	80%	Red			In the first half of the year 72% of placements were completed within timescales set out by court (13 out of a total of 18). There has been a fall in performance in regard to placement completions on the same period last year. This is largely due to a number of people with employment commitments being unable to complete their unpaid work requirements within short 3 to 6 month timescales imposed by courts. This in turn has led to an increase in the number of extension requests to courts. To address this issue, we have strengthened monitoring processes in order to be able to make appropriate representation to the court where an extension is required for completion of an Order.
INCREASE - Criminal Justice Feedback Survey - Did your Order help you look at how to stop offending?	H1 2019/20	100%	100%	Green			Results of the 21 completed survey forms from the first half of 2019/20 reveals a 100% positive response.

Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
INCREASE - % Change in women's domestic abuse outcomes	H1 2019/20	75%	70%	Green			From April 2019 to September 2019 East Renfrewshire Women's Aid service reported significant change and improvement for women across all reported outcomes with 75% of women assessed (31 of 41) noting an improvement in progress in their outcomes overall. Reduction in risk is reflected in the significant increases in the areas of safety with 70% improvement, health and wellbeing 80% and empowerment and self-esteem 75%.
INCREASE - People agreed to be at risk of harm and requiring a protection plan have one in place	H1 2019/20	100%	100%	Green			All residents identified as at risk of harm by the HSCP have a bespoke protection plan in place.



Scorecards Title







3 - Wellbeing is improved in our communities that experience shorter life expectancy and poorer health

Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
INCREASE - Increase the number of smokers supported to successfully stop smoking in the 40% most deprived SIMD areas. (This measure captures quits at three months and is reported 12 weeks in arrears.)	Q1 2019/20	5	3	Green			In 2018/19 the management of the smoking cessation service transferred from HSCP to the Public Health Directorate at NHSGGC. Latest data is to Q1 19/20. Of 20 attempts, 5 people had quit smoking at 3 months. This is an improvement on previous quarters and is meeting our new NHSGGC provisional target of for the quarter.

Scorecards Title



4 - People are supported to maintain their independence at home and in their local community.

















Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
INCREASE - Number of people self-directing their care through receiving direct payments and other forms of self-directed support.	2018/19	514	600	Red			This is a provisional figure for 2018/19. A total of 514 people were in receipt of SDS 1 and 2 Option payments. A further 612 people were covered under SDS Option 3. We plan to review the appropriateness of the target for this measure. Going forward we will continue to promote all SDS options and ensure the necessary support is in place for individuals to take up the option most appropriate to their circumstances.









Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
INCREASE - Percentage of those whose care need has reduced following re-ablement	H2 2018/19	69%	60%	Green			Latest figure relates to October-Mar 2018/19. Of the 89 people receiving reablement, care was reduced or stopped for 61 (68.5%).
INCREASE - Percentage of people aged 65+ who live in housing rather than a care home or hospital	H1 2019/20	95.9%	97%	Green			Latest data released Oct 2019. This indicator is still under development and may change in future. Due to different configurations of services, figures for the hospital/hospice categories may not be comparable across partnership areas.
INCREASE - People reporting 'living where you/as you want to live' needs met (%)	H1 2019/20	89%	90%	Green			In the first six months of 2019/20 of the 372 valid responses 330 respondents reported their needs met.

Scorecards Title

5 - People who experience mental ill-health are supported on their journey to recovery



Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
INCREASE - Percentage of people waiting no longer than 18 weeks for access to psychological therapies	H1 2019/20	63%	90%	Red			At the half year point the average weekly performance was 63% of people on the waiting list having waited no more than 18 weeks. The weekly figure improved steadily from 53% at the start of April to 73% in August but began to fall again during September. The latest weekly performance figure (17 Oct) showed that 50% of those on the waiting list had been waiting for no more than 18 weeks. Of the 246 eligible patients accessing psychological therapies in the first half of 19/20, 113 (54%) were seen within 18 weeks. We have a targeted improvement plan in place to tackle waiting times and have seen good progress over the first half of the year. Going forward we will continue to implement the plan.











