

## 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."**

### Delivering Excellence

**Transformation:** The Adult Health and Social Care service continues to undergo redesign as required by the Integration agenda. The 2016-19 Strategy and 2017-18 Delivery Plan outlines a major programme of service changes designed to promote prevention and recovery. The enablers to achieve include improved partnership working, public engagement and working with communities. A current example of transformation is the imminent opening of accommodation in Penicuik providing a more local and more cost effective way of supporting 12 people with complex needs. The three major programmes of redesign being undertaken are Learning Disability Day Services; Care at Home; and Care Packages.

**Efficiency:** The budget recovery programme initiated in June 2016 and now referred to as the *Realistic Care Realistic Expectations* programme continues with an emphasis on stronger budget control systems; clearer policies governing resource allocation; and a major programme of individual case reassessments. Recent activity includes Council approval for policies of "Fair Allocation of care" and "Transport for Social Care Users".

**Stopping Reducing Services:** There is limited scope for stopping services as oppose to finding new, more cost effective ways of delivering them. The application of new technology is an ongoing programme with a current focus upon reducing reliance upon 'sleep over' cover. Another recent example of changing approaches to reduce costs has been the promotion of Appetito frozen meals rather than preparation of meals by home carers.

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:** A Delivery Plan for Health and Care for 2017-18 has been compiled and disseminated and Directions have been issued to NHS Lothian and Midlothian Council. Work continues on the development of a Partnership Workforce Plan. An outline financial strategy has been agreed alongside the establishment of the Realistic Care Realistic Expectations Board intended to ensure social care expenditure is controlled within the reducing budgets available. A number of new members have been appointed to the Integrated Joint Board and a series of development sessions have been arranged. Local management arrangements are now in place for the NHS Community Learning Disability Team and work continues towards the establishment of joint teams in both learning disability and substance misuse.

**Older People:** The Ageing Well project continues to provide a broad range of health promoting activities through having a committed and diverse volunteer pool who are active within the community. The publication of Scotland's third dementia strategy and publication of the Scottish Governments findings from the independent evaluation from testing the 8 pillars model of community support for people with dementia has resulted in the establishing of a Dementia Steering group to provide strategic oversight and direction to the delivery of dementia care within Midlothian. The shift in the balance of care towards providing more care at home has experienced success and failures over the past year. Projects which aim to improve the coordination care across primary and social care are set up. The lack of capacity to provide care at home is impacting on those people delayed in hospital. Newbyres has seen the introduction of nurses and has developed two dementia wings totalling 24 beds. There are plans to increase the amount of extra care housing in Midlothian following the success of Cowan Court. Improving the quality of care in care homes continues to be supported by a Care Home Nurse advisor and the introduction of Video conferencing to support training across care home staff that has already provided training to over 300 staff.

**Learning Disabilities:** Teviot Court, the development of 12 houses for people with Complex Care needs in Penicuik, is now complete and people will be moving in from the beginning of August. One flat is designated as a Place of Safety designed to prevent unnecessary hospital admissions. The review of day services continues and a new day service policy for people with learning disabilities will be considered by Council at the end of August. Two Trumpets, the Midlothian autism strategy, was launched during June with an exhibition of work by artist Gayle Nelson, entitled 'The Triad of Impairments and Other Works' at Fairfield House. The new short break/respite facility in Woodburn will start accommodating people during August.

**Physical Disabilities/Sensory Loss:** The JPDPG (Joint Physical Disability Planning Group) continues to focus on improving the availability of information and the effective communication of it. A communications group has been formed to ensure a brief newsletter follows each planning group meeting, to be shared with a wide audience, keeping them updated on the work being undertaken and encouraging input and exchange of ideas. The proposed training of volunteers by Audiology took place on 4th May as planned. Around 10 people attended and were shown how to do basic maintenance and repair on hearing aids. A second session is to be arranged. Repair and maintenance will however be part of the proposed Adult Audiology Clinic at the Community Hospital in Bonnyrigg. This is expected by the end of July. Awareness training sessions are ongoing, having also been delivered to Midlothian Firefighters. This highlights the risks associated with sensory loss to be considered and recorded during home safety visits. It is also the first step to encourage increased referrals between our two organisations. The consultation on the British Sign Language National Plan closed at the end of May, now awaiting publication.

