



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	28 September 2016
Agenda Item	11
Title	Performance and Exception Report 2016/17 Quarter One
<p>Summary</p> <p>This report provides Performance and Audit Committee with updates on performance indicators for the first quarter of 2016/17 (April 2016 – June 2016), it also includes updates on data from 2105/16 where this has become available since the end of year report. Exception reports are included, where performance is off course to meet target, giving details of actions or improvement work underway.</p>	
Presented by	Candy Millard, Head of Strategic Services
<p>Action Required</p> <p>Performance and Audit Committee is asked to note and comment on the performance report and improvement actions.</p>	

BLANK PAGE

EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP

PERFORMANCE & AUDIT COMMITTEE

28 September 2016

Report by Julie Murray, Chief Officer

PERFORMANCE AND EXCEPTION REPORT 2016/17 QUARTER ONE

PURPOSE OF REPORT

1. This report provides Performance and Audit Committee with updates on performance indicators for the first quarter of 2016/17 (April 2016 – June 2016) and updates on 2105/16 performance published since the end of year report. Where the HSCP is at risk of not achieving the target this report gives details of actions or improvement work underway.

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the performance and improvement actions.

BACKGROUND

3. At its last meeting Performance and Audit Committee received a report on Performance Reporting for 2016/17. It was suggested that the Performance and Audit Committee receive an update on available data at each meeting with exception reporting for areas where the HSCP is at risk of not achieving the target.
4. This report gives an overview of performance highlights and exceptions. All updated data is included in the appendix - HSCP Health and Wellbeing Outcomes Quarter 1 2016-17 Update.

REPORT

Children's Outcomes

5. There are a number of new indicators for children's outcomes where the Health and Social Care Partnership is working with partners through Integrated Children's Services Planning groups to establish baseline data. More information should be available for the next meeting of the Committee.
6. End of year data from Measles, Mumps and Rubella immunisation and dental registration showed performance on target.
7. The number of East Renfrewshire foster carers is almost at target and the number of kinship carers exceeds target. This is a positive trend supporting the shift in the balance of care to the community.

8. Child and Adolescent Mental Health services were meeting their waiting time target by the end of the quarter following a slight rise earlier in the year.

Criminal Justice Outcomes

9. Results from the survey of Criminal Justice service users - *Did your Order help you look at how to stop offending?* give a positive 95% baseline. The service has set a challenging target of 100%, supporting the community justice outcomes for reducing offending.

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

10. Many of the measures in this area are annual measures and therefore data will not be available until end of year. Updated performance information on cervical screening uptake for 2105/16 is positive.

National Outcome 2 - People live as independently as possible

11. This area has seen the greatest change in both the method of measurement and the targets. Details in the change to indicators and methodology are included in the notes section of the appendix.

Exception Report

12. The methodology on how the measure: 'percentage of the last six months of life spent at home or in a community setting' is calculated has been revised. It is calculated by determining the number of days a person has not spent in a hospital setting. Previously only time spent in major acute hospitals was counted as time spent in hospital now all hospital inpatient bed days in acute and community hospitals, psychiatric hospitals and geriatric long stay facilities are included. Following this change the measure shows performance of 84% an 8% shortfall on the 92% target. We have also seen a fall in our local measure of people reporting 'living where you want to live' needs fully met. It is important that we ensure that the pressure to meet the new delayed discharge targets does not drive out a focus on personal outcomes and adversely affect our balance of care.
13. The new challenging target of 72 hours for delayed discharge was introduced in April 2016. Whilst East Renfrewshire has tended to perform well in bed days lost to delayed discharge, for the first time we are seeing some delays and we are not currently on track to maintain our low levels of bed days lost to delayed discharge. The safe and supported work streams were set up to taking an improvement approach to delayed discharge and unplanned hospital admissions and a number of activities are coming into place in preparation for the winter period.
14. Hospital information systems are not linked to those in the community including GPs, and this impacts on our ability to track and engage earlier with individuals and their families. We intend to tackle this through in reach activity, which will identify East Renfrewshire residents and begin planning with them prior to being "fit for discharge". Our Safe and Supported new hospital in reach and connector posts will ensure that people leaving hospital will both be provided with appropriate health and care support; and reconnected to informal support networks.

15. The HSPC is aware of the increasing impact of dementia, with our ageing population, on individual capacity for decision making/planning. We are tackling this through active promotion of Power of Attorney and guardianship, both as a preventative measure with the people we work with already across RES and other team; and through our Safe and Supported work.

