Adult, Social Care Quarter 2 Performance Report 2016/17



Progress in delivery of strategic outcomes

Integration: Work on refreshing the Strategic Plan is underway. This will include taking account of the emerging NHS Lothian Hospital Plan. Alongside this, work is progressing in the development of a Financial Strategy and a Workforce Plan for Health, Social Care, the Voluntary, and Independent Sector. Integration at a service level is progressing with nurses appointed to work in Newbyres Care Home, and plans for a Recovery Hub for mental health and substance misuse are progressing well. Further integration of the management structure is now underway following the establishment of two Heads of Service posts working across health and social work.

Older People: The Joint Older People's strategy 2016-2019 will be launched at an event to be held in Dalkeith on 17th November. Highbank day care centre's smooth relocation to the Midlothian Community Hospital has been impacted by the closure of Woodburn Day Care Centre and transport related issues. Woodburn Day Care has renamed to "Grassy Riggs" and will provide a drop-in model of support for older people in the Woodburn area – this service does not require care inspectorate registration. Grassy Riggs will operate from the MARC (Midlothian Advice and Resource Centre) building in Woodburn following a light refurbishment to make the building fit for purpose and accessible. Midlothian's other day care centres are successfully registered with the Care Inspectorate. The outcome from Midlothian's contribution to the Scottish Government's testing of the Alzheimer Scotland 8 Pillars model of community support is expected by the end of October. The dementia clinic operating from the community hospital is now overseen through the Dementia Team. The project for providing specialist dementia care and support within Newbyres Care home aims to be operational from the end of February 2016 for the first phase. The reprovisioning of Highbank Residential Care and the construction of a purpose built service providing intermediate care is progressing and an appropriate project board is being established with the aim of construction by the end of 2019.

Carers: Development of the Midlothian Carers Strategy is progressing and the next stage is pulling discussions and consultations together to present to carer groups for comment. Subgroups will be developed to take forward themes, e.g. Emergency Planning, and Employment. The strategy proposes to support Adult and Young Carers and as such links are being developed with Education and Children's Services to discuss the content of the strategy, and identify work needed and ways forward to support the implementation of the Carers (Scotland) Act 2016 (commencement date identified as 1st April 2018). The Scottish Government have indicated a proposed date of December 2017 for the publication of guidance and regulations to support the new Act.

Learning Disability: Work continues on the 12 person Complex Care service, the build remains on target and work is underway to appoint the care provider. A review of Day Service provision is in its early stages, a project plan is in place, this includes the development of neighbourhood networks to increase the opportunity for people to develop skills, interests and relationships in their local community. There is a continuation of projects to tackle Health Inequality including the training programme for support workers, development of a Games Based Learning Platform to support people to access Internet and Social Media more safely

Physical Disability and Sensory Impairment: 3 year Action Plans created through public consultation with both client groups were approved by the Strategic Planning Group on 1st August. Within Physical Disabilities, a main focus is on employability issues and the support required for positive outcomes. In partnership with Forward Mid and others, a funding bid for Big Lottery monies has been submitted to support this. Within Sensory Impairment, awareness training for Health and Social Care staff and the provision of more local access to specialist services are areas highlighted. Progress on both is already being made through for example, training for GP Practice staff on 7th September and the increasing use of distribution of hearing aid batteries through all local Libraries.

Long Term Conditions: MacMillan Cancer Support have created a quality toolkit which supports practices to focus on cancer across a range of modules as part of their priorities within their practice or cluster group. Midlothian have submitted an expression of interest form, which, if successful, would also allow practices to focus on improving the uptake of the Midlothian TCAT (Transforming Care After Treatment) project. Allowing information sharing and promotion of the programme to become a normal part of GP Practice.

Mental Health: Mental Health Access Points were launched in two locations in Midlothian in August and already the service is well used. Staff at the Access Points guide people to access the support they need to increase their mental wellbeing; reducing low mood and feelings of stress; increasing confidence; and self-esteem. Staff help people to decide what support will work best for them, this includes psychological therapies. The House of Care Wellbeing project based at Newbattle Health centre was initially aimed at people with Long Term Conditions however many of those attending the service are presenting with Mental Health issues and are receiving support with this. The Community Health Inequalities Team continues to offer physical health checks to people with mental health issues in several locations throughout Midlothian.