**Self Directed Support:** Work is continuing to embed Self Directed Support into a 'business as usual' activity. Development work is focussed on organising back office activities to support flexibility choice and control in service provision. Ongoing service development is however taking into consideration requirements of Self Directed Support.

**Substance Misuse:** Peer Support Project was an integrated approach delivered in partnership between service users, GPs, secondary care and non-statutory agencies who introduced peer support for substance misuse into a general practice in Midlothian. The pilot was effectively deployed, structured and implemented with effective outcome measures and tools put in place to determine the success of the work. The pilot demonstrated some very positive outcomes and there is strong evidence that the learning and innovation potential was acknowledged in the recommendations to expand the pilot more widely.

**Criminal Justice/Community Justice:** The Unpaid Work service is being reviewed and the revised job descriptions have been approved. There will now be a consultation period with affected staff members. The aim of this is to develop a service where individuals receiving a Community Payback Order with a condition of unpaid work will progress through a learning and development pathway. This will enable them to develop new skills, achieve qualifications, make reparation to their communities and improve their community integration. The revised service will involve Unpaid Work staff delivering and assessing training aimed at helping people involved in offending increase employability skills and make positive changes to their lifestyle. The service will therefore focus on reducing reoffending as well as supporting people to successfully complete their Unpaid Work hours. In relation to Community Justice, a public health consultant from NHS Lothian chairs the Community Safety and Justice Partnership Board. This reflects the importance of Health as a partner agency in reducing reoffending. Community Justice Scotland representatives are attending the Community Justice Working Group meeting on 7th August and will then meet with relevant staff to provide feedback on the Community Justice Outcomes Improvement 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. The decision to fund the Living Wage in the care sector also provides an opportunity to create a more sustainable and stable workforce. Two care homes remain under large scale investigation.

### Suggested changes to priorities in Service Plan

#### Actions

ASC.S.05.06 "Implement the falls strategy" - **changed to** "Refresh and implement the falls strategy"

ASC.S.05.10 "Increase support to all care homes through a Care Home Nurse Advisor" - **changed wording to** "Deliver a series of clinical training sessions to care homes"

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" **changed wording to** "Maintain service funded by MacMillan to support individuals following cancer treatment to address lifestyle issues including employment, exercise, diet, counselling and social activities."

#### Indicators

ASC.S.05.01c "Increase the number of patients supported through Hospital at Home" - **removed**, duplicate of ASC.S.05.03a

# Adult Social Care Performance Indicator summary

## Quarter 1 – 2017/18









### Outcomes and Customer Feedback

Priority	Indicator	2016/17	Q1 2016/17	Q1 2017/18				Annual Target 2017/18	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
01. Provide an efficient complaints service	Number of complaints received (cumulative)	38	10	11		Q1 17/18: Data Only				
01. Provide an efficient complaints service	Average time in working days to respond to complaints at stage 1	0.12	13	22.17		Q1 17/18: Off Target Social care complaints timelines now match corporate timelines and work continues to simplify recording and reporting processes in order to effectively identify and progress complaints within timelines.		5	Number of complaints complete at Stage 1	6
									Number of working days for Stage 1 complaints completed on target	133
01. Provide an efficient complaints service	Average time in working days to respond to complaints at stage 2	4.42	56	11.2		Q1 17/18: On Target		20	Number of complaints complete at Stage 2	5
									Number of working days for Stage 2 complaints to be Completed	56
01. Provide an efficient complaints service	Percentage of complaints at stage 1 complete within 5 working days	17.65 %	100%	0%		Q1 17/18: Off Target Social care complaints timelines now match corporate timelines and work continues to simplify recording and reporting processes in order to effectively identify and progress complaints within timelines.		95%	Number of complaints complete at Stage 1	6
									Number of complaints at stage 1 responded to within 5 working days	0
01. Provide an efficient complaints service	Percentage of complaints at stage 2 complete within 20 working days	52.63 %	0%	100%		Q1 17/18: On Target		95%	Number of complaints complete at Stage 2	5
									Number of complaints at stage 2 responded to within 40 working days	5