National Outcome 3 - Positive Experiences and Outcomes

16. Data for people reporting that they were respected in quarter one has improved to 96% (need fully met) with no one reporting that this was unmet. This is an area of improved performance from last year.
17. Similarly performance has improved for people reporting 'staying as well as you can' has improved reaching almost 80% fully met.

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

18. Performance for having things to do and seeing people is on target.
19. At end of year 2015/16 the HSCP exceeded our alcohol brief interventions target of 419 reaching 528 brief interventions completed. Whilst this measure appears below target for quarter one experience has shown that there is often a lag in data early in the year.

Exception Report

20. Our small primary care mental health team has consistently struggled to meet waiting time targets. This has been made much more challenging since the introduction of self-referrals.
21. Over time it is anticipated that early intervention of GP practice based link workers employed through RAMH (Recovery Across Mental Health) will lead to a reduction in referrals to Primary Care Mental Health services.

National Outcome 5 - Reducing Health Inequalities

22. Many of the measures in this area are annual measures and therefore data will not be available until end of year. Updated performance information on smoking cessation shows that the HSCP was one short of the 2015/16 target for smokers supported to successfully stop smoking in the most deprived areas.

National Outcome 6 - Carers are Supported

23. The indicator for carers reporting their quality of life needs fully met is on target. This data relates to adult services only and does not include parent carers.

National Outcome 7 - People are Safe from Harm

24. People reporting 'feeling safe' needs fully met (%) is on target at 86%.

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

25. Results of a staff survey have recently been received and following discussion with Staff Partnerships a report will be taken to the Integration Joint Board.

26. Completion rates for EKSF and PRD are around 80%. The Council PRD figures are affected by new sessional children and families staff who will complete a shortened PRD.

National Outcome 9 - Effective Resource Use

27. The performance measures for this outcome come from national benchmarking reports. Further analysis of this is required before a full report is made to Performance and Audit Committee.

CONCLUSIONS

28. Data on the majority of national indicators is not yet available; however local indicators, particularly personal outcome data show a positive performance. The new 72 hour delayed discharge target is a challenge but a series of improvements are being introduced through our Safe and Supported workstream.

RECOMMENDATIONS

29. Performance and Audit committee is asked to note and comment on the performance report and improvement actions.

REPORT AUTHOR AND PERSON TO CONTACT

Chief Officer, HSCP: Julie Murray

Candy Millard, Head of Strategic Services
candy.millard@eastrenfrewshire.gov.uk

Ian Smith, Performance and Quality Officer
ian.smith@eastrenfrewshire.gov.uk

20 September 2016

KEY WORDS

Performance, target, exception, improvement, indicator
A report detailing HSCP performance for Quarter One 2016/17

HSCP Health & Well-Being Outcomes

Quarter 1 2016-17 Update



Report Type: Scorecard Report
Report Author: Ian Smith
Generated on: 16 September 2016

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



PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
% 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's Outcome 2 - Children are Healthy, Active and Included

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
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	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.

Children's Outcome 3 - Children are Protected



PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
Number of Foster Carers	10	11	Amber	-	-	In addition to the ten ERC Foster Carers in Qtr 1 there were also seven Agency Foster Carers.

Number of Kinship Carers	26	23	Green	-	-	There were 26 Kinship Carers during Quarter 1.
Child & Adolescent Mental Health - longest wait in weeks at month end	20	18	Red			Child and Adolescent Mental Health service longest monthly wait quarter one was 20 but has reduced to 18 weeks at June 2016.



Criminal Justice Outcome - Community Safety is Safeguarded

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
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.

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

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
Cervical screening take-up	82.1%	80%	Green			NHS GGC target 2015/16 updated (80%)

National Outcome 2 - People live as independently as possible











PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
People reporting 'living where you want to live' needs fully met (%)	77.4%	80.0%	Green			In Qtr 1 of the total 261 valid responses 202 reported their needs fully met with a further 49 reporting their needs partially met. Ten (3.8%) responses reported unmet need in this regard.
Delayed discharge: people waiting more than 3 days to be discharged from hospital into a more appropriate care setting	2	0	-	-	-	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 75+ (incl AWI's)	90	TBC	-	-	-	Indicator changed to patients aged 75+ from 65+ from April 2016. Delayed discharge definition now 3 days from 14 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 all patient age groups (incl AWI's)	105	TBC	-	-	-	New indicator from April 2016 to capture total bed days lost to delayed discharge for all patients. Target and baseline to be established.
Delayed discharges bed days lost to delayed discharge for Adults with Incapacity (AWI)	31	TBC	-	-	-	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.
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: 'percentage of the last six months of life spent at home or in a community setting' is calculated compared to previous years' has been revised (published August 2016). The data from 2011/12 to 2014/15 has been amended accordingly. The percentage of last six months spent at home or in a community setting is calculated by determining the number of days a person has not spent in a hospital setting. Previously only time spent in major acute hospitals was counted as time spent in hospital. Under the revised methodology we have calculated the 'time spent in hospital' as all hospital inpatient bed days in acute and community hospitals, psychiatric hospitals and geriatric long stay facilities.