Criminal Justice: The Spring service is continuing to flourish and a full- time Spring social worker has been in place since September 2016. This means that women referred to Spring can benefit from one to one support to help them prepare for attendance, benefit from it and transition out of Spring with supports in place. As part of the Care Inspectorate's recent evaluation of Lifelong Learning and Employability services in Midlothian Council, Spring was mentioned by the inspectors during their verbal feedback as a service that had particularly impressed them. Review of Unpaid Work being carried out, with revised job descriptions and expectations for staff, and aim to have changes in effect in early 2017. Continue to work towards the new structure for Community Justice and have recently carried out an extensive consultation with community groups and the general public. The results of this are currently being analysed.

Emerging Challenges and Risks

Funding Pressures: There is a continuing requirement to seek major efficiencies despite the growing demand, particularly in relation to older people and those with complex needs. The service was overspent primarily as a result of some very high care packages and work is being undertaken to find more cost effective ways of providing care. The move towards an integrated budget through the establishment of the Integration Joint Board provides an opportunity to make better use of collective resources. Specific funding pressures include a potential shortfall between Carers Information Strategy monies, which is due to end, and the provision of funding provided for the implementation of the Carers (Scotland) Act 2016.

Capacity and Quality of Services; The ongoing shortfall in care at home capacity has been difficult to manage and has had a knock-on impact on the Reablement Service as the limited capacity of external providers has impacted the ability to move people following their period of reablement. The longer term viability of services in both care homes and care at home services requires a long term approach to workforce planning and the promotion of social care as a career, and this work is being undertaken on a multi-agency basis involving NHS Lothian and the Third Sector. A specific development has been the establishment of a Health and Care Academy. The decision to fund the Living Wage in the care sector also provides an opportunity to create a more sustainable and stable workforce.

Adult, Social Care Performance Indicator Summary

Outcomes and Customer Feedback

Priority	Indicator	2015/ 16	Q2 2015/ 16	Q1 2016/ 17			Q2 2016/17		Annua I Target	Feeder Data	Value
		Value	Value	Value	Value	Status	Note	Short Trend	2016/ 17		
01. Provide an efficient complaints service	Number of complaints received (cumulative)	20	26	10	18		Q2 16/17: Data Only.	•			
	Average time in						Q2 16/17: Off Target. Stage one complaints relating to social care have a target time of			Number of complaints complete at Stage 1	3
01. Provide an efficient complaints service	working days to respond to complaints at stage 1	1	2	13	24		20 working days, and not 5. Responsibility now allocated to Planning Officer to better meet the demands of the service.	•	20	Number of working days for Stage 1 complaints to be Completed	72
01. Provide an efficient	Average time in working days to						Q2 16/17: Off Target. Responsibility now allocated to Planning			Number of complaints complete at Stage 2	2
complaints service	respond to complaints at stage 2	15	11.5	56	54.5		Officer to better meet the demands of the service.		40	Number of working days for Stage 2 complaints to be Completed	109
							Q2 16/17: Off Target. Stage one complaints relating to social care			Number of complaints complete at Stage 1	3
01. Provide an efficient complaints service	Percentage of complaints at stage 1 complete within 5 working days	100%	100%	100%	66%		have a target time of 20 working days, and not 5. Responsibility now allocated to Planning Officer to better meet the demands of the service.	•	95%	Number of complaints at stage 1 responded to within 5 working days	2
01. Provide an	Percentage of						Q2 16/17: Off Target. Responsibility now			Number of complaints complete at Stage 2	2
efficient complaints service	complaints at stage 2 complete within 40 working days	100%	100%	0%	50%		allocated to Planning Officer to better meet the demands of the service.	•	95%	Number of complaints at stage 2 responded to within 40 working days	1

Making the Best Use of our Resources

Priority	Indicator	2015/ 16	Q2 2015/ 16	Q1 2016/ 17			Q2 2016/17		Annua I Target	Feeder Data	Value
		Value	Value	Value	Value	alue Status Note		Short Trend	2016/ 17		
02. Manage budget effectively	Performance against revenue budget	£ 37.23 4 m	£ 38.40 8 m	£ 39.14 1 m	£ 40.01 5 m		Q2 16/17 : Off Target				
							Q2 16/17: Off Target. Absence			Number of days lost (cumulative)	2,743.4 2
03. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	12.73	5.27	3.36	6.45		management continues to be addressed by relevant service managers, however the demands of an ageing workforce make this a complicated area.	•		Average number of FTE in service (year to date)	425.15