### Making the Best Use of our Resources

Priority	Indicator	2016/17	Q1 2016/17	Q1 2017/18				Annual Target 2017/18	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
02. Manage budget effectively	Performance against revenue budget	£ 38.237 m	£ 39.141 m			Q1 17/18: Performance against budget will be reported to the Council in August				
03. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	11.61	3.36	2.95		Q1 17/18: On Target		11.87	Number of days lost (cumulative)	1,350.27
									Average number of FTE in service (year to date)	457.07

### Corporate Health









Priority	Indicator	2016/17	Q1 2016/17	Q1 2017/18				Annual Target 2017/18	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
04. Complete all service priorities	% of service priorities on target / completed, of the total number	80.95 %	80.95 %	92.1%		<b>Q1 17/18:</b> On Target 35 out of 38 actions on target		90%	Number of service & corporate priority actions	35
									Number of service & corporate priority actions on tgt/completed	
05. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	89%	91%	97%		<b>Q1 17/18:</b> On Target		97%	Number received (cumulative)	8,619
									Number paid within 30 days (cumulative)	8,323
06. Improve PI performance	% of PIs that are on target/ have reached their target.	66.67 %	71.43 %	80%		<b>Q1 17/18:</b> Off Target 8 out of 10 indicators on target. Detail contained in main report. There are a further 21 indicators included for data only.		90%	Number of PI's on tgt/ tgt achieved	8
									Number of PI's	10
07. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%		<b>Q1 17/18:</b> On Target		100%	Number of high risks reviewed in the last quarter	2
									Number of high risks	2










### Improving for the Future











Priority	Indicator	2016/17	Q1 2016/17	Q1 2017/18				Annual Target 2017/18	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
08. Implement improvement plans	% of internal/external audit actions progressing on target.	0%	0%	0%		<b>Q1 17/18:</b> Off Target 5 audit actions completed during Q1, services continue to address a further 9.		90%	Number of on target actions	0
									Number of outstanding actions	9

# 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-2018		25%	<b>Q1 17/18:</b> On Target Range of small projects to address inequalities in place in all three areas.
ASC.S.01.02		Social care staff will be trained on inequalities and poverty	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target 22 staff trained during Q1.
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-2018		25%	<b>Q1 17/18:</b> On Target A member of SW staff has been identified as the link between the new services such as Wellbeing and Mental Health Access Point, and the Community Care Team, providing advice on appropriate referrals and circulating a monthly email update on developments; contact information etc.
ASC.S.02.01	02. Review the model of care management	Reduce the waiting times for occupational therapy and social work services	31-Mar-2018		15%	<b>Q1 17/18:</b> Off Target Work continues to address challenges. Demand for services remains high.
ASC.S.02.02		Address the lack of capacity to undertake care package reviews	31-Mar-2018		20%	<b>Q1 17/18:</b> Off Target Work continues to address challenges. Demand for services remains high.
ASC.S.02.03		Strengthen joint working with health colleagues	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Work progressing to develop more joined up arrangements in Learning Disability, Substance Misuse and Mental Health.
ASC.S.02.04		Social Care staff will have more involvement in anticipatory care planning	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Planning meetings for Anticipatory Care Planning (ACP) have taken place. Pilot of the updated national ACP tool to take place in Newbyres care home and Penicuik Leadership Collaborative, a project working the housebound in Penicuik. These are at the planning stage, but making good progress. Working group taking forward Penicuik project with external support.
ASC.S.02.05		Fully implement the uptake of Self Directed Support	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target

