



<b>Meeting of East Renfrewshire Health and Social Care Partnership</b>	Performance and Audit Committee
<b>Held on</b>	23 November 2016
<b>Agenda Item</b>	7
<b>Title</b>	Mid Year Performance Report 2016-17
<p><b>Summary</b></p> <p>This report and attached appendix provides an overview of all the available Health and Social Care Partnership performance measures and details progress on the actions agreed to implement the Strategic Plan. Where data is off target it provides an exception report giving more information about activity to improve performance.</p>	
<b>Presented by</b>	Candy Millard, Head of Strategic Services
<p><b>Action Required</b></p> <p>Performance and Audit Committee is asked to</p> <ul style="list-style-type: none"> <li>• Note and comment on the Mid-Year Performance Report</li> <li>• Note and comment on the detailed update in Appendix 1.</li> </ul>	

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**EAST RENFREWSHIRE INTEGRATION JOINT BOARD**

**PERFORMANCE & AUDIT COMMITTEE**

**23 NOVEMBER 2016**

**Report by Julie Murray, Chief Officer**

**MID YEAR PERFORMANCE REPORT**

**PURPOSE OF REPORT**

1. This report gives an overview of East Renfrewshire Health and Social Care Partnership performance at mid-year.

**RECOMMENDATION**

2. Performance and Audit Committee is asked to:-
  - Note and comment on the Mid-Year Performance Report
  - Note and comment on the detailed update in Appendix 1.

**BACKGROUND**

3. Performance and Audit Committee has received regular reports on the development of the performance framework for the Health and Social Care Partnership and received a performance exception report at its last meeting.
4. The attached appendix provides a full mid-year update on all the available Health and Social Care Partnership performance measures and details progress on the actions agreed to implement the Strategic Plan.

**REPORT**

**Children and Families**

5. From wider community planning information we are aware that the level of child poverty in East Renfrewshire is increasing. Healthier Wealthier Children Programme is now based within Income Maximisation Service. From January 2016 it had 242 referrals; this is an increase 22% on the whole of 2015. It has generated an income of £277,000 thus far, an increase of 70% on the whole of 2015, generating on average £1145 per family
6. 115 parents have been supported through effective parenting programmes and four more Family First workers have been recruited to provide advice and support to families reducing parental stressors.
7. We have developed our first East Renfrewshire Corporate Parenting Plan and set out 6 themes to improve outcomes for looked after children.
8. Since January we have begun to work within the PACE programme approach. The aim is to reach permanent destinations for children within improved timescales. Currently the focus is on children who have been looked after for over 2 years at home and in particular those looked after for more than 5 years.

9. The foster care recruitment campaign has been running for 18 months. In recent weeks we have approved 5 new carers and reduced number of agency carers. We have reduced the number of children placed with agency carers by 5.

#### Exception Report

10. Child and Adolescent Mental Health service longest monthly waits have ranged from 18 to 22 weeks. Last reported longest waiting time was 22 weeks. As a small team, with most staff working for only a small number of sessions in East Renfrewshire each week, resilience and capacity remain challenging, further exacerbated by recent absence and turnover. Work is underway to develop Tier 2 mental health and wellbeing services which will support more appropriate CAMHS referrals and discharge planning.

#### **Criminal Justice**

11. Work this year is focusing on the transitional activity required to new national Community Justice Model. We have held two development sessions with key stakeholders and partners across the community justice partnership to support the development of the local improvement plan.
12. Our criminal justice service continues to provide accredited programmes and work placements in partnership with other agencies. Regular quality assurance exercises are undertaken by the team manager and service manager.

#### Exception Report

13. Thirteen of nineteen Orders commenced within 7 days in Qtr 2. The off target Orders were due to a variety of reasons including holidays, health issues, appeals or Orders waiting for existing Orders to end (new Orders can't commence until existing Orders are completed).

#### **National Outcome 1: People are active and optimise their health and well-being**

14. In addition to promoting national campaigns , local work over the last six months has focused on mental health and wellbeing and physical activity. Updated performance data will not be available until end of year.

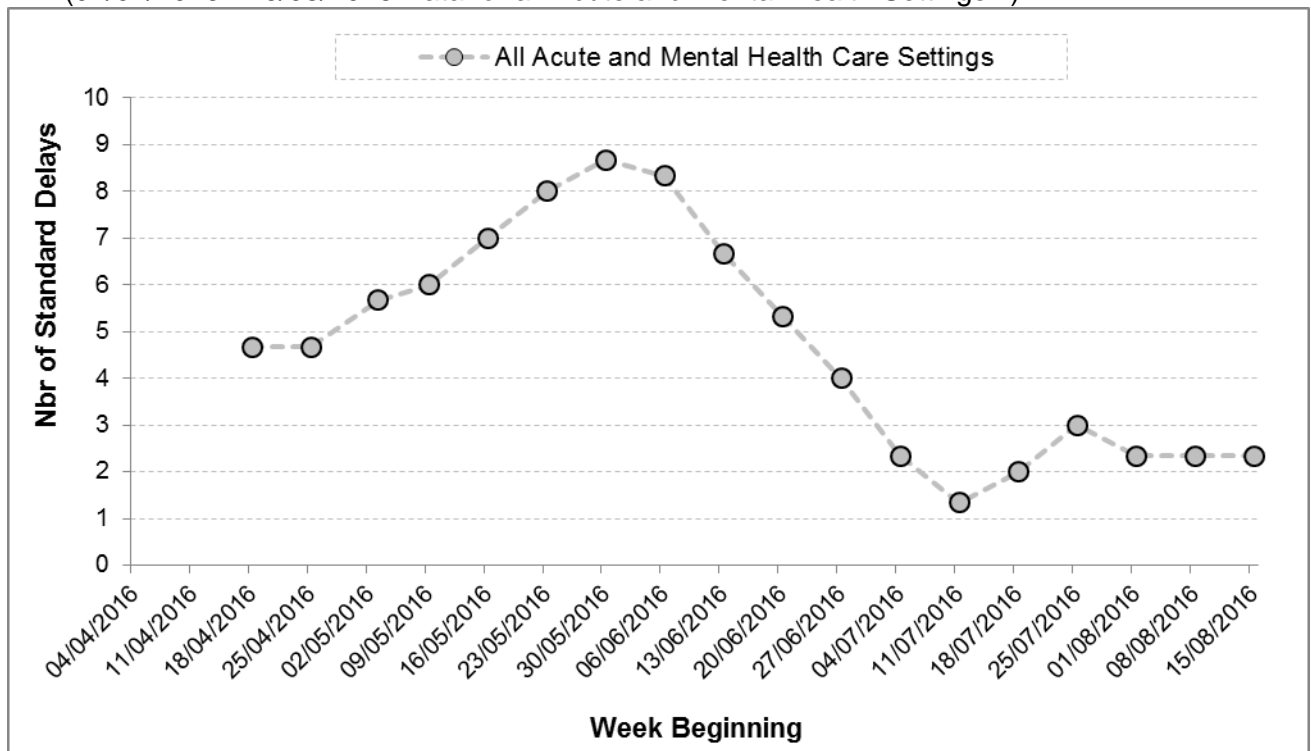
#### **National Outcome 2: People live as independently as possible**

15. Performance for people reporting 'living where you want to live' needs fully met is has improved and is close to target (77.7% against a target of 80%) The HSCP is able to support most people to live in their own home but for those who require to move to a care home. The innovative My Life My Way project piloting a new way for people to take control over care home support. This was featured as example of social work good practice in the recent Audit Scotland Report on social work and on STV news.

#### Exception Report

16. As anticipated the new 72 hour delayed discharge target is proving to be a challenge. Our performance reporting draws on NHSGGC data for a proxy mid-year position. The end of year report will use validated ISD data which also includes Hairmyres and other non-Glasgow hospitals The overall picture illustrated by the chart below show that the total number of delayed discharges has decreased between 04.04.2016 and 15.08.2016. (Due to the small number of delayed discharges for East Renfrewshire patients, we cannot rule out the possibility of this decline being due to natural/seasonal variation). Over the next six months we will be rolling our Safe and Supported tests of change and implementing our Winter Plan.