Corporate Health

Priority	Indicator	2015/ 16	Q2 2015/ 16	Q1 2016/ 17			Q2 2016/17		Annua I Target	Feeder Data	Value		
·		Value	Value	Value	Value	Status	Note Short Trend Q2 16/17: Off Target. 34 out of 42 actions on target. Detail of corrective action contained within body of report. Q2 16/17: Off Target. Processing is being delayed due to necessary investigations to establish the reasons for invoices being presented which do not match the expected amount. However, performance has improved since Q1. Q2 16/17: Off Target. 7 out of 10 indicators on target. Corrective action contained	2016/ 17					
04. Complete all	% of service priorities on target /	75.76	87.88	80.95	80.95		34 out of 42 actions			Number of service & corporate priority actions	42		
service priorities	completed, of the total number	%	%	% %	% %		corrective action contained within body		90%	Number of service & corporate priority actions on tgt/completed	34		
							Processing is being			Number received (cumulative)	7,234		
05. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	92%	98%	91%	93%		necessary investigations to establish the reasons for invoices being presented which do not match the expected amount. However, performance has	•	97%	Number paid within 30 days (cumulative)	6,713		
	0/ -/ Dis the term						7 out of 10 indicators			Number of PI's on tgt/ tgt achieved	16		
06. Improve PI performance	% of PIs that are on target/ have reached their target.	64%	76.92 %	71.43 %	70%		action contained	•	90%	Number of PI's	27		
07. Control risk	% of high risks that have been reviewed in the last	100%	100%	100%	100%		Q2 16/17: On Target. Three high risks reviewed in quarter		100%	Number of high risks reviewed in the last quarter	3		
	quarter						two.		· · · · ·			Number of high risks	3

Improving for the Future

Priority	Indicator	2015/ 16	Q2 2015/ 16	Q1 2016/ 17	Q2 2016/17						Value
		Value	Value	Value	Value	Status	Note	2016/ 17			
08. Implement improvement	% of internal/external	00/	50%	00/	97.37		Q2 16/17: On Target. 37 out of 38 audit		90%	Number of on target actions	37
plans	vement audit actions in 10% 50% 10% 1%		actions on target.			Number of outstanding actions	38				

Adult, Social Care Action report



Service Priority Actions

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.01.01		The Adults & Social Care Service will participate in and contribute to the area targeting projects	31-Mar- 2017	8	35%	Q2 16/17: Off Target. While work continues on the ground there has been an absence of project meetings in recent months, so work has not progressed as quickly as hoped.
ASC.S.01.02	01. Health Inequalities	Social care staff will be trained on inequalities and poverty	31-Mar- 2017		50%	Q2 16/17: On Target. Training sessions on health inequalities delivered to the Community Planning Partnership, GPs and practice staff, Health and Social Care staff, and the third sector, with an accumulative total of 123 participants. Training included health inequalities, health literacy and good conversations. Upwards of 85% said the training would benefit their practice.
ASC.S.01.03		The Social Care Service will establish links with new local services e.g. Community Health Inequalities Team and the Thistle Project	31-Mar- 2017		50%	Q2 16/17: On Target. Briefing of Social Work team held.
ASC.S.02.01		Reduce the waiting times for occupational therapy and social work services	31-Mar- 2017	8	15%	Q2 16/17: Off Target. All vacancies now filled within Occupational Therapy, and summer annual leave period now over. Evidence that the introduction of a triage system is having a positive impact. No long term sick leave. Continuing to screen referrals to reduce any duplication with health Occupational Therapists. If staffing levels remain 100% predict ongoing gradual reduction in wait times / length of wait.
	02. Review the model of care management	Address the lack of capacity to undertake care package reviews	31-Mar- 2017	8	40%	Q2 16/17: Off Target. All vacancies now filled within Occupational Therapy, and summer annual leave period now over. Evidence that the introduction of a triage system is having a positive impact. No long term sick leave. Continuing to screen referrals to reduce any duplication with health Occupational Therapists. If staffing levels remain 100% predict ongoing gradual reduction in wait times / length of wait.
ASC.S.02.03		Strengthen joint working with health colleagues	31-Mar- 2017		50%	Q2 16/17: On Target. Occupational Therapists now being managed by the NHS Lothian Allied Health Professional Manager. New structure implemented with Heads of Service now responsible for both Health and Social Care services.