National Outcome 3 - Positive Experiences and Outcomes

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
People reporting 'being respected' needs fully met (%)	96.0%	94.0%	Green			In Qtr 1 of the total 253 valid responses 243 reported their needs fully met with a further 10 reporting their needs partially met. No respondents reported unmet need in this regard.
People reporting 'staying as well as you can' needs fully met (%)	79.1%	77.0%	Green			In Qtr 1 of the total 258 valid responses 204 reported their needs fully met with a further 43 reporting their needs partially met. Eleven (4.3%) responses reported unmet need in this regard.



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

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
People reporting 'having things to do' needs fully met (%)	66.5%	62.0%	Green			In Qtr 1 of the total 257 valid responses 171 reported their needs fully met with a further 66 reporting their needs partially met. Twenty (7.8%) responses reported unmet need in this regard
People reporting 'seeing people' needs fully met (%)	74.5%	75.0%	Green			In Qtr 1 of the total 259 valid responses 193 reported their needs fully met with a further 59 reporting their needs partially met. Seven (2.7%) responses reported unmet need in this regard.
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.
Primary Care Mental Health Team wait for referral to assessment within 4 weeks (%)	33%	100%	Red			Latest available data on Sharepoint some delays due to migration to EMIS
Primary Care Mental Health Team wait for referral to treatment appointment within 9 weeks (%)	18%	100%	Red			Latest available data on Sharepoint some delays due to migration to EMIS



National Outcome 5 - Reducing Health Inequalities

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
Number of smokers supported to successfully stop smoking in the most deprived areas.	20	21	Green			Whilst we were one short of the target (21) in 2015/16 this year, s target has been increased to 28. We have developed an action plan to ensure we are targeting the SIMD areas e.g. working with the Foodbank. Additionally the shift towards e-cigs has impacted on the number of people accessing Smokefree Services across the country generally.







National Outcome 6 - Carers are Supported

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
People reporting 'quality of life for carers' needs fully met (%)	71.4%	70.0%	Green			In Qtr 1 of the total 206 valid responses 147 reported their needs fully met with a further 41 reporting their needs partially met. Eighteen (8.7%) responses reported unmet need in this regard.









National Outcome 7 - People are Safe from Harm

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
People reporting 'feeling safe' needs fully met (%)	86.2%	84.0%	Green			In Qtr 1 of the total 260 valid responses 224 reported their needs fully met with a further 31 reporting their needs partially met. Five (1.9%) responses reported unmet need in this regard.

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

PI Short Name	Current Value	Current Target	Traffic Light	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
% 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. New indicator – target to be set
Percentage of NHS HSCP Staff with an e-KSF (Knowledge and Skills Framework) review in last 12 months	83%	80%	Green			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	80%	100%	Amber			Whilst the overall completion rate for 2016/17 stands at 80% across the HSCP PRD completion rates vary: Health & Community Care staff - 85% and Strategic Services staff - 90%. Children and Families statistics are affected by a new group of staff on sessional contracts, who will complete a shortened PRD process.

144

Absence: average days lost per employee (all staff LA)	3.30	2.45	Red			There were 2,078.5 lost working days in Qtr 1, 1,725 of these were medically certificated
Absence: days lost for long-term absence as percentage of all days lost (all staff LA)	70.9%	Data Only				1,473 days lost to long term absence from a total of 2,078.5 total days lost in Qtr 1.
Absence: days lost for short-term absence as percentage of all days lost (all staff LA)	29.1%	Data Only				A total of 605.5 days were lost in Quarter 1 to short term absence from a total of 2,078.5 lost working days.
Sickness absence (%) NHS	7.1%	4%	Red			Qtr 1 absence of 7.15 includes staff from hosted services, LD Inpatient Services which has added over 100 staff to the East Renfrewshire total. (NHS GGC figure at June = 5.9%).