17. Chart 1 Three month rolling average for Number of Standard Delayed Discharges\* (04/04/2016 - 15/08/2016 Data for all Acute and Mental Health Settings\*\*).



### National Outcome 3: Positive Experiences and Outcomes

18. Performance on people reporting 'being respected' needs fully met is on target at 95.2% Training on Effective Conversations has been carried out and managers are taking a more active role in ensuring a person-centred approach.
19. Feedback has been actively sought on people's experience of the new health and care centre this has informed way finding and signposting. For second half of year focus will be on wider customer experience and we will review complaints and feedback processes.  
Exception Report
20. There are issues with the waiting times data for primary care due to the migration to EMIS system. However this is a very small team and any absence impacts disproportionately on performance. The team are looking to redevelop joint group work with South Glasgow, which should enable more people to access therapy sessions.

### National Outcome 4: Improving the Quality of Life of Service Users

21. The development of day opportunities for older people and people with learning disabilities is progressing well. As part of our local Community planning work we have a series of local outcomes that focus on older people. Some of this work was presented to a recent Integration Joint Board.  
Exception Report
22. Drug death data for last year has recently been made available. Unfortunately deaths in the former Clyde area of NHS GGC rose last year. All deaths are fully investigated and a detailed report is taken to the Alcohol and Drugs

23. A total of 50 Alcohol Brief interventions were delivered in Qtr 1 on a target of 83. Performance around this indicator tends to pick up in the latter part of the year due to data lag, however there is a risk that changes to the GP contract may impact on numbers.

### **National Outcome 5 - Reducing Health Inequalities**

24. Through our work on Healthy Working Lives with the wider council we have targeted activity at lower paid staff. A survey of manual workers was undertaken at ERC Thornliebank Depot to establish health priorities. Subsequently 39 health check appointments for manual staff/shift workers were delivered. These checks resulted in 8 referrals to GP for high blood pressure, 3 for high cholesterol and 2 emergency GP appointments were made on the day.

#### Exception Report

25. Our local target for smokers supported to successfully stop smoking in the most deprived areas is 28. We currently have 5 quits against a phased target of 7. There has recently been a change in how quits are recorded which is causing some challenges to ensuring data quality. Smoking cessation staff have set up an information point in Barrhead Foodbank to raise awareness of Smokefree Services and to signpost clients to other health and wellbeing opportunities. An information point has also been established in Barrhead Health and Care Centre.

### **National Outcome 6 - Carers are Supported**

26. Performance on carers' quality of life is close to target. Considerable local work is required to prepare for the implementation of new carers legislation. We are reviewing current arrangements in light of legislation in partnership with Carers Centre. Carers are a key part of the community led support activity and through collaboration with Carers Centre and Voluntary Action we are designing the carers contribution to support planning.

### **National Outcome 7 - People are Safe from Harm**

27. The MAPPA extension which was introduced in April 2016 to include those offenders, who by reason of their conviction are assessed as posing a Risk of Serious Harm to the public (RoSH), is now established with 2 such referrals being received in East Renfrewshire. Both referrals were made by The Scottish Prison Service (SPS) for individuals who were being considered for release on parole licence. MAPPA 2 meetings were held to consider Risk Management plans for release, however, in both instances, parole was not granted.
28. The Domestic Abuse Service has been operational for two years with considerable development progressed to ensure that the appropriate support is available and accessible to women, children and young people affected by domestic abuse. Partnership working across the Domestic Abuse Task Force, Police Scotland and Request for Assistance Team continues. Of the women receiving support following domestic abuse 62.5% recorded an improvement in their outcomes with 37.5% showing a large increase. 90% of children and young people showed an improvement in their outcomes.

### **National Outcome 8 - Staff feel Engaged with the work they do**

29. The HSCP has a staff governance workplan developed and monitored in partnership with staff. This report shows a number of elements of that plan. Leadership event held in May 2016 for managers across HSCP in relation to Staff Governance Standards.
30. We have successfully maintained the Healthy Working Lives Gold Award (ERC & HSCP) after an annual review in October 2016. The HWL group have delivered a broad programme of activity during the annual review period including health activities, training and policy review.

#### Exception Report

31. Performance on PRD is better than for KSF. KSF figures reduced when HSCP hosted learning disability service but plans to improve rates in this service are underway. Sickness absence is below target but is improving following considerable senior manager and HR support to team managers.

### **National Outcome 9 Effective Resource Use**

32. Data on effective resource use will not become available until end of year. IJB has received regular reports on budget monitoring, savings and efficiencies. Performance and Audit Committee has received reports on social care contracts and tendering activity.

### **CONCLUSIONS**

33. There is good progress on the majority of the actions agreed through the Strategic Implementation Plan
34. Performance in the area of tackling inequalities is a challenge. Due to the relative affluence of East Renfrewshire as a whole the HSCP has few resources to deploy to tackling inequalities, but the report contains examples of where the Partnership is its focusing mainstream resource to close the gap. .
35. Work on people living independently at home and quality of life is progressing well. The new 72 hour delayed discharge target is a challenge we have reduced delays to approximately 5 per week over the winter period we will be testing improvement actions through our Safe and Supported work programme.
36. Overall people's outcomes are positive but there are a number of areas for improvement in the next six months including complaints handling and customer experience. Some of our small teams struggle to achieve waiting time targets and this is kept under constant review.

### **RECOMMENDATIONS**

37. Performance and Audit Committee is asked to
  - Note and comment on the Mid-Year Performance Report
  - Note and comment on the detailed update in Appendix 1.

**REPORT AUTHOR AND PERSON TO CONTACT**

Chief Officer, HSCP: Julie Murray

Candy Millard, Head of Strategic Services

[Candy.Millard@eastrenfrewshire.gov.uk](mailto:Candy.Millard@eastrenfrewshire.gov.uk)

0141 451 0749

November 2016

**BACKGROUND PAPERS**

**KEY WORDS**

<performance outcomes actions update mid-year

A report detailing mid year performance information.



# East Renfrewshire HSCP

## Health & Well-Being Outcomes Mid Year 2016-17



**Report Type:** Scorecard Report  
**Report Author:** Ian Smith  
**Generated on:** 15 November 2016

### *Children's Outcome 1 - Parents provide a Safe, Healthy and Nurturing Environment*

#### *1. Accessible and effective support*





Action Description	Status Progress Bar	Notes & History Latest Note
Improve signposting to income maximisation service for families to ensure they receive their entitlement to state benefits and tax credits.		Healthier Wealthier Children Programme is now based within Income Maximisation Service. From January 2016 the post has had 242 referrals, this is an increase 22% on the whole of 2015. It has generated an income of £277,000 thus far, an increase of 70% on the whole of 2015. The post receives on average 5 new referrals per week and generates on average £1145 per client


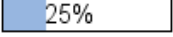


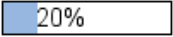
#### *2. Engaged communities*

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
% Increase in infant and parent support groups in Barrhead			Unknown			New Indicator - Baseline and target to be set

Action Description	Status Progress Bar	Notes & History Latest Note
Establish community networks and assets that support children's play and develop parental skills.		A parent/carer and toddler group in Auchenback Resource Centre is being supported to run independently with a small number of volunteers taking on roles such as managing funds, and organising weekly sessions. Initial engagement with parents in Dunterlie is underway to identify their priorities for a parenting programme/group. The team are linking with voluntary sector in Barrhead to identify where support can be provided to expand provision for parent/care and toddler type groups.

