Adult Social Care
Performance Report Quarter Three 2019/20

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 Adult Health and Social Care service continues to undergo ambitious redesign. The Midlothian Health and Social Care Partnership 2019-20 Strategic Plan outlines a major programme of activity focused on prevention and early intervention; planned support, treatment and recovery; and unplanned treatment and support. We are achieving this by changing the emphasis of our services, placing more importance and a greater proportion of our resources on our key values.

1. Integration
Midlothian Health and Social Care Partnership is progressing work to implement the ambitions of the Strategic Plan. Efforts to support people most vulnerable to health and other inequalities continues to progress. This includes specific programmes involving pregnant women who smoke, people living in homeless accommodation, people who use alcohol and drugs, carers, people/families who could benefit from welfare rights checks and others. In addition the Community Planning partnership work to tackle Type 2 Diabetes continues to progress well.

Several programmes of work are underway in order to best support people who are frail. The increasing prevalence of frailty is linked to our rapidly ageing population. People with severe and moderate frailty (3,500 people) accounted for 4% of Midlothian's population and 31% of unscheduled activity in the Royal Infirmary of Edinburgh in 2019. Midlothian HSCP and Midlothian GPs have been working together to improve the quality of care (health and social care) provided to people with frailty.

Local Planning Groups have prepared their action plans in line with the Partnership values: prevention, recovery, co-ordinated care, supporting the person not just focussing on the condition.

2. Inequalities
Health and Social Care services remain committed to contributing to reduce health inequalities. Local people, the third sector, public sector and private sector created a plan to prevent type 2 diabetes. This includes supporting people to be healthy, active and engaged in community life. Having a healthy diet and being physically active are important to reduce risk of type 2 diabetes but so are environmental, financial and social barriers, not just individual lifestyle choices. Actions we are taking forward include increasing capacity of weight management services, training on eating well and moving more as well as strengthening links between services to ensure people are in receipt of all the welfare support they are entitled to.

3. Justice Service
All teams are now present within the Number 11 Recovery Hub. A regular multiagency meeting at Number 11 where partners from the statutory and voluntary sector get together and discuss who will be leaving prison within the following three months has been introduced; this is to avoid people coming out of prison with no adequate resettlement plans and falling into crisis. Key staff in Midlothian Council are now provided with the names of individuals entering the prison system and release dates. This information is provided by the SPS.

Safe and Together continues to operate in Midlothian but there have been very few referrals to the Midlothian Families First project where staff can work with men involved in domestically abusive behaviour on a voluntary basis. There has been interest expressed by other professionals such as Health Visitors in referring to Midlothian Families First. A series of communication activities will then take place to raise awareness of the service.

Spring continues to go well and the involvement of Occupational Therapy has been very helpful in relation to moving women on in a positive way from the service.

The Community Justice Outcomes Improvement Plan has to be renewed by the end of March 2020 and a great deal of activity is planned. On 20th November a very successful Community Justice event was held. This included an address by the Chief Executive of Community Justice Scotland.

4. Substance Misuse
The Mental Health Team and MELD, the main third sector partner have both relocated to No11 and are fully operational in the building. MELDAP continues to lead work in developing responses to changing drug trends. The "drop in" clinic to offer patients who find keeping appointments challenging continues to be a success. This is a partnership with Nurses, Peers and Social Work. The aim is to keep the chaotic population engaged and reduce unused appointments. A dedicated Women's Peer Support Worker has been recruited in Midlothian. A Health Needs Assessment is also underway to make recommendations for future use of our treatment and support provision. The draft is in the process of being finalised by February/March 2020.

5. Technology
Technology offers a range of tools to support pathway and service redesign in terms of both iterative improvements and transformative initiatives. We continue to proactively engage with the emerging digital agenda in Scotland to maximise the value that technology, in all its forms, can add. We await feedback on our Digital Maturity Assessment conducted in the summer. Our business intelligence and analytics project to deliver an integrated operational resilience dashboard is progressing slower than desired. We continue to progress the necessary and important data privacy impact assessment with the Council and NHS and seek support from Digital Services and Lothian Analytic Services respectively as we seek to automate (and ultimately virtualize) data supply. Our TEC Pathfinder project is progressing well. A Project manager has been recruited to support development further.

