

Adult, Social Care

Annual Performance Report 2016-17



Progress in delivery of strategic outcomes

"People in Midlothian will lead longer and healthier lives by getting the right advice, care, and support, in the right place, at the right time."

The creation of a new Health and Care Partnership provides an opportunity to make significant change in how we deliver health and care services. We aim to achieve this ambitious vision by changing the emphasis of services; we are fully committed to the principles of reducing inequalities, promoting opportunities and eliminating discrimination in line with the Equality Act and Human Rights legislation.

Integration: Local management arrangements changed on 1st June 2016, with two joint Heads of Service with responsibility for Primary Care and Older People, and Adult Services. These posts now manage services across health and social care. Work is underway to review the management structure. 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 progressing well. Consultation on the 2017-18 Directions document has been issued to NHS Lothian and Midlothian Council. Work on refreshing the Strategic Plan is underway. A Workforce Plan and a Financial Strategy are being developed and a Risk Register has been completed. The IJB (Integrated Joint Board) continues to meet formally and through Development Sessions as does the Strategic Planning Group and Audit and Risk Committee. Video conferencing facilities have been implemented in care homes, and a training programme began in February with 170 attendances to date over four sessions, with the capacity to deliver multi-disciplinary training to care home staff.

Older People: A consultation event and launch of the Older People's strategy was held in November 2016. Follow up information and consultation events have commenced and others will be scheduled for September and October this year. Newbyres care home has introduced 24 specialist dementia beds in order to provide a long term, homely setting for people with a diagnosis of dementia who are no longer able to live independently in their own home or who have been delayed from leaving a hospital setting. There continues to be significant challenges within the care at home sector and these are being mitigated through the provision of management and quality assurance support directly from Midlothian Council staff. These pressures are, in the main, being driven by the availability of carers to deliver the service and there is work underway to develop a robust recruitment campaign to promote caring as a career. There is also a further procurement process underway to introduce greater flexibility in to the delivery of care services across Midlothian and this will be in place from Q3 2017. An independent review of Midlothian's participation in the national testing of Alzheimer Scotland 8 Pillars model for people with dementia has commented that Midlothian perhaps has an ideal model whilst recognising the challenges of establishing an effective, fully integrated team. A multi-agency dementia steering group has been established to develop a 3 year dementia action plan. Outcomes focused performance monitoring frameworks are being introduced and agreed with community services within the third sector. The aim of this monitoring is to enable efficiencies by identifying opportunities for improved partnership projects. The Grassy Riggs project in Woodburn has opened and features a daily drop-in cafe for older people living in the Dalkeith/Woodburn area who are at risk from the adverse effects of social isolation and loneliness.

Learning Disabilities: The 12 houses for people with complex care needs in addition to their learning disability will be complete by the end of May 2017, after which people will start to move in on a phased basis. The Richmond Fellowship for Scotland have been appointed as the care provider. The project provides an opportunity to enhance local skills in the support of people with a learning disability and complex needs to live in local communities. One flat will be designated as a Place of Safety to prevent hospital admission. The day service review is drawing to a conclusion. The review will provide: a better understanding of whether we are providing the right day services, to the right people, in the right place, at the right time to achieve positive outcomes and best value; a better understanding of whether service is fair and equitable for all; a service model that delivers positive outcomes for service users in a creative and cost effective manner. Two Trumpets, The Midlothian Autism Strategy has been completed and its implementation is being overseen by the Midlothian Autism Strategy Group.

Physical Disabilities and Sensory Impairment: Big Lottery funding bid was unsuccessful but closer links formed with the Lifelong Learning and Employability Team, to ensure appropriate focus is given to those with physical disabilities who require support into or to continue in employment. Work is also continuing on all actions identified within the Physical Disability Action Plan, the area of improved communication in particular proving successful through the excellent, informative newsletters being published by ForwardMid. The training of volunteers by Audiology has been delayed due to staff shortages, but this will start on 4th May. The creation of an adult audiology clinic at the community hospital has had similar delays, but is still firmly on the agenda. Sensory impairment awareness training continues to be rolled out with particular focus on Midlothian Council care homes and care at home staff. The National British Sign Language Plan has been put out for consultation. Once finalised, Midlothian Council will be required to create a local plan, preparation for which is already underway through the work being done locally through the See Hear Strategy.