Code	Priority	Action	Due Date	lcon	Progress	Comment & Planned Improvement Action
ASC.S.02.04	02. Review the model of	Social Care staff will have more involvement in anticipatory care planning	31-Mar- 2017		50%	Q2 16/17: On Target. Needs analysis of requirements being undertaken, with a small working group potentially being established to take forward.
ASC.S.02.05	care management	Fully implement the uptake of Self Directed Support	31-Mar- 2017		75%	Q2 16/17: On Target. Work is continuing to embed Self Directed Support as a business as usual process. Current focus is on finance and admin processed to support flexibility in the provision of support.
ASC.S.03.01	03. Supporting service users through the use of technology	Introduce community frailty assessments	31-Mar- 2017	8	25%	Q2 16/17: Off Target. Review currently underway to ascertain whether this work can be carried out with more meaningful results through GP information.
ASC.S.04.01		Continue to work with voluntary organisations to seek to identify hidden carers	31-Mar- 2017		50%	Q2 16/17: On Target. Opportunities now being explored around raising contact with and approaching groups with members who may be less well represented, such as substance misuse and veterans.
ASC.S.04.02		Review the carer assessment process in light of new legislation	31-Mar- 2017		50%	Q2 16/17: On Target. Scottish Government consultation expected to take place this year, with aim of publishing regulations and guidance by December 2017. Feedback from this consultation will inform strategy, policies and procedure.
ASC.S.04.03		Develop a more structured and comprehensive approach to the provision of emergency planning for carers	31-Mar- 2017		50%	Q2 16/17: On Target. Responding to input from members of the Midlothian Carers Strategic Planning Group and Carers Action Midlothian, and also the priority issue identified within the Carers (Scotland) Act (2016) legislation a working group focussing on Emergency Planning for Carers will be established. The group will seek to explore options which best support carers, and will include discussions regarding what support carers and cared for can expect in an emergency; who develops and updates the emergency plans; and who holds the emergency plan information.
ASC.S.05.01	05. Older People	Develop and expand the MERRIT service to provide increased support and enable quicker discharge from hospital	31-Mar- 2017		70%	Q2 16/17: On Target. Expansion of MERRIT (Midlothian Enhanced Rapid Response and Intervention Team) will include: • An advanced practitioner physiotherapist and anticipatory care nurse to develop a model of care to support people with Chronic Obstructive Pulmonary Disease to reduce hospital admissions. • Increased care support worker capacity • Increase nursing capacity recruiting another 3 nurses. The number of beds in the Hospital at Home virtual ward will increase when staffing in place.
ASC.S.05.02		Increase the range of intermediate care options within the community	31-Mar- 2017		50%	Q2 16/17: On Target.

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.05.03		Expand the 7 day working capacity of the Hospital at Home Team to manage 10	31-Mar-	②	100%	Q2 16/17: Complete.
		people at any one time	2017			Hospital at Home nurses working 7 days per week.
ASC.S.05.04		Develop a business case for the reprovision of Highbank care home to become a purpose built intermediate care	31-Mar- 2017		50%	Q2 16/17: On Target.
		home	2017			Report and business case prepared for Corporate Management Team.
ASC.S.05.05		Develop Inreach Hospital Discharge Team with a focus on identifying the readmission rates and reasons with the Hospital Inreach Nurse	31-Mar- 2017		50%	Q2 16/17: On Target.
ASC.S.05.06		Implement the Falls Strategy	31-Mar- 2017		100%	Q2 16/17: Complete.
						Q2 16/17: On Target.
ASC.S.05.07	05. Older People	Development of the Joint Dementia Service to manage crisis referrals for people with dementia and their families	31-Mar- 2017		50%	Appointed Social Worker skilled up, need to expand team skill mix to include 'back up' Duty Worker to cover periods of absence. A team member has been approached for this role. Currently finalising structure of duty response. Plan to trial with phased referrals. Referrals to be passed from Duty initially, then build up to direct referrals. Further consultation to be announced, with Duty Team Leader to finalise procedure with view to trial commencing within 8 weeks.
ASC.S.05.08		Develop Day Support services to older people focussing on community hubs and a day support referral panel	31-Mar- 2017		50%	Q2 16/17: On Target.
ASC.S.05.09		Reprovision Gore Avenue extra care housing	31-Dec- 2017	8	15%	Q2 16/17: Off Target. Existing housing on the site now demolished. Contractor not expected to be appointed before Spring 2017, due to ongoing site issues. Units will not be completed before March 2018.
ASC.S.05.10		Increase support to all care homes through a Care Home Nurse Advisor	31-Mar- 2017		100%	Q2 16/17: Complete.
ASC.S.06.01		Improve access to early intervention including through Gateway Services	31-Mar- 2017		95%	Q2 16/17: On Target. Staff now in place, and service operational. Numbers attending have been higher than anticipated.
ASC.S.06.02	06. Adults - Mental Health	Address the physical health needs by providing drop in sessions in the community hospital.	31-Mar- 2017		50%	Q2 16/17: On Target.
ASC.S.06.03		Address the physical health needs through the Community Inequalities Team	31-Mar- 2017		50%	Q2 16/17: On Target.