Scorecards Title							
6 - Unplanned admissions to hospital are reduced							
Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
DECREASE - people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting including AWI (NHSGGC Acute data only)	H1 2019/20	3	0	Red			We have performed well on delayed discharges since May 19 with between 1 and 3 delays each month. This is based on data extracted from GGC delayed discharge dashboard. This provides more up to date data than ISD. We will continue to monitor this measure on a weekly basis and use project management disciplines around the home from hospital team to drive and support improvement.
DECREASE - people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting including AWI (ISD data)	August 2019	4	0	Red			We have performed well on delayed discharges in the first half of the year. ISD data is available for the first 5 months of the year, up to August 19. We will continue to monitor the latest available data for this measure and use project management disciplines around the home from hospital team to drive and support improvement.
DECREASE - Delayed discharges bed days lost to delayed discharge (NHSGGC acute data only)	H1 2019/20	499	946	Green			In line with positive performance on delayed discharge, bed days lost have reduced significantly in the first half of the year from 961 for the preceding 6 months.
DECREASE - Delayed discharges (ISD) bed days lost to delayed discharge (REDUCE)	H1 2019/20	671	946	Green			Bed days lost to delayed discharge have been reducing and we are within target for the first half of the year. Days lost reduced significantly from 1,039 in the previous six months.
DECREASE - No. of A & E Attendances – Adults (NHSGGC data)	H1 2019/20	9,001	9,168	Green			Data relates to NHSGGC figures – attendances at A&E and MIUs (18+ only). We continue to work with GPs and care homes to reduce A&E attendances and will continue to undertake detailed 'flow' analysis to better understand the diagnostic and population profile of those attending A&E.
DECREASE - No. of A & E Attendances - Adults (MSG)	2018/19	20,212	18,332	Red			Latest complete MSG data to March 2019 (Oct 2019). Adult attendances for the year increased from 19,342 in 2017/18. We continue to work with GPs and care homes to reduce A&E attendances and will continue to undertake detailed 'flow' analysis to better understand the diagnostic and population profile of those attending A&E.
DECREASE - No. of A & E Attendances - All (MSG)	2018/19	27,850	26,844	Amber			Latest complete MSG data to March 2019 (Oct 2019). Attendances (all ages) increased from 26,993 in 2017/18.
DECREASE - Number of Emergency Admissions: Adults (NHSGGC data)	H1 2019/20	3,422	3,562	Green			Target for 2019/20 set at 7,124 (10% of 2015/16 baseline) approved by Integrated Joint Board. We are ahead of





Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
							target (3,562) at the mid year point (3,422 adult admissions).
DECREASE - Number of Emergency Admissions: Adults (MSG)	2018/19	7,255	8,748	Green			Latest complete MSG data to March 2019 (Oct 2019). Data shows continuing improvement on emergency admissions – down from 8,252 for the previous year.
DECREASE - Occupied Bed Days (Adult – non-elective) (NHSGGC data)	H1 2019/20	29,595	28,528	Amber			Emergency inpatient bed days (18 years+) have increased in the first half of the year from 26,062 for the same period in 2018/19. We will continue to focus on reducing unplanned hospital stays in order to meet our target for this measure by the end of 2019/20.
DECREASE - A & E Attendances from Care Homes (NHSGGC data)	H1 2019/20	192	200	Green			A&E attendances from care homes continue to reduce with the figure falling from 217 in the second half of 2018/19, now within our target.
DECREASE - Emergency Admissions from Care Homes (NHSGGC data)	H1 2019/20	113	120	Green			Admissions from care homes continue to reduce (from 131 at H2 2018/19) following targeted work.











Scorecards Title

7 - People who care for someone are able to exercise choice and control in relation to their caring activities

Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
INCREASE - People reporting 'quality of life for carers' needs fully met (%)	Q1 2019/20	87%	72%	Green			In the first six months of 2019/20 of the total 87 valid responses 76 reported their needs met.