Long Term Conditions: MERRIT (Midlothian Enhanced Rapid Response and Intervention Team) now has an Advanced Practitioner Physiotherapist (APP), in post, who has started seeing people living in Midlothian with respiratory problems and is developing our Community Respiratory Service for people living with chronic obstructive pulmonary disease across Midlothian. Referrals are coming from the Respiratory Multi Disciplinary Team from the Royal Infirmary and Western General Hospitals, MERRIT and GP's. The APP will also provide support, education and training to increase the knowledge and experience of other physiotherapists working in Midlothian. An Anticipatory Care Nurse will be recruited to work with the APP from a case management perspective to support people to manage their condition and to refer/link people in to other community services as required.

Self Directed Support: Work is continuing to embed Self Directed Support into a 'business as usual' activity. Some development work has been delayed due to resourcing constraints and a need to prioritise operational activities. Ongoing service development is however taking into consideration requirements of Self Directed Support.

Substance Misuse: A Midlothian Core Group comprising of key stakeholders made a number of recommendations as to how the proposed 23% savings should be achieved. The Core Group's recommendations were approved by the MELDAP (Mid and East Lothian Drugs and Alcohol Partnership) Strategic Group at its January 2017 meeting.

Mental Health: Mental Health Access Points were launched in two locations in Midlothian in August and already the service is at full capacity. 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. Around half of those who have attended have been offered assessment for psychological therapies. The House of Care Wellbeing project was originally based at Newbattle Health Centre but has been expanded to another seven health centres throughout Midlothian. 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 new structure for Community Justice came into being on 31st March 2017 and local partnerships will now report to the national body, Community Justice Scotland. The Chief Executive of Community Justice Scotland spoke at the Community Safety and Justice Partnership Board meeting on 14th March and set out her vision for Community Justice in Scotland. This was generally well received and there was a lengthy discussion after the talk. The Community Justice Outcomes Improvement Plan was sent to Community Justice Scotland at the end of March and the plan is now on the Council's website. Over the next three years all partners will have to work closely together towards the objectives outlined in the plan.

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.

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	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17				Annual Target 2016/17	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
01. Provide an efficient complaints service	Number of complaints received (cumulative)	20	10	18	N/A	38		16:17: Data Only				
	Average time in working days to respond to complaints at stage 1	0.01	0.26	1.09	N/A	0.11		16:17: On Target		5	Number of complaints complete at Stage 1	17
											Number of working days for Stage 1 complaints completed on target	2
	Average time in working days to respond to complaints at stage 2	N/A	56	54.5	N/A	4.42		16:17: On Target		20	Number of complaints complete at Stage 2	19
											Number of working days for Stage 2 complaints to be Completed	84
	Percentage of complaints at stage 1 complete within 5 working days	100%	100%	66%	N/A	17.65 %		16:17: Off Target A Council wide review to raise awareness and understanding for staff and therefore improve performance is planned for 2017/18		95%	Number of complaints complete at Stage 1	17
Number of complaints at stage 1 responded to within 5 working days											3	
Percentage of complaints at stage 2 complete within 20 working days	N/A	0%	50%	N/A	52.63 %				95%	Number of complaints complete at Stage 2	19	
										Number of complaints at stage 2 responded to within 40 working days	10	



Making the Best Use of our Resources

Priority	Indicator	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17				Annual Target 2016/17	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
02. Manage budget effectively	Performance against revenue budget	£ 37.234 m	£ 39.141 m	£ 40.015 m	£ 40.122 m	£ 38.237 m		16:17: Off Target		£ 37.495 m		
03. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	12.73	3.36	6.45	9.25	11.61		16:17: On Target		11.87	Number of days lost (cumulative)	5,451.41
											Average number of FTE in service (year to date)	469.73

Corporate Health

Priority	Indicator	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17				Annual Target 2016/17	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
04. Complete all service priorities	% of service priorities on target / completed, of the total number	75.76%	80.95%	80.95%	85.71%	80.95%		16/17: Off Target 34 out of 42 actions on target. Detail of corrective action contained within body of report.		90%	Number of service & corporate priority actions	42
05. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	92%	91%	93%	90%	89%		16/17: Off Target Changes to the Living Wage and Sleepover rates continue to contribute to processing delays. New process being developed to ensure faster processing.		97%	Number received (cumulative)	14,047
06. Improve PI performance	% of PIs that are on target/ have reached their target.	64%	71.43%	70%	71%	66.67%		16/17: Off Target 10 out of 15 indicators on target. Corrective action contained within body of the report. There are a further 27 measures included for information only.		90%	Number of PI's on tgt/ tgt achieved	10
07. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%	100%	100%		16/17: On Target		100%	Number of high risks reviewed in the last quarter	2