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.06.04	06. Adults - Mental Health	Strengthen self-management through peer support and House of Care services	31-Mar- 2017		50%	Q2 16/17: On Target. Wellbeing services based in health centres are well established, with much of their work having Mental Health focus. Plans have been agreed to expand the service from December.
ASC.S.07.01	O7 Adulta Lagraina	Develop and implement 12 new homes specifically to meet the housing needs for people with complex learning disabilities	31-Mar- 2017		50%	Q2 16/17: On Target. Site build started, on schedule and within budget. Interviews for care providers taking place in October.
	07. Adults - Learning Disability	Seek to invest in the development of a service to support families and paid care staff working with people with challenging behaviour	31-Mar- 2017		50%	Q2 16/17: On Target. Review scheduled to take place in January on a Lothian-wide basis.
ASC.S.08.01	08. Adults substance	Reshape local services following reduction in funding	31-Mar- 2017		50%	Q2 16/17: On Target. A "letter of comfort" was issued to locally commissioned service advising that there would be no reduction in funding for 2016/17. There is ongoing discussion to identify further savings for implementation for 2017/18.
ASC.S.08.02	misuse	Shift our use of resources to services which support recovery including peer support such as the Recovery Cafe and Health Centre pilot work	31-Mar- 2017		50%	Q2 16/17: On Target. Whilst the Midlothian Core Delivery Group will endeavour to protect the post-treatment Recovery services, there may be a need to further develop co-production and partnership initiative to creatively ensure the further development of Recovery services.
ASC.S.09.01		Continue and expand the SPRING service provision in line with funding	31-Mar- 2017		50%	Q2 16/17: On Target. Spring social worker is now recruited and in post. Spring Team Leader post being advertised to cover period of leave.
ASC.S.09.02	09. Adults - Offenders	The new service to be provided by the Communities Health Inequalities Team will include specific targeting of people who have offended	31-Mar- 2017		50%	Q2 16/17: On Target. Communities Health Inequalities Team (CHIT) is offering a health assessment to individuals on court orders. Also a staff member from CHIT is co-facilitating the Health and Well Being session every fortnight at Spring.
ASC.S.09.03		Extend Multi-Agency arrangements to include violent offenders	31-Mar- 2017		50%	Q2 16/17: On Target. Processes in place and ready to be implemented; however there have not yet been any suitable candidates identified.
		Lifestyle management work will be progressed with the Thistle Project to support the House of Care	31-Mar- 2017		50%	Q2 16/17: On Target. Wellbeing services based in health centres are well established, both in health centres and community settings. Plans have been agreed to expand the service to six more practices from December.

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.10.02		Lifestyle management work will be progressed with the Communities Health Inequalities project to support the House of Care	31-Mar- 2017		50%	Q2 16/17: On Target. Feedback from the organisations working with CHIT (Community Heath Inequalities Team) has been very positive, and as a result, funding was secured to extend the CHIT project through until 31st March 2017 in the first instance.
ASC.S.10.03	10. Adults with long term conditions, disability and sensory impairment	OT provided lifestyle management work will be progressed to support the House of Care	31-Mar- 2017		50%	Q2 16/17: On Target. This service has continued with stronger links being established with related services provided by CHIT and the voluntary sector.
ASC.S.10.04		Implementation of a new service funded by MacMillan to support individuals following cancer treatment to address lifestyle issues including employment, exercise, diet, counselling and social activities	31-Mar- 2017		75%	Q2 16/17: On Target. Service has now been implemented, and work is ongoing to increase awareness and uptake.
ASC.S.10.05		Evaluate the need and most appropriate service response to the needs of people under 65yrs, learning from the experience of such facilities in Highbank for older people.	30-Apr- 2017		50%	Q2 16/17: On Target.
ASC.S.10.06		Coordinate the production of clear information on the availability and suitability of taxis available in Midlothian	30-Apr- 2017	8	15%	Q2 16/17: Off Target. Still in planning stage, however included as part of the 16/17 action plan.
	10. Adults with long term conditions, disability and	Coordinate the development and promotion of a resource pack to inform and support employers to recruit people with disabilities	31-Mar- 2017	3	15%	Q2 16/17: Off Target. Still in planning stage, however included as part of the 16/17 action plan.
ASC.S.10.08	sensory impairment	Coordinate the provision of hearing aid maintenance and repair clinics in libraries including the recruitment of volunteers	30-Apr- 2017		50%	Q2 16/17: On Target. Audiology now involved, and tools provided for repairs. Looking to pilot in three libraries. Advertisement for volunteers unsuccessful, so now working with Deaf Action, and also exploring opportunities through the Duke of Edinburgh scheme and potentially the Red Cross and volunteers from lip reading classes.
ASC.S.10.09		Arrange and deliver training to all health and social care staff working with NHS Lothian partners to ensure the implementation of a system to flag up sensory impairment on medical records	30-Apr- 2017	8	10%	Q2 16/17: Off Target. Included in 2016/17 action plan. This is included in general awareness training, and is an ongoing and by necessity rolling programme, but it is acknowledged that this is a challenging target to achieve.