Scorecards Title							
8 - Organisational outcomes							
Scorecards Title							
8.1 Our customers							
Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
DECREASE - Average time in working days to respond to complaints at stage one (HSCP)	H1 2019/20	4.5	5	Green			This relates to 28 frontline complaints in the first half of 2019/20.
DECREASE - Average time in working days to respond to complaints at investigation (stage 2 and esc combined) (HSCP)	H1 2019/20	19.6	20	Green			This relates to 44 investigation stage complaints in the first half of 2019/20.
INCREASE - Percentage of HSCP (NHS) complaints received and responded to within timescale (5 working days Frontline, 20 days Investigation)	H1 2019/20	83%	70%	Green			In the first half of 2019/20 there were 4 frontline NHS complaints - all responded to within timescale. There were 2 investigation stage complaints with one responded to outwith timescale. We will continue to work to improve our complaints handling processes and meet timescales and will deliver further training to staff in the second half of the year.
INCREASE - Percentage of HSCP (local authority) complaints received and responded to within timescale (5 working days Frontline; 20 days Investigation)	H1 2019/20	68%	100%	Red			Of the 33 frontline complaints received by the HSCP (ERC) in the first half of 2019/20 30 (91%) were responded to within timescale. of the 49 investigation stage complaints received 26 (53%) were responded to within timescale. We will continue to support staff to meet complaints handling statutory requirements through training and supervision.
DECREASE - The total number of complaints received - HSCP	H1 2019/20	125		Data Only			This equates to 0.83 complaints per 1,000 people.

Scorecards Title							
8.3 Our People							
Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
DECREASE - Percentage of days lost to sickness absence for HSCP NHS staff	H1 2019/20	7.3%	4.0%	Red			Although there has been a slight increase in the half-yearly average from last year, absence rates have fluctuated each month with a dip during the summer months. With small numbers of staff within teams any absence results in a high percentage rate and we work continuously to support employees who are absent from work to return as soon as possible. We will continue to hold monthly absence support panels with both HSCP and LD In-Patient Managers to ensure that the Attendance Management Policy is being applied appropriately and consistently. As absence rates are greatest within LD In-Patients Services we have agreed to put in place dedicated support from the HRS AU especially for the complex cases. Stress and Anxiety is the most common reason for absence across the HSCP and Learning Disabilities. Stress Audits have been carried out by several teams with action plans in place to address the issues highlighted and we will continue with this approach. Learning Disabilities are currently working on a programme of support for employees including the possibility of Mindfulness Sessions.
INCREASE - Percentage of staff with an electronic Knowledge and Skills Framework review recorded on TURAS Appraisal System	H1 2019/20	50.4%	80%	Red			There has been a gradual improvement from the beginning of April 2019 when 45.5% compliance was recorded to 50.4% compliance at the end of September 2019. Compliance is varied across the HSCP. Two large sections with good compliance (Child Health and Learning Disability Inpatient) have a positive impact on the overall average. Health and Community Care is a large section with poor compliance which lowers the overall. The following actions are being taken forward to improve compliance: In-house information sessions delivered directly to Reviewers and Education; Distribution of information and links to how-to guides and forms; Offer to assist managers with detailed reporting on compliance within their section (taken up by some sections); Assistance with the process of having alignments updated when they are causing faulty reporting (taken up by some sections); Regular reporting to the SMT in sections where compliance is lower, proactive sending of detailed information about where the gaps are.

Description	Last Update	Current Value	Current Target	Performance Data Traffic Light	Long Term Trend	Short Term Trend	Notes & History Latest Note
DECREASE - Sickness absence days per employee - HSCP (LA staff)	H1 2019/20	8.0	4.9	Red			Although there has been an increase in the half-yearly average from last year, absence rates have fluctuated each month with a dip during the summer months. With small numbers of staff within teams any absence results in a high percentage rate and we work continuously to support employees who are absent from work to return as soon as possible. We will continue to hold monthly absence support panels with HSCP Managers to ensure that the Attendance Management Policy is being applied appropriately and consistently. Stress and Anxiety is the most common reason for absence across the HSCP. Stress Audits have been carried out by several teams with action plans in place to address the issues highlighted and we will continue with this approach.
INCREASE - iMatter Response Rate - HSCP	2019/20	67%		Data Only			Decrease in performance from last year (71%). This was anticipated since care at home staff are now included. We expected a lower response from this group due to use of paper copies and the fact they had been asked to complete 3 surveys already this year.
INCREASE - iMatter Employee Engagement Index (EEI) score - HSCP	2019/20	75%		Data Only			The EEI score declined slightly by 3% on the previous year. However, overall results are very positive with the majority of indicators green (only 3 yellow and none red).
INCREASE - % of teams with an iMatter Action Plan in place - HSCP	2019/20	96%	80%	Green			We remain committed to developing action plans based on feedback from staff in the iMatter survey. Participation in action planning is now 96% - up from 93% last year and above target.
INCREASE - % Staff who report 'I am given the time and resources to support my learning growth' in iMatter staff survey.	2019/20	77%	90%	Red			Based on 636 responses. iMatter Survey Report July 2019. While performance has continued to rise this year (77% from 76% last year and 70% the previous year) we are missing our ambitious target of 90%.