Improving for the Future










Priority	Indicator	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17				Annual Target 2016/17	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
08. Implement improvement plans	% of internal/external audit actions progressing on target.	0%	0%	97.37%	14.81%	0%		16/17: Off Target 15 audit actions completed during Q4, with a further 12 remaining outstanding.		90%	Number of on target actions	0












Adult, Social Care Action report







Service Priority Actions

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.01.01	01. Health Inequalities	The Adults & Social Care Service will participate in and contribute to the area targeting projects	31-Mar-2017		70%	16/17: Off Target Strategic Group has reconvened, with focus on small groups and partnership approaches so far.
ASC.S.01.02		Social care staff will be trained on inequalities and poverty	31-Mar-2017		100%	16/17: Complete 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 233 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		100%	16/17: Complete Links to Criminal Justice (Spring) and other services established.
ASC.S.02.01	02. Review the model of care management	Reduce the waiting times for occupational therapy and social work services	31-Mar-2017		100%	16/17: Complete Significant improvements made in numbers and length of wait. Demographic pressures mean that this remains a challenge.
ASC.S.02.02		Address the lack of capacity to undertake care package reviews	31-Mar-2017		100%	16/17: Complete Review Team up and running, and a clear plan in place to address this ongoing work.
ASC.S.02.03		Strengthen joint working with health colleagues	31-Mar-2017		75%	16/17: Off Target Management review across Health and Social Care currently underway, and progress will continue once this is complete.
ASC.S.02.04		Social Care staff will have more involvement in anticipatory care planning	31-Mar-2017		100%	16/17: Complete Work continues with Health colleagues to improve anticipatory care planning.
ASC.S.02.05		Fully implement the uptake of Self Directed Support	31-Mar-2017		100%	16/17: Complete There will be a requirement for ongoing work to continue to develop Self Directed Support approaches. This will be progressed through ongoing improvement.

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.03.01	03. Supporting service users through the use of technology	Introduce community frailty assessments	31-Mar-2017		100%	16/17: Complete This has shifted from a self assessment to a post-hoc assessment during routine GP interaction as part of a primary care plan.
ASC.S.04.01	04. Carers	Continue to work with voluntary organisations to seek to identify hidden carers	31-Mar-2017		100%	16/17: Complete Carers Action Midlothian review in progress. Seeking to try new initiatives to attract wider involvement. Carer identification remains a key issue in the new strategy.
ASC.S.04.02		Review the carer assessment process in light of new legislation	31-Mar-2017		100%	16/17: Complete Awaiting guidance from Scottish Government necessary to inform direction. Selected for pilot work in preparation for the new Act during 2017/18.
ASC.S.04.03		Develop a more structured and comprehensive approach to the provision of emergency planning for carers	31-Mar-2017		100%	16/17: Complete This remains a priority for continuous development, and will be included in the new carer strategy.
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		100%	16/17: Complete Advanced Practitioner Physiotherapist (APP) started and is taking referrals from Respiratory Multi-Disciplinary Team (MDT) in the Royal Infirmary and has been added to the MDT group who meet at the Western General Hospital. Referrals are also generated via MERRIT (Midlothian Enhanced Rapid Response and Intervention Team) and GP's. The APP will be instrumental in providing support and education to the other Physiotherapists in the team and provide education to the wider MERRIT team including our Care Support Workers. Anticipatory Care Nurse to support the APP and MERRIT is in the process of being recruited. Recruitment is taking place for 2 nurses to join Hospital at Home Team to enable an increase in the 'virtual ward'. Care Support Workers have been recruited and should start within the next 4-6 weeks. One post has been readvertised.
ASC.S.05.02		Increase the range of intermediate care options within the community	31-Mar-2017		100%	16/17: Complete
ASC.S.05.03		Expand the 7 day working capacity of the Hospital at Home Team to manage 10 people at any one time	31-Mar-2017		100%	16/17: Complete Hospital at Home nurses working 7 days per week.
ASC.S.05.04		Develop a business case for the re-provision of Highbank care home to become a purpose built intermediate care home	31-Mar-2017		100%	16/17: Complete
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		100%	16/17: Complete









Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.05.06	05. Older People	Implement the Falls Strategy	31-Mar-2017		100%	16/17: Complete
ASC.S.05.07		Development of the Joint Dementia Service to manage crisis referrals for people with dementia and their families	31-Mar-2017		100%	16/17: Complete Duty trial fully operational. Successfully accepting referrals via Duty and Internal. Two Duty Workers work 0.5 week each. (Backup cover for leave and absence continues to be provided by Duty). Able to successfully offer timely response to identified urgent needs and concerns. Duty response has encompassed range of interventions including care at home, respite, permanent care arrangements. Interim review of pilot ongoing. To be more fully reviewed June 2017. Important to ensure service maintains right balance between demands of duty work and routine/continuing complex casework.
ASC.S.05.08		Develop Day Support services to older people focussing on community hubs and a day support referral panel	31-Mar-2017		100%	16/17: Complete
ASC.S.05.09		Reprovision Gore Avenue extra care housing	31-Dec-2017		15%	16/17: Off Target Invitations to tender expected to be publicised by the end of April. Provisional completion date of 2020.
ASC.S.05.10		Increase support to all care homes through a Care Home Nurse Advisor	31-Mar-2017		100%	16/17: Complete
ASC.S.06.01	06. Adults - Mental Health	Improve access to early intervention including through Gateway Services	31-Mar-2017		100%	16/17: Complete Improved numbers in Penicuik means both services running at full capacity
ASC.S.06.02		Address the physical health needs by providing drop in sessions in the community hospital.	31-Mar-2017		100%	16/17: Complete
ASC.S.06.03		Address the physical health needs through the Community Inequalities Team	31-Mar-2017		100%	16/17: Complete The Community Health Inequalities Team continues to offer a service to adults in homeless accommodation, women involved with Spring Project, people with mental health and/or substance misuse issues and people in other settings/other groups.
ASC.S.06.04		Strengthen self-management through peer support and House of Care services	31-Mar-2017		90%	16/17: Off Target House of Care expanded in December 2016 and working well. Peer support element not yet operational, but work is underway.
ASC.S.07.01	07. Adults - Learning Disability	Develop and implement 12 new homes specifically to meet the housing needs for people with complex learning disabilities	31-Mar-2017		100%	16/17: Complete Building due to be handed over mid May, with individuals due to move in.
ASC.S.07.02		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		100%	16/17: Complete Work underway with NHS Lothian colleagues to develop local responses to challenging behaviour.





Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.08.01	08. Adults substance misuse	Reshape local services following reduction in funding	31-Mar-2017	✔	100%	16/17: Complete The Strategic Group approved the Midlothian Core Group's recommendations and letters outlining the reduction in funding for 2017-18 were sent to services.
ASC.S.08.02		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	✔	100%	16/17: Complete Post treatment services funding reductions were kept to a minimum with funding from one vacancy used to appoint a 0.5 WTE (Whole Time Equivalent) dedicated worker for the Horizons Recovery Cafe. The final report on establishing a Midlothian and East Lothian recovery network (Recovery Connections) was delivered to the Strategic Group at its April meeting. The group agreed to continue providing support to the fledgling recovery network.
ASC.S.09.01	09. Adults - Offenders	Continue and expand the SPRING service provision in line with funding	31-Mar-2017	✔	100%	16/17: Complete Sustainability Plan now developed and in place.
ASC.S.09.02		The new service to be provided by the Communities Health Inequalities Team will include specific targeting of people who have offended	31-Mar-2017	✔	100%	16/17: Complete
ASC.S.09.03		Extend Multi-Agency arrangements to include violent offenders	31-Mar-2017	✔	100%	16/17: Complete Processes in place and ready to be implemented if necessary.
ASC.S.10.01	10. Adults with long term conditions, disability and sensory impairment	Lifestyle management work will be progressed with the Thistle Project to support the House of Care	31-Mar-2017	✔	100%	16/17: Complete Wellbeing service now operational in 8 GP practices.
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	✔	100%	16/17: Complete Community Health Inequalities Team continuing to work with homelessness and other local services.
ASC.S.10.03		OT provided lifestyle management work will be progressed to support the House of Care	31-Mar-2017	✘	90%	16/17: Off Target Occupational therapy lifestyle management work now a part of Wellbeing Service Groups re-established in January 2017.
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	✔	100%	16/17: Complete
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	✔	100%	16/17: Complete Addressed by Fair Access Policy and review of respite and day services.







Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.10.06	10. Adults with long term conditions, disability and sensory impairment	Coordinate the production of clear information on the availability and suitability of taxis available in Midlothian	30-Apr-2017		15%	16/17: Off Target Progress stalled, due to capacity issues, but work will continue in 17/18.
ASC.S.10.07		Coordinate the development and promotion of a resource pack to inform and support employers to recruit people with disabilities	31-Mar-2017		30%	16/17: Off Target Meetings scheduled early in quarter 1 17/18 to ensure progress continues.
ASC.S.10.08		Coordinate the provision of hearing aid maintenance and repair clinics in libraries including the recruitment of volunteers	30-Apr-2017		75%	16/17: Off Target Volunteers recruited, training dates set, to be provided by Audiology.
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		100%	16/17: Complete Now being picked up and feeding into NHS workflows to ensure this continues.









Adult, Social Care Performance Indicator Report











Service Priority Performance Indicators

PI Code	Priority	PI	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			Annual Target 2016/17	Benchmark	
			Value	Value	Value	Value	Status	Short Trend	Note			
ASC.S.01.02a	01. Health Inequalities	Increase the number of staff trained in inequalities & poverty		85	123	147	233			16/17: Data Only		
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	25 weeks	13 weeks			16/17: Off Target Significant improvements made in numbers and length of wait. Demographic pressures mean that this remains a challenge.	6 weeks	
ASC.S.02.05a		Improved reported outcomes by service users	87.57%	87.8%	86.4%	87.73%	86.6%			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. 323 out of 373 people responded positively to at least 66% of the outcomes focussed questions they were asked.	75%	
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%	89%	89%	89%	89%			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%).	85%	

PI Code	Priority	PI	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			Annual Target 2016/17	Benchmark	
			Value	Value	Value	Value	Value	Status	Short Trend			Note
											Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting. Current survey was carried out during Q4 and is in the process of being analysed.	
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%	90.48%	90.48%	90.48%	90.48%			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. Current survey was carried out during Q4 and is in the process of being analysed.	75%	
ASC.S.02.05e		The proportion of people choosing SDS option 1	5.1%	5.4%	5.9%	5.9%	6.02%			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 135 out of 2,241 individuals choosing option 1, and includes those under the age of 18.		

PI Code	Priority	PI	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			Annual Target 2016/17	Benchmark	
			Value	Value	Value	Value	Value	Status	Short Trend			Note
ASC.S.02.05f	02. Review the model of care management	The proportion of people choosing SDS option 2	5.2%	4.8%	4.5%	4.9%	4.73%			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 106 out of 2,241 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%	93.2%	93.3%	93.2%	93.35%			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 2,092 out of 2,241 individuals choosing option 3, and includes those under the age of 18.		
ASC.S.02.05h		The proportion of people choosing SDS option 4	7.4%	4%	3.7%	4%	4.11%			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 92 out of 2,241 individuals.		

PI Code	Priority	PI	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			Annual Target 2016/17	Benchmark	
			Value	Value	Value	Value	Value	Status	Short Trend			Note
BS.ASC.S.02.05b	02. Review the model of care management	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%	83%	83%	83%	83%			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. Current survey was carried out during Q4 and is in the process of being analysed.	83%	
ASC.S.04.02a	04. Carers	Increase the number of people receiving an assessment of their care needs (Carer Conversations)	126	33	66	84	111			16/17: Off Target Investigation required to determine reasons for drop in numbers of carer conversations, and also to establish whether target set was appropriate.	138	
ASC.S.04.02b		The ratio of workflow which is a Carer's Conversation	New for 16/17	4.23%	4.5%	4.07%	3.92%			16/17: Data Only Workflow in this measure refers to assessments, reviews and carer's conversations completed during April 2016-March 2017.		
ASC.S.05.01a	05. Older People	Increase the proportion of MERRIT callouts which result in a fall assessment	23.57%	38%	36.96%	50.35%	37.98%			16/17: On Target This relates to 1,432 out of 3,770 callouts.	30%	