Adult, Social Care Performance Indicator Report



Service Priority Performance Indicators

PI Code	Deiositu	PI	2015/16	Q2 2015/16	Q1 2016/17			Q2 2	2016/17	Annual	Benchmark
Pi Code	Priority	PI	Value	Value	Value	Value	Status	Short Trend	Note	Target 2016/17	Бенсипак
ASC.S.01.02a	01. Health Inequalities	Increase the number of staff trained in inequalities & poverty	New for 16/17		85	123		-	Q2 16/17: Data Only. This is a new measure. Results for 2016/17 will help to inform any future target setting.		
ASC.S.02.01b	02. Review the model of care management	Average waiting time for social work services	New for 16/17		19 weeks	22 weeks		₽	Q2 16/17: Off Target. All vacancies now filled within Occupational Therapy, and summer annual leave period now over. Evidence that the introduction of a triage system is having a positive impact. No long term sick leave. Continuing to screen referrals to reduce any duplication with health Occupational Therapists. If staffing levels remain 100% predict ongoing gradual reduction in wait times / length of wait.	6 weeks	
ASC.S.02.05a	02. Review the model of care management	Improved reported outcomes by service users	87.57%	89.25%	87.8%	86.4%		•	Q2 16/17: On Target. Reviews include nine outcomes focussed questions. Since not all questions are asked at each review, this measures the proportion of people who responded positively to at least 66% of the questions they were asked. 146 out of 169 people responded positively to at least 66% of the outcomes focussed questions they were asked.	75%	

PI Code	Priority	PI	2015/16	Q2 2015/16	Q1 2016/17			Q2 2	2016/17	Annual Target	Benchmark
FICode	Pholity	P1	Value	Value	Value	Value	Status	Short Trend	Note	2016/17	Denominark
ASC.S.02.05c		Increase the % of people who said that the care and support they received had a positive impact on their quality of life	89%	86%	89%	89%			Q2 16/17: On Target. Responses over four user survey (2015) questions were averaged. These questions were that social work services have helped them in the following ways: a. "to feel safer" (93%); b. "to lead a more independent life" (96%); c. "to feel part of my community" (82%); d. "feel healthy" (83%). Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting.	85%	
ASC.S.02.05d	02. Review the model of care management	Increase the % of people who feel they are participating more in activities of their choice	88.24%	89.02%	90.48%	90.48%		-	Q2 16/17: On Target. Responses over four user survey (2015) questions were averaged. These questions were that social work services have helped them in the following ways: a. "to feel safer" (93%); b. "to lead a more independent life" (96%); c. "to feel part of my community" (82%); d. "feel healthy" (83%). Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting. 2016 survey due to be carried out during Q3.	75%	
ASC.S.02.05e		The proportion of people choosing SDS option 1	5.1%	4.3%	5.4%	5.9%		•	Q2 16/17: Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This refers to 127 out of 2,163 individuals choosing option 1, and includes those under the age of 18.		