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-2018		25%	<b>Q1 17/18:</b> On Target In progress, finalising cost models with supplier. Assessments will be available to all Midlothian practises within the GP practice software. Now considering purchasing a portal that will bring in aggregate view of frailty scores across Midlothian and still need to consider how having this awareness builds into a comprehensive plan for preventative intervention at an individual level.
ASC.S.04.01	04. Carers	Continue to work with voluntary organisations to seek to identify hidden carers	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Carer Strategy in final stages, identifying approaches to identify hidden carers.
ASC.S.04.02		Review the carer assessment process in light of new legislation	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Currently undertaking Scottish Government pilot work using tests of change in relation to different provisions within the Carers Act, focussing on Adult Carer Support Plans and Emergency Planning.
ASC.S.04.03		Develop a more structured and comprehensive approach to the provision of emergency planning for carers	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target In addition to pilot work being carried out for Scottish Government, VOCAL (Voices of Carers Across Lothian) assisting with work involving Adult Carer Support Plans and Emergency Planning.
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-2018		25%	<b>Q1 17/18:</b> On Target MERRIT (Midlothian Enhanced Rapid Response Team) rationale report for divisional management team just about completed to review current service and recommendations for future possible developments. Advanced Practitioner Physiotherapist now in post and working closely with the Respiratory Multi Disciplinary team in the Royal Infirmary to prevent hospital admissions and support early discharge from respiratory wards. Discharge to Assess model being explored and will be included in the report mentioned above. Hospital at Home nurses now in post. Virtual ward increased to 15 with the expectation of increasing to 20 once nurses have undergone appropriate orientation and relevant skills/competencies have been completed.
ASC.S.05.02		Increase the range of intermediate care options within the community	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Staff recruited to Hospital at Home service.
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-2018		25%	<b>Q1 17/18:</b> On Target Fifteen virtual beds now in place, with plans to expand to 20 in the near future.
ASC.S.05.04		Develop a business case for the reprovision of Highbank care home to become a purpose built intermediate care home	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Rationale Report produced.
ASC.S.05.05		Develop Inreach Hospital Discharge Team	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Inreach team now working in Midlothian Community Hospital.













Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.05.06	05. Older people	Refresh and implement the Falls Strategy	31-Mar-2018		15%	<b>Q1 17/18:</b> Off Target Awaiting recruitment
ASC.S.05.07		Development of the Joint Dementia Service to manage crisis referrals for people with dementia and their families	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Duty service now fully operational and embedded in team operation. Further work is underway to provide summary information to GPs - supporting referral pathway from primary care and improving clarity on what defines a crisis referral. Improved screening of urgent referrals is also under review with consideration being given to the trial of a dedicated triage/screening tool. Close liaison with Duty Social Work team is working well, helping to determine appropriate response to crisis referrals for which Dementia is a significant contributing factor.
ASC.S.05.08		Develop Day Support services to older people focussing on community hubs and a day support referral panel	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target
ASC.S.05.09		Reprovision Gore Avenue extra care housing	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Tender closing in July.
ASC.S.05.10		Deliver a series of clinical training sessions to care homes	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Wound care sessions delivered during Q1.
ASC.S.06.01	06. Adults - Mental Health	Improve access to early intervention including through mental health access point	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Access point is now well established and seeing good numbers of people.
ASC.S.06.02		Address the physical health needs by providing drop in sessions in the community hospital.	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Drop-in health and wellbeing assessments continue to be available from the CHIT (Community Health Inequalities Team) for people in touch with mental health services. During Q1 A total of 24 people attended for a CHIT appointment from Orchard Centre, Glenesk Centre and Recovery Cafe.
ASC.S.06.03		Address the physical health needs through the Community Inequalities Team	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Drop-in health and wellbeing assessments continue to be available from the CHIT (Community Health Inequalities Team) for people in touch with local services. During Q1 At total of 44 people attended for a CHIT appointment from Homeless hostels, Women's Aid, Orchard Centre, Glenesk Centre, Recovery Cafe and others. There is also work with women involved with the Spring Programme and pre-diabetes courses planned for Q2.
ASC.S.06.04		Strengthen self-management through peer support and House of Care services	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Wellbeing service now fully established in eight GP practices, and to date over 800 people have been referred to the service since it started.
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-2018		25%	<b>Q1 17/18:</b> On Target Teviot Court in Penicuik now complete. Now working to ensure robust service is in place when residents start to move in August.



























Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.07.02	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-2018		25%	<b>Q1 17/18:</b> On Target Work continues Lothian-wide to disaggregate Challenging Behaviour Team, which will strengthen services locally in conjunction with staff at Cherry Road and Teviot Court.
ASC.S.08.01	08. Adults - Substance Misuse	Reshape local services following reduction in funding	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target
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-2018		100%	<b>Q1 17/18:</b> Complete
ASC.S.09.01	09. Adults - Offenders	Continue and expand the SPRING service provision in line with funding	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Plan to make Team Leader and Social Worker posts fixed term for two years.
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-2018		25%	<b>Q1 17/18:</b> On Target A nurse from CHIT (Community Health Inequalities Team) co-facilitates wellbeing sessions at the Spring Service. Women are encouraged to attend the Midlothian Community Hospital drop-in service for 1:1 support.
ASC.S.09.03		Extend Multi-Agency arrangements to include violent offenders	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Arrangements in place and ready to implement if necessary.
ASC.S.10.04	10. Adults with long term conditions, disability and sensory impairment	Maintain service funded by MacMillan to support individuals following cancer treatment to address lifestyle issues including employment, exercise, diet, counselling and social activities	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Service now implemented and continues to work effectively.
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.	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Addressed through Day Service and Fair Allocation of Care policies.
ASC.S.10.08		Coordinate the provision of hearing aid maintenance and repair clinics in libraries including the recruitment of volunteers	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target One training session carried out by Audiology on 4th May, awaiting date for second session.
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	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target Training continues to be carried out as part of standard practices.
ASC.S.10.10		Wellbeing Services will be extended to a further 6 GP practices	31-Mar-2018		25%	<b>Q1 17/18:</b> On Target The Wellbeing Service is now available in 8 GP practices. Data until end June is awaited from analyst but there were 508 people supported to end March 2017 with positive outcomes evidenced.

















# Adult Social Care Performance Indicator Report

## Service Priority Performance Indicators

PI Code	Priority	PI	2016/17	Q1 2016/17	Q1 2017/18			Annual Target 2017/18	Benchmark
			Value	Value	Value	Status	Short Trend		
ASC.S.01.02a	01. Health Inequalities	Increase the number of staff trained in inequalities & poverty	233	85	22			Q1 17/18: Data Only	
ASC.S.01.03a		Number of referrals to the Community Health Inequalities Team	New for 17/18		68			Q1 17/18: On Target	10
ASC.S.02.01a	02. Review the model of care management	Average waiting time for occupational therapy services	7 weeks	15 weeks	7 weeks			Q1 17/18: Off Target Improvements in the numbers and length of wait is now evident, however work continues to address underlying issues.	6 weeks
ASC.S.02.01b		Average waiting time for social work services	13 weeks	19 weeks	13 weeks			Q1 17/18: Off Target Improvements in the numbers and length of wait is now evident, however work continues to address underlying issues.	6 weeks
ASC.S.02.02a		Maximise the proportion of care packages that are reviewed within timescales	New for 17/18		47%			Q1 17/18: Data Only	
ASC.S.02.05a		Improved reported outcomes by service users	86.6%	87.8%	89.6%			Q1 17/18: 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. 95 out of 106 people responded positively to at least 66% of the outcomes focussed questions they were asked.	75%

PI Code	Priority	PI	2016/17	Q1 2016/17	Q1 2017/18			Annual Target 2017/18	Benchmark	
			Value	Value	Value	Status	Short Trend			Note
ASC.S.02.05c	02. Review the model of care management	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%			<b>Q1 17/18: On Target</b> Responses over four user survey (2016) questions were averaged. These questions were that social work services have helped them in the following ways: a. "to feel safer" (94%); b. "to lead a more independent life" (95%); c. "to feel part of my community" (79%); d. "feel healthier" (86%). Results refer to those who expressed an opinion, and have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting.	85%	
ASC.S.02.05d		Increase the % of people who feel they are participating more in activities of their choice	90.48%	90.48%	87.88%			<b>Q1 17/18: On Target</b> 87 out of 99 people stated during review that their ability to participate in activities of their choice had not deteriorated.	75%	
ASC.S.02.05e		The proportion of people choosing SDS option 1	6.02%	5.4%	6.05%			<b>Q1 17/18: Data Only</b> 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 133 out of 2,198 individuals choosing option 1, and includes those under the age of 18.		
ASC.S.02.05f		The proportion of people choosing SDS option 2	4.73%	4.8%	4.28%			<b>Q1 17/18: Data Only</b> 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 94 out of 2,198 individuals choosing option 2, and includes those under the age of 18.		
ASC.S.02.05g		The proportion of people choosing SDS option 3	93.35%	93.2%	93.4%			<b>Q1 17/18: Data Only</b> 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 2,053 out of 2,198 individuals choosing option 3, and includes those under the age of 18.		