6. Learning Disabilities
Activity to establish positive Behavioural Support Services locally is making good progress and continues to receive support from all stakeholders. Work continues to progress plans in relation to housing, both short term by making best use of the property available and longer term by ensuring needs as considered as part of the Phase 3 Housing Programme.

7. Self Directed Support
Recruitment progressing to the Practice Development Worker post. Once recruitment has been completed activity will be focused on setting priorities, and progression of the revised Implementation Plan.

8. Older People
Older peoples services continue to develop and also be challenged. Care at home delivers around 8000 hours a week but there are around 400 hours of unmet need of care at home each week. There are a number of initiatives ongoing to reduce the amount of unmet need. A piece of work underway to cross reference those waiting for a package of care with clients who have been identified on the frailty index to explore how we can support these individuals in a more proactive way. Discharge to assess continue to support people discharged from hospital in a more timely manner providing rehab where needed. The care home support team continue to support the care homes with all the care homes having either sustained good grades or improved grades. The commencement of care at home recommissioning is underway to develop a tender and contracts that aims to increase the capacity for care at home and reduce timescales for those waiting for a package of care. Two staffing reviews have been completed – one for the Extra care housing facility at Cowan Court and the other for the Rapid Response carers. The implementation of the new staffing structures hope to be in place by 1st April 2020. The Joint Dementia team is now fully staffed and managing an increasing number of complex cases and supporting people with advanced dementia in their own homes. Post diagnostic support is a highly valuable resource within the team and it is acknowledged to be part of the role of each professional in the team as well as the dedicated Post Diagnostic support workers. Plans are underway to hold a public consultation event for older people in April 2020 to provide information and seek feedback on older peoples issues and experience of services and supports. A scoping exercise is being developed to assess the extent of people who are housebound requiring social engagement to reduce social isolation and loneliness – a number of initiatives are being explored including a "roaming model of day care", increasing befriending opportunities and undertaking intergenerational work to reduce social isolation and loneliness amongst older people in Midlothian.

9. Carers
Since implementation of the Carers Act in April 2018, there have been considerable changes in funding, service demand, and duties on Local Authorities and Health Boards. VOCAL, Midlothian's largest carer service provider recently reported an 18% increase in referrals from new carers; 20% of these being for Parent Carers. There is significant demand for VOCAL services, and for other carer support delivered by other partners. VOCAL are approaching the end of their current 3 year contract which has had additional tasks added/shared by the local authority in response to new duties and responsibilities from the Act. In light of the significant legislative changes and new duties, changes in funding from the Scottish Government, and VOCAL nearing the end of their contract, it was agreed that wider consideration was needed of carer services and spend moving forward. A report was submitted to the Contracts and Commissioning Group to propose a one year extension to the current contract to allow time for carers, stakeholder and providers to be involved in consultation and a review of carer supports and service provision. This process will begin in Q3 2019/20, with an invitation to tender for services taking place in Q2/3 of 2020/21, new contracts beginning April 2021.

10. Mental Health
The Mental Health Strategic Planning group are developing the Mental Health Action Plan reflecting the priorities set out in the Midlothian Strategic Plan 2019-2022. Primary Care nurses are being rolled out in medical practices. Planning is underway for reviewing commissioned mental health and wellbeing supports currently provided by the third sector.

11. Adults with Long Term Conditions, Disability and Impairment
Work continues to develop a 1 year Physical Disability Action Plan to take forward actions from within the Midlothian Strategic Plan and issues identified at the Disabled People's Assembly. There is ongoing activity related specifically to sensory impairment which includes awareness training sessions for staff, the development of a third hearing aid maintenance clinic in Gorebridge (adding to Dalkeith and Penicuik) and Sensory Champions' direct referral pathway to Audiology.

Challenges and Risks

Funding pressures
There is a continuing requirement to deliver a balanced budget by achieving major efficiencies despite the growing demand, particularly those with complex needs.

Capacity and Quality of Services
Increasing demand on Care at Home services continues to be a major challenge to deliver the care and support needed. This is heavily impacting on assisting hospital discharges and supporting people at home in the community who require increased care and support. This is supporting a shift in the balance of care, and keeping people safely at home for as long as is safely possible. The Care at Home team are developing a vision for the future, as well as considering appropriate structures for the teams moving forward.