PI Code	Priority	PI	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			Annual Target 2016/17	Benchmark	
			Value	Value	Value	Value	Value	Status	Short Trend			Note
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%	N/A	0%	1.03%	0.75%			16/17: Off Target Whilst the instances of individuals returning home with no package of care has decreased, clients leaving Highbank typically have complex needs and the packages of care put in place allows them to return home instead of being admitted to a care home.	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%	N/A	0%	11.3%	14.29%			16/17: Data Only		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%	0%	0%	21.6%	11.3%			16/17: On Target This relates to 15 out of 133 admissions to intermediate care.	15%	Baseline of 39% identified at end of 14/15.
ASC.S.05.05a		Reduce the rate of per 1,000 population emergency admissions for people aged 75+	44.96	354	346	324	314			16/17: Data Only		
ASC.S.05.05b		Reduce the number of patients delayed in hospital for more than 72 hours at census date	1	7	9	17	20			16/17: Data Only Whilst there were twenty patients delayed for more than 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.		









PI Code	Priority	PI	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			Annual Target 2016/17	Benchmark	
			Value	Value	Value	Value	Value	Status	Short Trend			Note
ASC.S.05.08a	05. Older People	Increase the number of older people attending day centres	New for 16/17	279	203	196	182		↓	16/17: Data Only. Woodburn Day Centre has closed, 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.05.01b		Decrease the percentage of falls which result in a hospital admission for clients aged 65+	4.79%	1.19%	4.07%	4.63%	5.03%		↓	16/17: On Target This refers to 72 out of 1,432 falls.	10%	
BS.ASC.S.05.05c		Maintain at zero the number of patients delayed in hospital for more than 2 weeks at census date	1	2	17	11	11		↓	16/17: Off Target The current performance is a reflection of the challenges within care at home services in Midlothian and work is underway to address these issues. To ensure patients are in a more suitable environment, the focus has been to reduce the number of delays within acute settings by maximising the use of Midlothian Community Hospital.	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	N/A	59		↑	16/17: Data Only		
ASC.S.09.01a	09. Adults - Offenders	Numbers accessing SPRING service		13	15	17	42		↑	16/17: Data Only 42 people engaging beyond initial meeting.		
ASC.S.09.03a		Monitor the number of violent offenders with MAPPA involvement		0	0	0	0			16/17: Data Only		

PI Code	Priority	PI	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			Annual Target 2016/17	Benchmark	
			Value	Value	Value	Value	Value	Status	Short Trend			Note
ASC.S.10.04a	10. Adults with long term conditions, disability and sensory impairment	The number of people attending the Transforming Care after Treatment drop in centre in Lasswade	New for 16/17	5	13	17	27			16/17: Data Only		
ASC.S.10.04b		The number of people receiving an holistic needs assessment		9	10	14	24			16/17: Data Only It is worth noting that in the period January - March the service saw a 43% increase in referrals since opening in June.		
ASC.S.10.09a		Number of people receiving training		85	123	147	233			16/17: Data Only		

Balanced Scorecard Indicators

PI Code	Performance Indicator	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17		Status	Note
		Value	Value	Value	Value	Value	Target		
BS.ASC.01	Number of carers who feel valued and supported to continue in their role	55%	55%	55%	55%	55%	85%		16/17: Off Target In the 2015 Carer Survey 57 out of 105 carers responded positively to the question "I feel valued and supported as a carer". In 2015 the survey was also distributed by Alzheimer Scotland, Woodburn and St David's Day Centres in order to reach more carers. As part of internal processes Carers Conversations also take place, and these contain a number of outcomes based questions which include questions about carer satisfaction. Current survey is currently being carried out.
BS.ASC.02	Maximise the no. of people accessing short breaks	827	N/A	546	603	700	Data only		16/17: Data Only
BS.ASC.03	Percentage of people who say that have a say in the way their care is provided	78%	78%	78%	78%	78%	78%		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. Current survey currently being analysed.