**3. Targeted interventions**

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
% of children reaching developmental milestones at the time of the child's 27-30 month child health review.	96%	85%	Green			The 27-30 month review was introduced in Scotland in April 2013. The 27-30 month review is universal and should be offered to every child reaching the appropriate age. Examples of information collected include: development (social, behavioural, communication, gross motor, vision, hearing), physical measurements (height and weight) and diagnoses / issues
Children within kinship care remaining in their community.	30%	75%	Unknown			The PACE Programme began in 2016 and is focused on improving permanence for all looked after children beginning with current cohort in kinship placements.











Action Description	Status Progress Bar	Notes & History Latest Note
Review parental engagement to ensure we hear the views of those families most in need of support		Although retention and completion rates for Parenting Programmes are high we require to measure impact more accurately and we intend to do this in consultation with Pop National Programme leads. In particular we need to improve how we measure parental confidence. This will allow us to promote the programmes more widely to even more families in need.
Extend the Family First workers to more communities of need, providing advice and support to families reducing parental stressors.		Family First: we have successfully employed new recruits who will start the middle of November 2016 and we have been analysing data with the data analyst to ensure we utilise them in the most effective way.
Deliver effective parenting programmes that help families who need support.		In relation to PoPP groups we have run 9 groups from January to July 2016 and 6 from August – December and total attendance is 115 parents/carers. Retention rates for the January – July groups were approx. 83% for Triple p group (9 week programme) and 77% for Incredible Years (14 week programme). The programme is redesigning its evaluation methods to incorporate the pre and post SDQ scores and would be looking for a % of children to have moved out of clinical range to determine positive outcomes.
Provide support to kinship carers (relatives who are not parents who look after children) to keep children in the community.		We are currently developing our first East Renfrewshire Corporate Parenting Plan. This plan will be the main approach to delivering improved outcomes for Kinship Carers. Specifically the Children and Young People's Act 2014 Part 13 places duties on us and the guidance to implement has now been published for us to consider.
Improve planning for vulnerable children to provide them with a settled, secure, and permanent home and family.		Since January we have begun to work within the PACE programme approach. The aim is to reach permanent destinations for children within improved timescales. Currently the focus is on children who have been looked after for over 2 years at home and in particular those looked after for more than 5 years. We intend to make better quality and timeous decisions in relation to this cohort of 18 children and will report back on them specifically.

## Children's Outcome 2 - Children are Healthy, Active and Included

### 1. Create a sense of belonging and identity for children with their community

Action Description	Status Progress Bar	Notes & History Latest Note
Work with the most vulnerable children and families so they feel included and use local culture and leisure facilities.	5%	We have developed our first East Renfrewshire Corporate Parenting Plan and set out 6 themes to improve outcomes for looked after children. The Health and Wellbeing theme contains all culture and leisure actions with the aim of increasing inclusion and participation. The EEI scheme use will be reviewed to ensure take up and respond to gaps.

### 2. Improved maternal and child health and well-being

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
To ensure that women experience positive pregnancies which result in the birth of more healthy babies as evidenced by a reduction of 15% in the rates of stillbirths by 2015.	1.2	3.6	Green			The rate of still births for the calendar year 2014 was 1.2 per 1,000. For Scotland the rate for 2014 is 4.0 per 1,000
To ensure that women experience positive pregnancies which result in the birth of more healthy babies as evidenced by a reduction of 15% in the rate of infant mortality by 2015.	1.2	Data Only				The infant mortality rate for the calendar year 2014 was 1.2 per 1,000 - this compares favourably to the Scottish national rate of 3.6 per 1,000.
Percentage of newborn children exclusively breastfed at 6 - 8 weeks.	40.5%	36.8%	Green			The NHS GGC-wide figure was 31.3% and the national average for 2015/16 was 28.2% (ISD Oct 2016)
Breastfeeding at 6-8 weeks most deprived SIMD data zones	19%	29.3%	Red			We have seen an improvement in this area with 4 mothers of 21 exclusively breastfeeding ate 6-8 weeks and one mother mixed feeding.
Percentage of obese children in primary 1	3.1%	Data Only				Latest data published February 2016 by ISD corrects previously reported data from 2011/12. The data for 2014/15 comprises 2.0% obese and 1.1% severely obese children in Primary 1.

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Dental registration 3-5 years	90%	87.9%	Green			Year end figure of 90% represents 3,120 children NHSGGC value for same period is 94.3% (Published 21 June 2016 ISD)
MMR 24 months	96.9%	95.0%	Green			East Renfrewshire figure of 96.9% uptake compares with a NHSGGC uptake of 95.2% in 2015/16
MMR 5years	98.6%	95%	Green			East Renfrewshire uptake figure of 98.6% compares with a NHSGGC figure of 97% in 2015/16.
Low birth weight live singleton births as a % of total live singleton births	4.7%	2.2%	Red			The percentage of babies born with a low birthweight (under 2,500g) fell in the 2015 calendar year to 4.7% (38 of 810 births). In comparison the NHS GGC figure over the period was 6.1% and East Dunbartonshire was 4.6%. Reasons for low birthweight are complex and relate to both deprivation and maternal age. The current target is recognised as very ambitious and further work is being carried out to assess and review this.

Action Description	Status Progress Bar	Notes & History Latest Note
Work with Primary Care to ensure all children receive immunisation against preventable diseases.		Health visiting teams, midwifery, and pre school establishments work together to ensure childhood immunisation programmes are comprehensively implemented and target more vulnerable families to maximise uptake.
Work with local dentists and NHSGGC Oral Health services to prevent dental decay in children.		The National Childsmile Programme, established in 2011, continues to be implemented locally. Dental Health Support Workers are working to ensure that children are registered as early as possible with a local dentist. The Oral Health Directorate are visiting all local dentists to maximise their contribution to the prevention. In addition we are discussing with Oral Health Directorate a local targeted test of change - Childsmile Fluoride Varnish Nursery Programme.

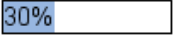
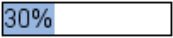


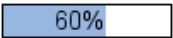
**3. Housing options that reduce the impact of homelessness**

Action Description	Status Progress Bar	Notes & History Latest Note
Work with key partners to review eviction policies to assist children to remain in their own homes.		Housing and HSCP staff will meet to discuss current practice and agree a joint approach to improve how we all support families at risk of eviction.









**Children's Outcome 3 - Children are Protected**

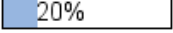
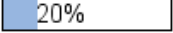
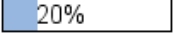
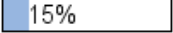
**1. Ensure that the community are ready to engage with children**

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
50% of looked after 13 and 14 year olds use universal young people's services		50%	Unknown	?	?	New indicator - baseline to be established through the new Corporate Parenting Plan – due to be approved by Council in December 2016





Action Description	Status Progress Bar	Notes & History Latest Note
Build on community engagement events that promote child safety and well-being so people have the confidence to make enquiries.		Local partners work closely with NHSGGC Child Safety Unit to ensure that child safety campaigns on unintentional injuries are promoted widely in East Renfrewshire.
Ensure the East Renfrewshire Champion's Board listens to (and acts upon) the views of the most vulnerable young people		Funding has been secured from the Life Changes Trust and the Champions Board establishment is almost complete.
Ensure all children and young people are aware of their named person who they can go to for advice and support.		Commencement of the Named Person Service has been delayed by the Scottish Government due to Supreme Court ruling. Commencement due to be enacted in August 2017.
Ensure all children and young people involved in Child Protection have a Child's Plan.		In East Renfrewshire all children subject to child protection measures have a multi-agency child's plan in place. We have reached and maintained our 100% target.
Strengthen the contribution that all staff make to the learning and development of health and well being.		Health Improvement team work with education services to support school based staff CPD to access training and resources around a range of health related behaviours in children and young people. This includes second hand smoke and raising the issue of tobacco and smoking, alcohol awareness training, oral health improvement and a programme of mental health and wellbeing training with partners in education psychology and young person services.