PI Code	Driovity	PI	2015/16	Q2 2015/16	Q1 2016/17			Q2 2	2016/17	Annual Target	Benchmark
Pi Code	Priority	PI	Value	Value	Value	Value	Status	Short Trend	Note	2016/17	Benchmark
ASC.S.02.05f		The proportion of people choosing SDS option 2	5.2%	5%	4.8%	4.5%		•	Q2 16/17: Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This refers to 97 out of 2,163 individuals choosing option 2, and includes those under the age of 18.		
ASC.S.02.05g		The proportion of people choosing SDS option 3	97.2%	87.3%	93.2%	93.3%		•	Q2 16/17: Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This refers to 2,019 out of 2,163 individuals choosing option 3, and includes those under the age of 18.		
ASC.S.02.05h	02. Review the model of care management	The proportion of people choosing SDS option 4	7.4%	5%	4%	3.7%		₽	Q2 16/17: Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This includes those under the age of 18. As option 4 refers to individuals who choose more than one option, these service users are also included in at least two of the first three options. This figure equates to 81 out of 2,163 individuals.		
BS.ASC.S.02. 05b		Increase the percentage of people who say they are able to look after their health or who say they are as well as they can be	83%	86%	83%	83%	>		Q2 16/17: On Target. Information from the annual user survey 2015 reported that 82 out of 99 (83%) of clients (who expressed an opinion) agreed with the statement "Services have helped me feel healthy". Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting. 2016 survey due to be carried out during Q3.	83%	

PI Code	Driovity	PI	2015/16	Q2 2015/16	Q1 2016/17			Annual	Benchmark		
PriCode	Priority	PI	Value	Value	Value	Value	Status	Short Trend	Note	Target 2016/17	
ASC.S.04.02a	04. Carers	Increase the number of people receiving an assessment of their care needs (Carer Conversations)	126	79	33	66			Q2 16/17: On Target. 66 people received a Carers Conversation between April and September 2016.	138	
ASC.S.04.02b		The ratio of workflow which is a Carer's Conversation	New for 16/17		4.23%	4.5%		_	Q2 16/17: Data Only. Workflow in this measure refers to assessments, reviews and carer's conversations completed during April - September 2016.		
ASC.S.05.01a		Increase the proportion of MERRIT callouts which result in a fall assessment	23.57%	19%	38%	36.96%		•	Q2 16/17: On Target. This refers to 712 out of 1,929 callouts.	30%	
BS.ASC.S.05. 01b		Decrease the percentage of falls which result in a hospital admission for clients aged 65+	4.79%	6.4%	1.19%	4.07%		•	Q2 16/17: On Target. This figure relates to 29 out of 712 falls.	10%	
ASC.S.05.02a	05. Older People	Increase the percentage of Intermediate Care at Home clients who returned home with no package of care	4%	2%	N/A	0%		-	Q2 16/17: Off Target. All people discharged returned home with a package of care of some kind in the period April-September.	5%	Baseline 8.7% 2014/15
ASC.S.05.02b		Decrease the percentage of Intermediate Care at Home Clients who were admitted to a care home	15%	22%	N/A	0%		•	Q2 16/17: Data Only. No individuals admitted to a care home from intermediate care in the period April - September 2016. Target to be determined.		Baseline of 15.2% identified at end of 14/15.
ASC.S.05.02c		Decrease the percentage of Intermediate Care at Home Clients who returned to hospital	11.9%	12%	0%	0%		_	Q2 16/17: On Target. No individuals admitted to hospital from intermediate care in the period April - September 2016. Target to be determined.	15%	Baseline of 39% identified at end of 14/15.

DI Codo	Driovity	PI	2015/16	Q2 2015/16	Q1 2016/17			Annual Target	Benchmark		
PI Code	Priority	PI	Value	Value	Value	Value	Status	Short Trend	Note	2016/17	Denominark
ASC.S.05.05a		Reduce the rate of per 1,000 population emergency admissions for people aged 75+	44.96	27.36	354	346		•	Q2 16/17: Data Only. This information relates to a rolling year, and covers the period April 2015 - April 2016, which is the most up to date information available.		
ASC.S.05.05b		Reduce the number of patients delayed in hospital for more than 72 hours at census date	1	4	7	9		•	Q2 16/17: Data Only. Whilst there were nine patients delayed for more that 72 hours at census date, 72 hours is a target to be implemented in approximately three years, and is included in reporting structures in preparation for this.		
ASC.S.05.08a	05. Older People	Increase the number of older people attending day centres	New for 16/17		279	203		-	Q2 16/17: Data Only. Woodburn Day Centre closed during Q2, with some users relocating to Highbank, and others using the new Grassy Riggs Centre to access more day opportunities within the community, rather than a traditional day centre setting.		
BS.ASC.S.05. 05c		Maintain at zero the number of patients delayed in hospital for more than 2 weeks at census date	1	6	2	17		•	Q2 16/17: Off Target. New care at home provider appointed and starting service in November. Allocations to vacancies within care homes will also start to address delays during quarter 3. In addition the hospital at home team are increasing their number from 10 to 15 which should all contribute to bring the number of delayed discharges down.	0	
ASC.S.08.02a	08. Adults substance misuse	Increase the number of people accessing peer support services	New for 16/17		44	N/A		-	Q2 16/17: No data available this quarter Data is still being collected for Q2 performance however, referral rates remain encouraging and good use is being made of the service.		