PI Code	Priority	PI	2016/17	Q1 2016/17	Q1 2017/18			Annual Target 2017/18	Benchmark	
			Value	Value	Value	Status	Short Trend			Note
ASC.S.02.05h	02. Review the model of care management	The proportion of people choosing SDS option 4	4.11%	4%	3.82%			<b>Q1 17/18:</b> 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 84 out of 2,198 individuals.		
ASC.S.03.01a	03. Supporting service users through the use of technology	Number of Community Frailty Assessments Undertaken	New for 17/18		N/A			<b>Q1 17/18:</b> Data Not Available Frailty tool currently being developed, currently exploring methods by which this can be measured.		
ASC.S.04.02a	04. Carers	Increase the number of people receiving an assessment of their care needs (Carer Conversations)	111	33	28			<b>Q1 17/18:</b> On Target	111	
ASC.S.04.02b		The ratio of workflow which is a Carer's Conversation	3.92%	4.23%	3.41%			<b>Q 17/18:</b> Data Only. Workflow in this measure refers to assessments, reviews and carer's conversations completed during April - June 2017.		
ASC.S.05.02a	05. Older people	Increase the percentage of Intermediate Care at Home clients who returned home with no package of care	0.75%	N/A	37.5%			<b>Q1 17/18:</b> On Target 3 out of 8 people were rehabilitated to the extent that a potential care package was no longer required.	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	14.29%	N/A	0%			<b>Q1 17/18:</b> Data Only No clients admitted to a care home following intermediate care during April-June 2017		Baseline of 15.2% identified at end of 14/15.
ASC.S.05.02c		Decrease the percentage of Intermediate Care at Home Clients who	11.3%	0%	0%			<b>Q1 17/18:</b> On Target No clients returned to hospital following intermediate care during April-June.	15%	Baseline of 39% identified at end of

PI Code	Priority	PI	2016/17	Q1 2016/17	Q1 2017/18			Annual Target 2017/18	Benchmark	
			Value	Value	Value	Status	Short Trend			Note
		returned to hospital							14/15.	
ASC.S.05.03a	05. Older people	Increase the number of patients supported through Hospital at Home	New for 17/18		307			Q1 17/18: On Target	360	
ASC.S.05.05a		Reduce the rate of per 1,000 population emergency admissions for people aged 75+	314	354	353			Q1 17/18: Data Only		
ASC.S.05.05b		Reduce the number of patients delayed in hospital for more than 72 hours at census date	20	7	10			Q1 17/18: Off Target Work progressing on an overall review of care at home services, with an action plan being agreed to support implementation. The move to the new post-acute rehabilitation ward is still taking time to be embedded, which is resulting in an increase in health delays within the Royal Infirmary and Western General. To support the new model, additional input is being provided by a clinical nurse manager from the acute sector.		
ASC.S.05.08a		Increase the number of older people attending day centres	182	279	169			Q1 17/18: 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.		
ASC.S.06.02a	06. Adults - Mental Health	Increase the number of people accessing the Communities Inequalities Team	New for 17/18		68			Q1 17/18: Data Only		
M.AHC.ASC.04.01a		Increase the number of people accessing the "Mental Health Access Point"	281		240			Q1 17/18: Data Only		
ASC.S.08.02a	08. Adults - Substance Misuse	Increase the number of people accessing peer support services	59	44	88			Q1 17/18: Data Only		
ASC.S.09.01a	09. Adults - Offenders	Numbers accessing SPRING service	42	13	14			Q1 17/18: Data Only		

PI Code	Priority	PI	2016/17	Q1 2016/17	Q1 2017/18			Annual Target 2017/18	Benchmark
			Value	Value	Value	Status	Short Trend		
ASC.S.09.03a	09. Adults - Offenders	Monitor the number of violent offenders with MAPPA involvement	0	0	0			Q1 17/18: Data Only	
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	27	5	13			Q1 17/18: Data Only	
ASC.S.10.04b		The number of people receiving an holistic needs assessment	24	9	22			Q1 17/18: Data Only	
ASC.S.10.09a		Number of people receiving training	233	85	22			Q1 17/18: Data Only	
ASC.S.10.10a		Increase the number of people seen by the wellbeing service	New for 17/18		508			Q1 17/18: Data Only Data until end June is awaited but there were 508 people supported to end March 2017 with positive outcomes evidenced.	

## Published Local Government Benchmarking Framework - Adult Social Care



### 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	Corporate Indicator - 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	Corporate Indicator - 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	Corporate Indicator - 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 for 14/15				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	Corporate Indicator - 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).