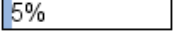
**2. Identify vulnerable children as early as possible and provide permanent destinations**

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Percentage of child protection re-registrations within 12 months of de-registration.	0%	17%	Green			Seven children were registered in Quarter 2, none had been on the Register in the previous twelve months.
Number of Foster Carers	16	16	Amber			The recruitment campaign has been running for 18 months but the assessment and approval process can take up to one year for each applicant. In recent weeks we have approved 5 new carers and reduced number of agency carers. We have reduced the number of children placed with agency carers by 5.
Number of Kinship Carers	25	23	Green			Although number of children requiring kinship care will increase those currently in placements will be reviewed to consider residence and permanence orders.
Balance of Care for looked after children: % of children being looked after in the Community	95%	Data only				Target will be reset after first year of PACE programme completion

Action Description	Status Progress Bar	Notes & History Latest Note
Increase the number of local foster and kinship carers.		The foster carer recruitment campaign has been developed and is being promoted widely throughout East Renfrewshire. We require carers for young people over 12 years, care leavers and sibling groups. As we assess more children for permanency, more extended families will be assessed for kinship.
Vulnerable children are identified as early as possible through the Named Person scheme and by introducing the Child's Plan, including for those involved in Child Protection		Although Named Person Service commencement date is pushed back to August 2017 Health visiting staff are trained in the approach that will be implemented. New born babies have a well being assessment completed by 8 weeks to ensure their wellbeing is promoted. If Adversities are identified a fuller My World Assessment is carried out and a child's plan drawn up.
Support staff to make plans for the care of children who require permanent arrangements		Since January we have begun to work within the PACE programme approach. The aim is to reach permanent destinations for children within improved timescales. Currently the focus is on children who have been looked after for over 2 years at home and in particular those looked after for more than 5 years. We intend to make better quality and timeous decisions in relation to this cohort of 18 children and will report back on them specifically.
Implement the Corporate Parenting Plan and ensure that the East Renfrewshire Champions' Board listens to and acts upon the views of the most vulnerable young people, which will improve opportunities for looked after young people.		The first East Renfrewshire Corporate Parenting Plan is developed and due to be approved by end of 2016. The plan will be reported on through the Children's Planning structure and the IJB and Education Committee. The Champions Board will also oversee the implementation of the plan over the next year.

**3. Lessen the impact of risk on looked after children by offering them opportunities to increase their resilience.**



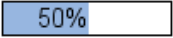
PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Percentage of children looked after away from home who experience 3 or more placement moves	1.1%	11%	Green			The stability of placement for looked after children, an important measure of attachment and future outcomes, has significantly improved on the 2014/15 quarterly average with those experiencing 3 or more placements falling to 1.07 per cent (from 4.05%).
Child & Adolescent Mental Health - longest wait in weeks at month end	22	18	Red			Child and Adolescent Mental Health service longest monthly waits have ranged from 18 to 22 weeks over the last 6 six months Last reported longest waiting time was 22 weeks.

Action Description	Status Progress Bar	Notes & History Latest Note
Support our looked after 13 and 14 year olds into universal services.		The Corporate Parenting Plan outcomes will increase looked after young people's use of universal services and we will report on this through that route.
Widen the range of groupwork programmes to ensure they meet the needs of looked after children.		The Corporate Parenting Plan outcomes will increase looked after young people's use of universal services and we will report on this through that route.

**Criminal Justice Outcome - Community Safety is Safeguarded**

**1. Work with people at risk of re-offending so they get the right help when they need it.**

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
% of offenders completing community based sentences whose risk has reduced			Unknown	?	?	New Indicator - Baseline and target to be set

Action Description	Status Progress Bar	Notes & History Latest Note
Develop a local transition plan for the new national Community Justice Model with our partners.		We have held two development sessions with key stakeholders and partners across the community justice partnership to support the development of the local improvement plan. A further session is planned for November. An early intervention planning event is due to take place on the 27th of September bringing the Crown Procurator Fiscal Service and North Strathclyde Community Justice partners. Final Plan is due by end of March 2017.
Use offending /reoffending risk assessment tools to identify need and reduce harm in local communities.		An initial screening tool LSIR screening version is completed for every Criminal Justice Social Work court report we receive. If an individual is subsequently made subject to community based supervision through a community Payback order (CPO) then a full LS-CMI risk assessment is undertaken by their supervising officer. This assessment will include a risk management plan and assesses the level of harm the individual presents to the community. The purpose of this is to identify need and reduce harm in local communities. Individuals released from prison who are subject to a prison licence requirement will have their LS-CMI updated within 3 months of release. The full LS-CMI Risk Assessment tool is therefore completed for all people subject to supervision or licence. More specialist tools such as Stable and Acute 2007 (SA07) and Risk Matrix (RM 2000) are used for registered sexual offenders subject to orders or licence. Regular Quality Assurance exercises are undertaken by the team manager and Service manager. There are also regular MAPPA audits of cases undertaken by the MAPPA unit. The next Quality Assurance exercise in November will focus on CPO and LS-CMI.
Provide diversionary activities, particularly for young people and women at risk of offending / reoffending.		In terms of young people, links have been established in the past year with the Youth Intensive support Service (YISS). The CJ team now has a worker responsible for being the link between Youth and Adult services. This worker will look at developing diversionary activities. These have included young people accessing an Ocean Youth Trust programmed. The SW also attends Young Persons Referral Group (YPRG) where young people who are referred can be linked to diversionary activities and sign posted to youth services such as addiction and mental health. Women at risk of reoffending are linked to the services they require. This is generally identified at the assessment stage and becomes part of their Risk management plan. Links to addiction and mental health services are most commonly used. We also have access to a woman's group in Renfrewshire which provides diversionary activities and supports. We also link with the SHINE mentoring service which focusses on woman at risk of custody. This services employs a whole systems approach to ensure woman attend appointments and do not breach their order.



Action Description	Status Progress Bar	Notes & History Latest Note
		A pilot bail supervision scheme run by SACRO set up, across the North Strathclyde Community Justice Authority (NSCJA is in its infancy). East Renfrewshire CJ Team access this service through Paisley sheriff court and have had one woman referred in last 6 months. This service has been set up alongside partners in Renfrewshire.

**2. Target offenders at risk of re-offending so that fewer people go to or return to prison.**

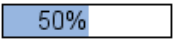
PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Community Payback Orders - Percentage of unpaid work placements commencing within 7 days	68.4%	80%	Red			Thirteen of nineteen Orders commenced within 7 days in Qtr 2. The off target Orders were due to a variety of reasons including holidays, health issues, appeals or Orders waiting for existing Orders to end (new Orders can't commence until existing Orders are completed).
Community Payback Orders - Percentage of unpaid work placement completions within Court timescales.	85.7%	80.0%	Green			Significant improvement has been achieved completing Orders within Court timescales in Qtr 2, rising above target to 86% from 64% in Qtr 1. This Quarter twelve out of fourteen Orders were completed. The reasons for not completing Orders on time in Qtr 2 were due to client issues including work commitments and non-compliance.
Community Payback Orders - Percentage of new Orders allocated within 24 hours	81%	100%	Red			Seventeen of twenty one new Orders were allocated within 24 hours in Qtr 2.
Criminal Justice - Did your Order help you look at how to stop offending?	95%	100%	Amber			Results of survey forms from 2012-2016 gives baseline figure of 95% positive response.

Action Description	Status Progress Bar	Notes & History Latest Note
Deliver accredited programmes aimed at reducing reoffending.		All accredited programmes used by offenders subject to supervision in East Renfrewshire are delivered by our partners in Renfrewshire criminal Justice services. These include Constructs- positive steps to prevent re-offending and Moving Forward making Changes (MFMC) . An area for development is in looking at accessing a Domestic Abuse programme that staff can use with perpetrators of this type of offending. We are in the initial stages of identifying a programme we can use locally.
Work with local partners to ensure a range of beneficial unpaid work placements are taken up.		A number of new initiatives involving the unpaid work service have been established. In particular, strong links have



Action Description	Status Progress Bar	Notes & History Latest Note
		<p>been made with Voluntary Action East Renfrewshire. Other initiatives have included developing a garden tidy up scheme for elderly residents and focusing on assisting environmental services in handling complaints from the community on fly tipping. Also, a number of service users have continued to undertake voluntary work locally when they completed their order and some have remained as volunteers at personal placements. This is an aspect of the service we plan to develop in the longer term</p> <p>Support from placement providers in the local community is critical to the ongoing provision of unpaid work placements. Placement providers include: Barnardos, Capability Scotland, Crossreach and local resource centres. We aim to develop availability of placements over 2016-17.</p>

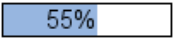
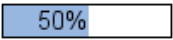
### National Outcome 1 - People are active and optimise their health and well-being.