PI Code	Priority	PI	2015/16	Q2 2015/16	Q1 2016/17		Annual Target	Benchmark			
Fi Code	Phonity	P1	Value	Value	Value	Value	Status	Short Trend	Note	2016/17	
ASC.S.09.01a	09. Adults -	Numbers accessing SPRING service	New for 16/17		13	15			Q2 16/17: Data Only. This is the first year of data collection for this measure. Any future targets will be informed by 2016/17 data.		
ASC.S.09.03a	Offenders	Monitor the number of violent offenders with MAPPA involvement	New for 16/17		0	0		-	Q2 16/17: Data Only. No violent offenders currently within Midlothian.		
ASC.S.10.04a		The number of people attending the Transforming Care after Treatment drop in centre in Lasswade	New for 16/17		5	13		-	Q2 16/17: Data Only.		
ASC.S.10.04b	term conditions, disability and sensory impairment	The number of people receiving an holistic needs assessment	New for 16/17		9	10		-	Q2 16/17: Data Only.		
ASC.S.10.09a		Number of people receiving training	New for 16/17		85	123		-	Q2 16/17: Data Only.		
BS.ASC.02		Maximise the no. of people accessing short breaks	827	677	N/A	546			Q2 16/17: Data Only.		
BS.ASC.03	11. Balanced Scorecard – Quarterly Indicators	Percentage of people who say that have a say in the way their care is provided	78%	80%	78%	78%			Q2 16/17: On Target. Information from the 2015 user survey showed that 94 out of 120 respondents who expressed an opinion stated that they agreed with the question "I have been given choices about the type of service I receive". Responses included in this are Strongly Agree; Agree; Disagree; Strongly Disagree. It does not include the response Neither Agree Nor Disagree, consistent with previous calculations. 2016 survey to be carried out during Q3.	75%	
BS.ASC.04		Number of clients with new post diagnostic support	46	33	N/A	100			Q2 16/17: Data Only.		

PI Code	Priority	PI	2015/16	Q2 2015/16	Q1 2016/17			Annual	Benchmark		
Ficode			Value	Value	Value	Value	Status	Short Trend	Note	Target 2016/17	Denominark
BS.ASC.05	11. Balanced Scorecard – Quarterly Indicators	Reduce the number of emergency admissions for people aged 75+	3,876	2,359	2,327	2,273		•	Q2 16/17: On Target. This information relates to a rolling year, and covers the period April 2015 - April 2016, which is the most up to date information available.		
BS.ASC.06		Number of women offenders from Midlothian who engage with support services	New for 16/17			9		-	Q2 16/17: Data Only.		
BS.ASC.06a		Percentage of women offenders from Midlothian who engage with support services	New for 16/17			42%		-	Q2 16/17: On Target.	20%	
BS.SMP.IOM. 8		Continue to outperform the JSA claimant count (as % of working age population)	New for 16/17			1.6%		_	Q2 16/17: On Target.	2.3%	

Local Government Benchmarking Framework - Adult, Social Care



The LGBF data for 2015/16 will be published by the Improvement Service in January 2017.

Adult, Social Care

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	External Comparison
Code	Tiue	Value	Value	Value	Value	Value	Value	External Companson
P-SW1	Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£16.22	£16.98	£12.46	£23.81	£28.22		14/15 Rank 30 (Bottom Quartile). 13/14 Rank 27 (Bottom Quartile)
P-SW2	SDS spend on adults 18+ as a % of total social work spend on adults 18+(LGBF)	2.76%	2.18%	2.39%	2.73%	2.62%		14/15 Rank 18 (Third Quartile). 13/14 Rank 13 (Second Quartile)
P-SW3	Percentage of service users 65+ with intensive needs receiving care at home. (LGBF)	36.3%	38.4%	53.6%	38.8%	30.72%		14/15 Rank 22 (Third Quartile). 13/14 Rank 14 (Second Quartile)
P-SW4	Percentage of adults satisfied with social care or social work services (LGBF)	51.7%		57%	42%	43%	-	14/15 Rank 22 (Third Quartile). 13/14 Rank 29 (Bottom Quartile)
P-SW5	The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	£351.30	£382.20	£390.84	£392.51	£377.86		14/15 Rank 14 (Second Quartile). 13/14 Rank 20 (Third Quartile)