Absence Management
Increasing levels of absence in service creates challenges for delivering effective and efficient service delivery. Work is targeted at teams with greater absence levels to maximise attendance and promote health and wellbeing in staff teams. Absence management monitoring is underway at local team and Head of Service level, working with colleague from HR. Managers are actively supporting individuals though the absence management process where required. To minimise agency use/spend where safe and possible, a locum bank is now in place to support carer absence in Newbyres Care Home and Highbank intermediate care facility, similar to Care at Home arrangements.

Adult Social Care

Midlothian
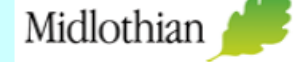
Successes and Challenges

Corporate Performance Indicators (latest)	Service Plan Actions (latest)	Service Plan PIs (latest)	Service Risks (latest)
🔴 5 ✅ 8 ❓ 0 📈 6	⚠️ 3 ✅ 28 ❓ 0	🔴 2 ✅ 2 ❓ 0 📈 24	⚠️ 11

Corporate PIs Off Target as at 31st January 2020

PIs 🔴 5

% of internal/external audit actions progressing on target.

% of invoices paid within 30 days of invoice receipt (cumulative)

Percentage of complaints at stage 1 complete within 5 working days

Average time in working days to respond to complaints at stage 1

Average number of working days lost due to sickness absence (cumulative)

Service Plan Actions Off Target as at 31st January 2020

Actions ⚠️ 3

Implementation of plans for delivering Audiology clinics in Midlothian Community Hospital

Implementation of an integrated health and social care dashboard to manage operational service delivery

Support the development of improved informatics for MERRIT

Service Plan PIs Off Target as at 31st January 2020

PIs 🔴 2

Average waiting time for social work services

Average waiting time for occupational therapy services

High Risks as at 31st January 2020

Risks ⚠️ 2

9 Risks at Medium and 2 are high

Capacity of voluntary and private sector to meet Council's requirements in relation to quality and cost of services

Meeting growing demands with constrained /reduced budgets, especially from external funders

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Key PIs
🔴 Off Target
✅ On Target
📈 Data Only Indicator
❓ Data is not yet available

Key Actions
⚠️ Off Target
✅ On Target/Complete
❓ Data is not yet available

Key PIs
🔴 Off Target
✅ On Target
📈 Data Only Indicator
❓ Data is not yet available

Key Risks
⚠️ High Risk / Medium Risk
❓ Data is not yet available

Adult, Social Care PI summary 2019/20

Making the Best Use of our Resources												

Priorities	Indicator	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
01. Manage budget effectively	Performance against revenue budget	£39.931m	£39.777m	£42.651m	£42.634m	£42.574m	✅	**Q3 19/20**: On Target	⬆	£42.574m		
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	16.46	12.90	3.81	8.46	13.31	🛑	**Q3 19/20**: Off Target Absence in some areas remains higher than target. Care Homes and Care at Home continues to be the current focus. Monitoring is in place.	⬇	10.53	Number of days lost	6,385.64
											Number of FTE in service	479.84

Corporate Health												

Priorities	Indicator	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
03. Complete all service priorities	% of service priorities on target / completed, of the total number	87.88%	93.94%	87.1%	90.32%	90.32%	✅	**Q3 19/20**: On Target 28 out of 31 actions on target. Details contained within body of the report.	⬇	90%	Number of service & corporate priority actions	31
											Number of service & corporate priority actions on tgt/completed	28
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	93%	93%	97%	92%	93%	🛑	**Q3 19/20**: Off Target Service works to address delayed invoice payment, however, processing delays often result from invoices being queried with externally providers.	⬆	97%	Number received (cumulative)	16,304
											Number paid within 30 days (cumulative)	15,216
05. Improve PI performance	% of Service PIs that are on target/ have reached their target. (does not include Corporate PIs)	75%	50%	100%	25%	92.86%	✅	**Q3 19/20**: Off Target Performance indicators relating to waiting lists off target. Downturn in performance due to staff absence. Performance report includes a further 25 data only indicators.	⬆	90%	Number on tgt/complete	26
											Total number of PI's	28

| 06. Control risk | % of high risks that have been reviewed in the last quarter | 100% | 100% | 100% | 100% | 100% | ✅ | **Q3 19/20**: On Target | ▬ | 100% | Number of high risks reviewed in the last quarter | 1 |
| | | | | | | | | | | | Number of high risks | 1 |