#### 1. Improved access to good quality information

Action Description	Status Progress Bar	Notes & History Latest Note
Deliver targeted information campaigns that increase awareness of wellbeing and reduce health risks.		Health Improvement team co-ordinated local events with partners in October for the Mental Health Arts and Film festival to raise awareness of mental health and wellbeing.



#### 2. Increased residents participation in activities that enable them to make positive life choices and improve their health.

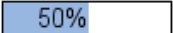
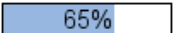
PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
People reporting 'staying as well as you can' needs fully met (%)	75.2%	77.0%	Green			In Qtr 2 of the total 214 valid responses 161 reported their needs fully met with a further 50 reporting their needs partially met. Three (1.4%) responses reported unmet need in this regard.

Action Description	Status Progress Bar	Notes & History Latest Note
Deliver local public health programmes in partnership with others.		A programme of chair based exercise is being delivered by health Improvement team for older adults in Barrhead Foundry and Eastwood Health and Care Centre. A beginners group and maintenance group is delivered weekly and participants are encouraged to practice exercises outwith the group and are supplied with exercise bands and information to enable this. The health Improvement Team also deliver strength and balance exercise sessions which aim to enable older adults to be more confident about participating in walking programmes and to build their general strength.
Build community networks, assets and skills in partnership with the third sector and community groups within communities to enable residents to take action to improve their own health and wellbeing.		Several walking programmes have been established and are being supported across the authority. The Walking Co-ordinator in Health Improvement team recruits volunteer walk leaders and provides training in leading health walks, risk assessment and first aid. The co-ordinator also supports a network of partners who provide walking opportunities and organises regular walking events such as Big Fit Walk, East Renfrewshire Walking Festival and Winter Wander A weekly activity group 'Stride' has been set up in Neilston which provides activities and opportunities for discussion of health and wellbeing issues.







## National Outcome 2 - People live as independently as possible

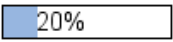
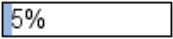
### 1. Effective planning and processes that support people have choice and control

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
People reporting 'living where you want to live' needs fully met (%)	77.9%	80.0%	Green			In Qtr 2 of the total 208 valid responses 162 reported their needs fully met with a further 40 reporting their needs partially met. Six (2.9%) responses reported unmet need in this regard.



Action Description	Status Progress Bar	Notes & History Latest Note
Reduce our lengthy assessment process to release time for support planning with people and their families.		Work is now complete on the new assessment paperwork reducing this from 24 pages to 3 pages. Training is scheduled with frontline managers for the start on November 2016 and there will be a 6 month roll-out period prior to review.
Pilot and report on a new way for people to take control over care home support.		Participants' outcomes are being achieved through using strength-based, person-centred planning approach and co-production. Ongoing care home workforce development and further 'My Life My Way' pop ups planned. Final evaluation process started. Project featured as example of social work good practice on STV news.

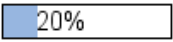
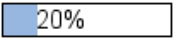
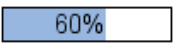
### 2. Improved pathways for people going into and coming home from hospital.

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Delayed discharge: people waiting more than 3 days to be discharged from hospital into a more appropriate care setting	3	0	Red			Indicator changed from people waiting in excess of 14 days to 3 days. From July 2016 the following patients are no longer recorded as delayed discharges: patients delayed for healthcare reasons or in non-hospital locations. Patients discharged within three days of the census date are included in the number of delays count which have been excluded from census figures since 2006.
Delayed discharges bed days lost to delayed discharge for patients aged 65+ (incl AWI's)	124	251	Green			Provisional figure based on data for first two months of Qtr 2
Mental health hospital admissions (age standardised rate per 1,000 population)	2.6	2.3	Amber			Rates (age standardised) to March 2015 published May 2016. Data for 2015/16 not currently available. Latest data for 2014/15 corresponds to 256 hospital admissions during the year.

Action Description	Status Progress Bar	Notes & History Latest Note
Increase the number of community staff working in hospital to get people home quicker and with the right support.		Through the Safe and Supported programme, a hospital connector post is currently out to advert and will be working at the Queen Elizabeth University Hospital. A 'hospital to home' third sector role has been recruited to and is working at the Royal Alexandria Hospital.
Improve access to home care outwith normal working hours.		As the full reablement homecare service is re-designed a set of integrated and modernised processes will be designed between RES clusters and Homecare. This will include reviewing our current out-of-hours arrangements. Home care managers are authorised to increase care packages out of hours to prevent hospital admissions





### 3. More preventative approach helping people stay independent

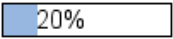

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Percentage of time in the last six months of life spent at home or in a homely setting.	84.2%	92.1%	Amber			The methodology on how the measure is calculated compared to previous years' has been revised (August 2016) and the data from 2011/12 to 2014/15 has been amended accordingly. Previously only time spent in major acute hospitals was counted under the revised methodology all bed days in acute and community hospitals, psychiatric hospitals and geriatric long stay facilities is counted.

Action Description	Status Progress Bar	Notes & History Latest Note
Work with people to plan ahead for changes to their long term conditions.		Comprehensive review of ANP service undertaken and service redesigned to improve the service. Work underway to mainstream the anticipatory care planning approach to District Nurses. Next steps include introducing the approach to wider social work staff.
Improve people's first contact with health and social care by providing the right information, advice and support		The Community Led Support programme has several working groups underway identifying opportunities around a physical front door hub; a pop up front door hub; and a virtual front door. These will all link together to provide appropriate, relevant and timely information, advice and support.
Offer a range of prevention activities to vulnerable residents to protect them from financial harm.		Improved Adult Protection response to allegations of financial harm introduced; with operational and Assisted Technology staff working with ERC Trading Standards.



### National Outcome 3 - Positive Experiences and Outcomes


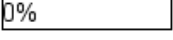
#### 1. Create strong feedback loops and act on suggestions and complaints

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Percentage of HSCP (NHS) complaints received and responded to within timescale	50%	70%	Red			Ten complaints in total in the first six months of 2016/17, five answered within 20 days
Percentage of HSCP (local authority) complaints received and responded to within timescale	60%	100%	Red			Seventeen complaints in total in the first six months of 2016/17, ten answered within 20 days





Action Description	Status Progress Bar	Notes & History Latest Note
Promote feedback and comments in centres and reviews.		Feedback has been actively sought on people's experience of the new health and care centre this has informed way finding and signposting. For second half of year focus will be on wider customer experience and we will review complaints and feedback processes.
Develop more digital opportunities for feedback.		HSCP website lead is currently scoping options for a dedicated HSCP website which will include new opportunities for digital engagement with the public. Virtual front door group recently established as part of Community Led Support programme to scope new ways of engaging with the public using digital approaches.

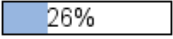

#### 2. Ensure dignity through valuing what matters to people

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
People reporting 'being respected' needs fully met (%)	95.2%	94.0%	Green			In Qtr 2 of the total 209 valid responses 199 reported their needs fully met with a further 9 reporting their needs partially met. One respondent (0.5%) reported unmet need in this regard.







Action Description	Status Progress Bar	Notes & History Latest Note
Encourage all staff to have person-centred conversations		New paperwork developed to support staff. Training on Effective Conversations carried out across teams and Managers taking more active role towards person-centred approach.
Support person-centred practice through learning and development plan.		Learning and Development plan includes a number of calendar events in support of person centred planning that will take place over next 6 months.