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Appendix – Indicators with no new update for Mid-Yr

Indicator
Percentage of children looked after away from home who experience 3 or more placement moves
Accommodated children will wait no longer than 6 months for a Looked After Review meeting to make a permanence decision
% looked after children and care experienced young people accessing mental health supports
100% of parents of children who have received an autism diagnosis have opportunity to access Cygnet post diagnostic programme within 12 months of receiving diagnosis.
% Mothers confirming they have received information about close and loving relationships from staff
Increase in improved outcomes for children after parent/carer completion of POPP
SCHN09: Balance of Care for looked after children: % of children being looked after in the Community
% Child Protection Re-Registrations within 18 months
% Looked After Children with more than one placement within the last year (Aug-Jul)
% of service users moving from treatment to recovery service.
% Change in individual drug and alcohol recovery Outcome Score
% Increase in the number of people being referred through diversion from prosecution.
% Positive employability and volunteering outcomes for people with convictions.
Male life expectancy at birth in 15 per cent most deprived communities
Female life expectancy at birth in 15 per cent most deprived communities
NI-11: Premature mortality rate per 100,000 persons aged under 75. (European age-standardised mortality rate)
NI-18: The number of adults (18+) receiving personal care at home or direct payments for personal care, as a percentage of the total number of adults needing care.
NI-2: Percentage of adults supported at home who agreed that they are supported to live as independently as possible.
NI-3: Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided
% of people with an outcome-focused support plan
SW02: Direct payments spend on adults 18+ as a % of total social work spend on adults 18+
SW03: Percentage of people aged 65+ with intensive needs receiving care at home.
Mental health hospital admissions (age standardised rate per 1,000 population)
Primary Care Mental Health Team (Bridges) wait for referral to 1st appointment offered - within 4 weeks (% patients).
Primary Care Mental Health Team (Bridges) wait for referral to 1st treatment appointment offered - within 9 weeks (% patients).
Delayed discharges bed days lost to delayed discharge for Adults with Incapacity (AWI)
Health and Social Care Integration - Core Suite of Indicators NI-12: Emergency admission rate (per 100,000 population) for adults.
NI-13: Emergency bed day rate (per 100,000) for adults

NI-14: Number of re-admissions to an acute hospital within 28 days of discharge per 1,000 admissions.
NI-15: Proportion of last 6 months of life spent at home or in a community setting
NI-16: Rate per 1,000 population of falls that occur in the population (aged 65 plus) who were admitted as an emergency to hospital.
NI-19: The number of bed days due to delay discharge that have been recorded for people aged 75+ resident within the Local Authority area, per 1,000 population in the area.
NI-21: Percentage of people admitted to hospital from home during the year, who are discharged to a care home
NI-22: Percentage of people who are discharged from hospital within 72 hours of being ready
NI-8: Total combined % carers who feel supported to continue in their caring role.
NI-17: Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections
NI-4: Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated
NI-5: Total % of adults receiving any care or support who rated it as excellent or good.
NI-6: Percentage of people with positive experience of the care provided by their GP Practice.
NI-7: Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life
NI-9: Percentage of adults supported at home who agreed they felt safe.
Payment of invoices: Percentage invoices paid within agreed period (30 days)
NI-20: Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency
Expenditure on end of life care, cost in last 6 months per death
SCHN08a: The gross cost of "children looked after" in residential based services per child per week £
SCHN08b: The gross cost of "children looked after" in a community setting per child per week £
SW01: Older Persons (Over65) Home Care Costs per Hour
SW05: The Net Cost of Residential Care Services per Older Adult (+65) per Week
Percentage of HSCP local authority staff with a Performance Review and Development (PRD) plan in place.
NI-10: Percentage of staff who say they would recommend their workplace as a good place to work