Improving for the Future

Priorities	Indicator	2018/19 Value	Q3 2018/19 Value	Q1 2019/20 Value	Q2 2019/20 Value	Q3 2019/20 Value	Status	Note	Short Trend	Annual Target 2019/20	Feeder Data	Value
07. Implement improvement plans	% of internal/external audit actions progressing on target.	77.78%	53.85%	100%	80%	75%	🔴	**Q3 19/20**: Off Target One internal audit action Off Target as we await National Guidance.	⬇	90%	Number of internal/external audit actions on target or complete	3
											Number of internal/external audit actions in progress	4

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Adult Social Care Complaints Indicator Summary

					Q3 2019/20			Annual Target 2019/20
Commitment to valuing complaints								
Indicator	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20			Annual Target 2019/20
	Value	Value	Value	Value	Value	Status	Note	
Number of complaints received (quarterly)	67	47	12	21	10	📈	**Q3 19/20**: Data Only	
Number of complaints closed in the year	66	46	11	15	7	📈	**Q3 19/20**: Data Only	
Number of complaints upheld (quarterly)	21	17	0	0	0	📈	**Q3 19/20**: Data Only	
Number of complaints partially upheld (quarterly)	16	12	2	1	1	📈	**Q3 19/20**: Data Only	
Number of complaints not upheld (quarterly)	25	14	6	3	6	📈	**Q3 19/20**: Data Only	
Average time in working days to respond to complaints at stage 1	16.13	14.61	14.18	6.67	35.71	🛑	**Q3 19/20**: Off Target Data relates to 7 complaints received during Q3. A number of these were complex. Service investigating reasons for delayed response.	5
Average time in working days to respond to complaints at stage 2	24.14	13.8	0	0	0	✅	**Q3 19/20**: On Target	20
Average time in working days for a full response for escalated complaints	23.58	19.38	0	10	0	✅	**Q3 19/20**: On Target	20
Percentage of complaints at stage 1 complete within 5 working days	22.5%	17.86%	9.09%	66.67%	0%	🛑	**Q3 19/20**: Off Target Data relates to 7 complaints received during Q3. A number of these were complex. Service investigating reasons for delayed response.	95%
Percentage of complaints at stage 2 complete within 20 working days	57.14%	60%	100%	0%	100%	✅	**Q3 19/20**: There were no complaints at stage 2.	95%
Percentage of complaints escalated and complete within 20 working days	57.89%	46.15%	100%	100%	100%	✅	**Q3 19/20**: There were no escalated complaints.	95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (quarterly)	1	0	0	0	0	📈	**Q3 19/20**: Data Only	

Adult, Social Care Action report 2019/20

Midlothian

01. Health Inequalities

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.1.1	Support people with long term health conditions through the wellbeing service that has been introduced in all 12 GP practices	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Service is going well. Working to increase joint working with primary care mental health nurses.
ASC.P.1.2	Reduce unnecessary admission to hospital by referral to the Community Health Inequalities Team	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Additional CHIT Nurse (part time) has been recruited. Due to start in March 2020. This will ensure CHIT Nurse time spent at A&E.

02. Assessment and Care Management

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.2.1	Reduce the waiting times for occupational therapy and social work services	31-Mar-2020	▶	50%	**Q3 19/20**: On Target Due to staff absence a downturn in performance evident this quarter. Improvement in performance expected next quarter.
ASC.P.2.2	Continue to implement and monitor Self Directed Support	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Work ongoing.