### 3. Ensure people have a positive first contact with the HSCP


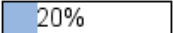
PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Primary Care Mental Health Team wait for referral to assessment within 4 weeks (%)	18%	100%	Red			Latest available data on Sharepoint. Some delays due to migration to EMIS system.
Primary Care Mental Health Team wait for referral to treatment appointment within 9 weeks (%)	33%	100%	Red			Latest available data on Sharepoint, some delays due to migration to EMIS system.

Action Description	Status Progress Bar	Notes & History Latest Note
Review implementation of single point of contact / request for assistance team.		Links developed between HSCP and ERC's Customer First team to as part of Community Led Support initiative.
Implement integrated reception services for new Eastwood health and care centre		Main reception services in Eastwood Health and Care Centre are now fully integrated. Specialist clinical zones within the Centre continue to be staffed by NHS personnel.

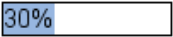

### National Outcome 4 - Improving the Quality of Life of Service Users.

1. Improve access to a range of rehabilitation, self management and recovery services						
PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Drug-related deaths per 100,000	8.7	4.6	Red			The most recent data shows there were 8.7 deaths per 100,000 population in 2015. In comparison the NHS GGC figure was 19.4 deaths and East Dunbartonshire was 8.5 deaths.
Percentage of those whose care need has reduced following re-ablement.	67%	50%	Green			Of the 179 Reablement discharges, 94 (53%) were discharged with no services and a further 25 (14%) were discharged with reduced services. This equates to 67% of service that has either stopped or decreased. This has come down from the previous figure which was 70%. The explanation is that we are providing reablement service to more people and we are being less selective. This figure is expected to reduce as the service grows.
Alcohol brief interventions - Brief interventions delivered	50	83	Red			End of year 2015/16 outcome saw us deliver 528 ABI's on a target of 419, a 26% increase on target. A total of 50 ABI's were delivered in Qtr 1 on a target of 83. Performance around this indicator tends to pick up in the latter part of the year due to data lag. The annual target of 419 weighted across Quarters.



  

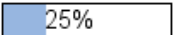
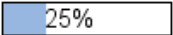
Action Description	Status Progress Bar	Notes & History Latest Note
Implement the new alcohol and drug Recovery Outcome Web Tool which helps people plan for their recovery and charts their progress.		The new alcohol and drug recovery outcome web tool was implemented in the service from April 1st 2016. 51 service users completed a baseline outcome assessment with 19 follow up reviews completed. All service users reported a positive change across the following outcome areas : Substance Use, Self Care and Nutrition, Relationships, Physical Health and Wellbeing, Mental Health and Emotional Wellbeing, Occupying Time and Fulfilling Goals. No or small change was reporting to their Housing and Independent Living, Offending, Money Matters & Children.
Implement home care redesign including re-ablement.		Since 31 March 2016 there have been a number of key developments: Care at Home contract has been awarded and a new framework is in place. Roll out of CM2000 to new providers underway. Operating model approved by DMT in March 2016. Approach to reablement roll-out has been agreed and project team in place. Transition to a reablement by default model will be on a cluster by cluster basis - Levern Valley Cluster will be first followed by Eastwood Cluster. Key stakeholder meetings have been established. HR support in relation to roll out of reablement including rota changes.



Action Description	Status Progress Bar	Notes & History Latest Note
Increase the use of technology as part of care and support planning.		Standard provision of Telecare free for 6 weeks post hospital discharge embedded and now extended to all new Telecare installations. Tec demonstration room established within carers centre and 'lend & trial' initiative commenced. New promotional materials including posters, leaflets and video resource in progress and updated training and awareness raising materials developed and ready to be delivered to staff and partner organisations. Planning underway for Digital Health and Care events in December 2016 to take place in both health & care centres. Initial planning work carried out to embed Tec across all areas of HSCP (linkages identified to HSCP strategic service review and Community Led Support work). 1000+ new Telecare service users during year one of 3 year tec programme. Expected target of 1450 at end of year 2
Change mental health service delivery to have a greater focus on supporting people with their recovery and quality of life.		<p>Over the past 12 months we have started to move towards the implementation of the following service principles via team development sessions, staff training, engagement in wider community led supports groups and participation in the local PSP:-</p> <p><u>Service Principles of our Recovery Programme</u></p> <ul style="list-style-type: none"> <li>• Change the balance of power</li> <li>• Standardise what makes sense</li> <li>• Customise to the individual</li> <li>• Collaborate and cooperate</li> <li>• Eliminate the walls</li> <li>• Assume abundance- community and family assets</li> <li>• Move from "what is the matter with you?", to "what matters to you?"</li> </ul> <p>Two specific initiatives of note that support our Recovery Program are our Peer Volunteer, a former patient who is mentored by one of our Health Care Support Workers, who now visits and supports new patients and our weekly development session with the Employability Worker from RAMH.</p>


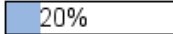
## 2. Support people to engage in meaningful activities

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
People reporting 'having things to do' needs fully met (%)	67.8%	62.0%	Green			In Qtr 2 of the total 214 valid responses 145 reported their needs fully met with a further 57 reporting their needs partially met. Twelve (5.6%) responses reported unmet need in this regard

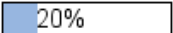
Action Description	Status Progress Bar	Notes & History Latest Note
Develop access to a wider range of volunteering, work and leisure activities for people with a learning disability.	 25%	Greenhouse Café in Eastwood Health and Care Centre provides a full spectrum of training for people with learning disabilities, from employment coaching to building on-the-job skills. The Greenhouse Café; is in the process of being accredited by the Scottish Qualifications Authority to ensure that it will be able to provide Scottish Vocational Qualifications. Other opportunities include a successful jewellery group. The Melo Velo service, set up and run by adults with learning disabilities, continues to offer the sale and servicing of bicycles and held a drop-in for the public and staff in September 2016.
Develop access to a wider range of social, community and leisure activities for older people and people with long term conditions.	 25%	Community support groups for people with dementia have been established in Barrhead and Busby. 'Memory Lane' encourages volunteers to take a lead role in providing activities and information sessions for people with dementia and for older adults generally. The groups are supported in partnership with others e.g. Community Planning team. It is planned that this model will be rolled out in other areas particularly more remote areas or those that are identified as having few opportunities for older adults in their community.

### ***Local Outcome 1 - Older People and People with LTC Feel Included***


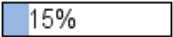
#### ***1. Connect people to opportunities in their local communities***

Action Description	Status Progress Bar	Notes & History Latest Note
Review, develop and test community connector approach to help people access a wider range of community supports.	 10%	Four Link workers have been recruited who will work with and be based in GP Practices that are keen to progress prevention and early intervention via social prescribing.
Develop web and other digital methods of signposting people to local opportunities.	 20%	Digital hub is being explored as part of work on self-directed support Voluntary Action maintain a searchable data base.

#### ***2. Support people and communities to participate in planning, development and delivery of services.***



Action Description	Status Progress Bar	Notes & History Latest Note
Hold local events to engage with people about how we shape health and care advice, support and services in their local communities.	 20%	Series of events held over summer to engage with local people about community led support Reports of these events are available to view

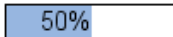
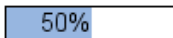
### 3. Work with communities to widen range of opportunities and services.


Action Description	Status Progress Bar	Notes & History Latest Note
Work with the Culture and Leisure Trust to develop additional accessible opportunities.		Initial discussions have taken part with Community leisure Trust
Work with the third sector and community organisations to increase opportunities in local communities.		Voluntary Action third sector interface are leading this work as part of the community led conversations programme.