PI Code	Performance Indicator	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			
		Value	Value	Value	Value	Value	Target	Status	Note
BS.ASC.04	Number of clients with new post diagnostic support	46	N/A	100	100	200	Data only		16/17: Data Only This breaks down as 57 through Alzheimer Scotland and 143 through nurse led clinic.
BS.ASC.05	Reduce the number of emergency admissions for people aged 75+	3,876	2,327	2,273	2,226	2,257	Data only		16/17: Data Only
BS.ASC.06	Number of women offenders from Midlothian who engage with support services	New for 16/17	N/A	9	9	9	Data only		16/17: Data Only
BS.ASC.07	% of satisfactory complete Community Payback Orders	New for 16/17	73%	82.6%	91.72%	78.7%	80%		16/17: Off Target Whilst the final completion rate falls below the target set, the shortfall is not sufficient to cause concern within the service.
BS.ASC.S.0 2.05b	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%	83%	83%	83%	83%	83%		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. Current survey was carried out during Q4 and is in the process of being analysed.
BS.ASC.S.0 5.01b	Decrease the percentage of falls which result in a hospital admission for clients aged 65+	4.79%	1.19%	4.07%	4.63%	5.03%	10%		16/17: On Target This refers to 72 out of 1,432 falls.
BS.ASC.S.0 5.05c	Maintain at zero the number of patients delayed in hospital for more than 2 weeks at census date	1	2	17	11	11	0		16/17: Off Target The current performance is a reflection of the challenges within care at home services in Midlothian and work is underway to address these issues. To ensure patients are in a more suitable environment, the focus has been to reduce the number of delays within acute settings by maximising the use of Midlothian Community Hospital.
M.AHC.ASC. 01.01a	Number of Health & Social Care staff who have participated in face to face or on-line training (in health inequalities)	New for 16/17	Annual Measure			193	Data only		16/17: Data Only 6 Bite Size Sessions with 76 attendees. Three Good Conversation Programmes with 39 learners. H2 figures totals 115.

PI Code	Performance Indicator	2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17	2016/17			
		Value	Value	Value	Value	Value	Target	Status	Note
M.AHC.ASC.05.01a	The number of service users/patients supported through Community Health and Inequalities Team	New for 16/17	Annual Measure		3,736		Data only		16/17: Data Only Cafes/Day Centres - 65 Volunteer Midlothian - 308 Alzheimer's Scotland - 120 VOCAL (Voices of Carers Across Lothian) - 949 British Red Cross - 325 Local Area Coordinators - 100 Assisted Discharge - 19
M.AHC.ASC.08.01a	Number of Health & Social Care staff who have participated in face to face or on-line training	New for 16/17	Annual Measure		0		Data only		16/17: Data Only Universal Credit live service commenced in Midlothian from 22/3/17. Welfare Reform Awareness Training to be rolled out 2017/18.
M.IOM.ASC.05.01a	Offer immediate mental health assessments through the new Gateway pilot project. Run 2 sessions a week across Midlothian and provide 200 mental health assessments in 2016/17	New for 16/17	Annual Measure		395	200			16/17: On Target
SW1	Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£25.90	Annual Measure		N/A	N/A		The Local Government Benchmarking Framework data for 2016/17 will be published in January 2018.	
SW2	SDS spend on adults 18+ as a % of total social work spend on adults 18+(LGBF)	3.85%	Annual Measure		N/A	N/A			
SW3	Percentage of service users 65+ with intensive needs receiving care at home. (LGBF)	37%	Annual Measure		N/A	N/A			
SW4	Percentage of adults satisfied with social care and social work services (LGBF)	37%	Annual Measure		N/A	N/A			
SW5	The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	£392.00	Annual Measure		N/A	N/A			

Published Local Government Benchmarking Framework Adult, Social Care



LGBF Category - Adult, Social Care

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	External Comparison
		Value	Value	Value	Value	Value	Value	
SW1	Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£16.23	£16.98	£12.46	£23.81	£28.22	£25.90	15/16 Rank 23 (Third Quartile). 14/15 Rank 30 (Bottom Quartile).
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%	3.85%	15/16 Rank 15 (Second Quartile). 14/15 Rank 18 (Third Quartile).
SW3	Percentage of service users 65+ with intensive needs receiving care at home. (LGBF)	36.3%	38.4%	53.6%	38.8%	30.72%	37%	15/16 Rank 12 (Second Quartile). 14/15 Rank 22 (Third Quartile).
SW4	Percentage of adults satisfied with social care and social work services (LGBF)	51.7%		57%	42%	43%	37%	15/16 Rank 31 (Bottom Quartile). 14/15 Rank 29 (Bottom Quartile).
SW4a	Percentage of adults receiving any care or support who rate it as excellent or good. (LGBF)	New measures for 2014/15				82%	73%	15/16 Rank 32 (Bottom Quartile) 14/15 Rank 28 (Bottom Quartile)
SW4b	Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life. (LGBF)					86%	86%	15/16 Rank 15 (Second Quartile) 14/15 Rank 12 (Second Quartile)
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	£392.00	15/16 Rank 22 (Third Quartile). 14/15 Rank 14 (Second Quartile).