## National Outcome 5 - Reducing Health Inequalities


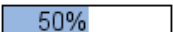
### 1. Mitigate the impact of inequalities by providing targeted interventions

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Number of smokers supported to successfully stop smoking in the most deprived areas.	5	7	Red			Target for quarter 1 2016/2017 is 7. Actual recorded quits at 12 weeks in the 40% most deprived are 5 for the first quarter (source SharePoint central information system). Annual target has been increased from 21 to 28 for the current year (7 per quarter). There has recently been a change in how quits are recorded (details using PCR system are input at pharmacies) which is causing some challenges to ensure all quits are recorded properly. .

Action Description	Status Progress Bar	Notes & History Latest Note
Develop tailored health improvement programmes in communities with greater health inequalities.		Smoking cessation staff have set up an information point in Barrhead Foodbank to raise awareness of Smokefree Services and to signpost clients to other health and wellbeing opportunities using health behaviour change approach. An information point has also been established in Barrhead Health and Care Centre. Worked in partnership with Auchinback Active, Barrhead to develop a 'Clean Air' event which prohibited smoking in children's outdoor play area.
Target health improvement programmes in the workplace on our lower paid staff and others at particular risk.		As part of Healthy Working Lives a survey of manual workers was undertaken at ERC Thornliebank Depot to establish health priorities. Subsequently delivered 39 health check appointments for manual staff/shift workers. These checks resulted in 8 referrals to GP for high blood pressure, 3 for high cholesterol and 2 emergency GP appointments were made on the day. Health information was also made available to staff.



Signpost and refer people to interventions and support such as money advice.		Health Improvement team delivered Health Behaviour Change Training June 2016 - the course provides participants with tools to sensitively refer people to interventions including money advice. The Health Improvement Directory provides information on available services. Health Behaviour training is run locally in ER at least once per year and available across NHSGGC on a monthly basis. Money advice and rights team record referrals for money advice
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## 2. Work with communities to tackle health inequalities

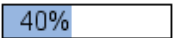
Action Description	Status Progress Bar	Notes & History Latest Note
Develop detailed community and local area profiles.		Community Planning Partners are working together to develop detailed community and local area profiles with a focus on inequalities. The Community Planning Partnership is developing a shared approach to community engagement.
Build community networks, assets and skills in partnership with the third sector and community groups within communities to enable residents to take action to improve their own health and wellbeing.		Several walking programmes have been established and are being supported across the authority. The Walking Co-ordinator in Health Improvement team recruits volunteer walk leaders and provides training in leading health walks, risk assessment and first aid. The co-ordinator also supports a network of partners who provide walking opportunities and organises regular walking events such as Big Fit Walk, East Renfrewshire Walking Festival and Winter Wander. A weekly activity group 'Stride' has been set up in Neilston which provides activities and opportunities for discussion of health and wellbeing issues.

## National Outcome 6 - Carers are Supported



### 1. Ensure carers have access to information and advice

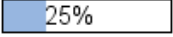
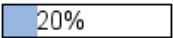
Action Description	Status Progress Bar	Notes & History Latest Note
Review Carers' Centre support services in light of Carers Rights legislation.		We are reviewing current arrangements in light of legislation in partnership with Carers Centre. Carers are a key part of the community led support activity and through collaboration with Carers Centre and Voluntary Action we are designing the carers contribution to support planning.
Publish a short breaks statement that gives carers information about the wide range of different supports available.		Work to consider this has commenced building on previous Carers Centre work on flexible short breaks and learning from redesign of day services.

### 2. Offer carers the opportunity to develop their own carer support plan.

Action Description	Status Progress Bar	Notes & History Latest Note
Work with carers to design and implement a new carers' support plan for use with individual carers.		Through the Community Led Support initiative we will be testing in the hubs what the carers assessment and adult carers support plan could look like.





### 3. Work in partnership with carers

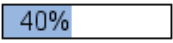

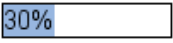
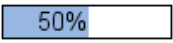
PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
People reporting 'quality of life for carers' needs fully met (%)	68.9%	70%	Green			In Qtr 2 of the total 167 valid responses 115 reported their needs fully met with a further 43 reporting their needs partially met. Nine (5.4%) responses reported unmet need in this regard.

Action Description	Status Progress Bar	Notes & History Latest Note
Work with carers to update our local carers' strategy in line with legislation		In preparation for the implementation of the Act in 2018 we are working with carers Centre to engage and consult stakeholders on the Acts key provisions. .We have discussed test of change with Scottish Government Carers' policy leads. We are working with the GG&C corporate carers group to explore how the specific duty to consult with carers prior to discharge could operate. We have located this within our Safe and Supported work stream.
Include family carers in developing the new approach to planning with people and their families.		Family carers are actively involved in a number of areas including redesign of respite arrangements following decision of Quarriers' to withdraw from Chavy Down service.

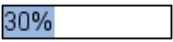
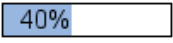
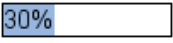
## National Outcome 7 - People are Safe from Harm

### 1. Ensure all adults at risk of harm are provided with appropriate interventions

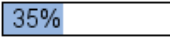




PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
People reporting 'feeling safe' needs fully met (%)	85.4%	84.0%	Green			In Qtr 2 of the total 213 valid responses 182 reported their needs fully met with a further 25 reporting their needs partially met. Six (2.8%) responses reported unmet need in this regard.
% Change in women's domestic abuse outcomes	62.5%	Data Only				62.5 % women recorded an improvement in their outcome star overall with 37.5 % showing a large increase.90% of children and young people showed an increase in their outcome star overall.



Action Description	Status Progress Bar	Notes & History Latest Note
Extend multi agency arrangements with police, health and prisons which assess and manage sex offenders to include serious and violent offenders		The MAPPA extension which was introduced in April 2016 to include those offenders, who by reason of their conviction are assessed as posing a Risk of Serious Harm to the public (RoSH), is now established with 2 such referrals being received in East Renfrewshire. Both referrals were made by The Scottish Prison Service (SPS) for individuals who were being considered for release on parole licence. MAPPA 2 meetings were held to consider Risk Management plans for release, however, in both instances, parole was not granted.
Raise awareness within communities so they can identify adults' at risk of harm and have confidence to make a referral.		Public Information events held in Auchenback Community Centre and The Foundry to promote the work of the ASP Committee and how to share concerns. Further promotion of information relating to the risks of Financial Harm and the National "See Something – Say Something" Campaign.
Work in partnership with adults at risk of harm to assess their needs and provide appropriate support.		All adults subject to adult protection investigations have their views taken into account The Advocacy Project have been asked to independently seek the views of a number of service users who have been involved in the adult protection process. The findings of this report will be used to inform practice
Provide a range of services for women who experience domestic abuse including advice and information, outreach support and refuge accommodation services.		The Domestic Abuse Service has been operational for two years with considerable development progressed to ensure that the appropriate support is available and accessible to women, children and young people affected by domestic abuse. Partnership working across the Domestic Abuse Task Force, Police Scotland and Request for Assistance Team continues. During the first quarter, ERDAP supported 92 women, children and young people within our three core services with 171 contacts made to our help line and drop in. Positive working relationships continue evidenced by the demand for services across the quarter with 32 new referrals received.

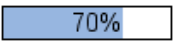
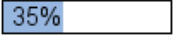


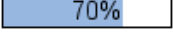

## **2. Ensure robust clinical and care governance arrangements are in place**

Action Description	Status Progress Bar	Notes & History Latest Note
Develop and implement self-evaluation action plan		Self-evaluation action plan for community care developed. A number of actions have been progressed including changes to assessment. A separate action plan is being developed following the supported self-assessment in addiction services.
Carry out a series of clinical and care audits.		CGSU support the Nursing Core Audits across Addictions, Mental Health and District Nursing. This includes monthly record keeping and medication audits. A hand washing audit will be carried out in November. Senior Practitioners undertook an audit of child protection paperwork earlier this year
Undertake risk based contract management		Commissioning and Contracts Team actively monitor and manage provider risk. Reporting to Clinical and Care Governance Committee will commence in second half of year.





### National Outcome 8 - Staff feel Engaged with the work they do

1. Empower staff to use initiative, creativity and innovation		
Action Description	Status Progress Bar	Notes & History Latest Note
Roll out evidence practice model in Children and Families.		Children and Families support team and health visiting staff have participated in Psychology of Parenting Programme training. Children and Young People's team have undertaken bespoke <i>Time to Grow</i> training. A calendar of training has been commissioned for community social workers from Centre for Excellence for Looked After Children in Scotland including trauma and attachment.
Roll out new practice model in Health and Community Care.		Initial work has been undertaken with the National Team for Inclusion to develop a new way of working . Training for staff has included Effective Conversations.
Encourage, promote and implement staff governance standards in relation to communications.		Leadership event held in May 2016 for managers across HSCP in relation to Staff Governance Standards. All service changes use the standards as a benchmark and early engagement with TU's and staff. Service redesigns for 2015 /16 demonstrate this in Kirkton and Care at Home services.
Staff are encouraged to generate suggestions and new ideas.		Staff suggestion box in place. In addition annual HSCP staff engagement event focussed on " good ideas". The Children's Services redesign in 2015/16 worked together with employees to look at how improvements could be made to delivering Children Services. Leading a new model of intervention.
Develop and support staff to work in new ways e.g. person-centred care, prevention, early intervention, etc.		Work in relation to above is ongoing. Children Services and Health & Community Care have focussed on targeted intervention, with L&D and OD initiatives in place to develop employees in relation to this respect. Children Services to redesign intensive support to look at early intervention. NTDI 'My life my way' programme underway in Community Care to look at new ways of working.


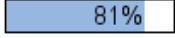


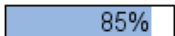

2. Involve staff in service changes and reviews						
PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
% Staff who report their 'views, ideas and opinions are listened to' in Staff Survey	57%	Data Only				57% of respondents agreed with this - a 2% points increase on previous survey result

Action Description	Status Progress Bar	Notes & History Latest Note
Continue to involve staff in Children's Services Redesign and implementation.		Three participative workshops have been held with children and families staff. Staff have presented on service developments and examples of good practice
Develop staff and managers skills in self-evaluation.		In addition to carrying out the local self-evaluation, members of the HSCP shadowed colleagues from the Council's Evaluation and Improvement Team.
Promote team working ethos within the HSCP, with external partners and service users encouraging the HSCP values and behaviours in line with the HSCP vision.		Work ongoing in relation to this. All teams have regular meetings and individual development plans will support this objective Update my life my way. Team development plans continue to be provided when identified, significant support to children and families service redesign as well as staff events support offered to CELCIS to run staff reference groups. Day services within Health and Community Care have been doing joint piece of work with the 3rd sector called 'my life may way' in order they can work together to support service users and offer them choice.
Develop HSCP communication and engagement plan.		Draft communication and engagement plan has been developed. This needs further work in 2016 /17 based on staff feedback and engagement with Heads of Service.
Maintain and promote Healthy Working Lives (HWL) Gold Award.		We have successfully maintained the Healthy Working Lives Gold Award (ERC & HSCP) after an annual review in October 2016. The HWL group have delivered a broad programme of activity during the annual review period including health activities, training and policy review. During this period we have targeted work with manual staff e.g. health checks/health information as well as universal activity and information for all staff members.
Develop and support staff to work in new ways e.g. person-centred care, prevention, early intervention, etc.		Work in relation to above is ongoing. Children Services and Health & Community Care have focussed on targeted intervention, with L&D and OD initiatives in place to develop employees in relation to this respect. Children Services to redesign intensive support to look at early intervention. NTDI 'My life my way' programme underway in Community Care to look at new ways of working.









### 3. Support staff in continuous professional development and professional registration

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Percentage of NHS HSCP Staff with an e-KSF (Knowledge and Skills Framework) review in last 12 months	40%	80%	Red			This is the mid year figure .83% (185 staff) of the 222 NHSGGC HSCP staff had a completed and signed off review at 30 April 2016. The Board-wide figure was 66% at this point in time.
Percentage of HSCP local authority staff with Performance Review and Development (PRD) plans in place	91%	100%	Amber			Whilst the overall completion rate for 2015/16 stands at at 91% across the HSCP PRD completion rates vary: Health & Community Care staff - 95%; Children & Families - 91%; and Strategic Services staff - 87%



Action Description	Status Progress Bar	Notes & History Latest Note
Provide training to all new managers, team leaders and supervisors on NHS and ERC HR policies and procedures.	 95%	HR run regular coaching sessions for managers as required. Ad hoc sessions took place throughout 2015/16. New NHS training programme for managers/team leaders due to be rolled out late summer/early autumn 2016. Council Training sessions for new Maximising Attendance policy August 2016
Carry out a Training Needs Assessment (TNA) and develop programme to meet identified needs.	 81%	All employees receive development opportunity through KSF, PRD and team development.
All staff have access to learning and development information.	 95%	Calendar is available via intranet and learning and development team have published a regular newsletter. This has continued through 2015/16. Work to increase NHS staff access and uptake is ongoing.
All staff are supported to meet and maintain minimum registration requirements.	 100%	HSCP plan in place in order to support nurses with revalidation. Range of training offered to ensure PRTL. Registration requirements are scoped by L&D team. New awards offered as a result of registration requirements or service priorities e.g. SVQ 2 children and young people and PDA in tele health care. SVQ 2 and 3 in "care" delivered by L& D Team.
Every staff member will have a PRD / KSF review with clear key objectives and a personal development plan in place.	 85%	KSF figure currently 40% PRD figure 90% Plan in place to get KSF back up to 80% by end of 2015/16. Work ongoing to support Learning Disability Services to improve KSF/PDP completion.
Learning and Development / Organisational Development will deliver team development events to develop team plans.	 90%	Team development events delivered as requested by L&D team in partnership with OD advisor. There have been a wide range of such events in Children Services. This has continued. OD Advisor post remains vacant.

#### 4. Improve sickness absence levels across the HSCP











PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Absence: average days lost per employee (all staff LA)	1.15	0.82	Red			Qtr 2 2016/17 average.
Absence: days lost for long-term absence as percentage of all days lost (all staff LA)	66.4%	Data Only				1,454 days lost to long term absence from a total of 2,190.5 total days lost in Qtr 2.
Absence: days lost for short-term absence as percentage of all days lost (all staff LA)	33.6%	Data Only				A total of 736.5 days were lost in Quarter 2 to short term absence from a total of 2,190.5 lost working days.
Sickness absence (%) NHS	5.9%	4.0%	Red			Qtr 2 2016/17 average.

### National Outcome 9 - Effective Resource Use

#### 1. Ensure that budgets are effectively managed by enabling access to accurate, real time financial information

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
Primary care prescribing performance - cost per patient (weighted)	£15.91	Data Only				The HSCP average for August 2016 was £15.33 per patient.

#### 2. Local Government Benchmarking Framework

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes
The gross cost of "children looked after" in residential based services per child per week £	£11023	Data Only				Remained 2nd highest cost in Scotland fir 14/15. Scottish average was £3,133.
The gross cost of "children looked after" in a community setting per child per week £	£190	Data Only				5th lowest cost in Scotland. Scottish average was £278.
Home care costs for people aged 65 or over per hour £	£22	Data Only				ERC ranked 18th in Home care costs for people aged 65 or over per hour £ in 14/15, compared with 8th in 13/14
Direct payments spend on adults 18+ as a % of total social work spend on adults 18+	5.4%	Data Only				ERC ranked 4th in Direct payments spend on adults 18+ as a % of total social work spend on adults 18+ in 14/15, compared with 11th in 13/14
Net Cost of Residential Care Services per Older Adult (+65) per Week	£364	Data Only				ERC ranked 11th in Net Cost of Residential Care Services per Older Adult (+65) per Week in 14/15, compared with 14th in 13/14