03. Supporting Service Users Through the Use of Technology

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.3.1	Implementation of an integrated health and social care dashboard to manage operational service delivery	31-Mar-2020	❌	55%	**Q3 19/20**: Off Target Change of strategy explored as a result of delays in the NSS/Digital Services partnership. Discussion with NHS Lothian have taken place and were promising as new direction of travel. Good fit with wider pan-Lothian Partnership developments. Dashboard has been given to NHS Lothian data team (devoid of data) and has been 'plumbed in' to NHS Lothian data sources to provide information. Issues securing resources to implement the necessary technical changes to enable safe data sharing from Midlothian Council to NHS Lothian (both eHealth and Digital Services) and finalising information security are the rate limiting issues. Continuing to actively pursue.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.3.2	Support the development of improved informatics for MERRIT	31-Mar-2020	❌	15%	**Q3 19/20**: Off Target Development of CRT has stalled. Request for Trak changes has been made but no response received despite chasing. Sick leave delayed progress during Q2/Q3. Discussions to commence again with service manager and the Partnership will consider how to strengthen working ties with eHealth as a business customer.
ASC.P.3.3	Establish exemplar 'Attend Anywhere' video conferencing clinics where services are willing to adopt e.g. dietetics	31-Mar-2020	▶	80%	**Q3 19/20**: On Target Coeliac team has completed tests and is in early live implementation of the pilot. IBS will be coming on line soon. Development of this service is an area of focus at the moment with support of the Partnerships previous IJB chair. Exploring additional services and hope to have a Physiotherapy Waiting list initiative clinic set-up by year end.

04. Carers

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.4.1	Work to achieve Carer positive employer status (level one)	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Being progressed as part of Healthy Working Lives agenda. Gathering and developing policies and activities to use as evidence for submission. Staff "Carer" Policy has been developed. Recent work included: 1. Participation in national Power of Attorney Campaign and promotion of Power of attorney Day (20th November) – info to staff in newsletters, emails, posters. 2. Participation in wider Good Grief work (supporting better info and support around bereavement), linking with To Absent Friends celebration remembrance in November. Remembrance trees were placed in Council venues and information to staff via newsletters and email. Recent staff briefing event discussing mental health; menopause; and prostate cancer. Clear message that as employees we bring the rest of our lives with us to work, and acknowledgment that this impacts on us.
ASC.P.4.2	Promote and improve uptake of Adult Carer Support Plan	31-Mar-2020	▶	80%	**Q3 19/20**: On Target Responsibility for Adult Carer Support Plans has been shared with VOCAL, offering choice and aiming to increase numbers. Aim to promote and reach more carers is an ongoing target. Recent VOCAL Funders meeting highlighted 18% increase in new carers in last year (approx. 20% of this group are Parent carers). Exploring ways to extend current opportunities to support parent carers.
ASC.P.4.3	Ensuring that support and services are in place to equip carers with the tools and skills to manage their caring role	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Local Carers Centre and other organisations offer carer support include opportunities for training, information and advice. VOCAL sharing proposal for the development of a training post in recognition of the demand for this type of service. This will be investigated further as part of wider review of carer service provision and requirements during 2020/21.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.4.4	Develop the Midlothian Carer Strategy and Action Plan for 2019-22	31-Mar-2020		75%	**Q3 19/20**: On Target Strategy and Action Plan progressively developing. Decision to split Action Plan for Adult and Young Carers to better capture development required in distinct areas of work. The Carers Act legislation requires the formation of a joint strategy with prescribed content to accompany the Action Plans (in addition to the shared content accompanying Action Plans for other Planning Areas). Progress continuing in forming the strategy content though relies on collaborative input from other services, and this is taking time to gather due to pressure on other services.

05. Older People

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.5.1	Reduce unplanned admissions to hospital from care homes	31-Mar-2020		75%	**Q3 19/20**: On Target This continues to be on track with ongoing support from the care home support team to ensure staff in the care homes are upskilled to support residents when unwell in the care homes.
ASC.P.5.2	Investment in services that enable older people to avoid hospital admission or to return home from hospital as quickly as possible	31-Mar-2020		75%	**Q3 19/20**: On Target These services continue to develop to support people being cared for and kept well at home to avoid unnecessary hospital admissions.
ASC.P.5.3	Support planning for the provision of intermediate care housing	31-Mar-2020		50%	**Q3 19/20**: On Target This has been delayed by 3 months due to a change of project management.
ASC.P.5.4	Ensure a continuous improvement approach with the Care at Home in-house services and partnership approach with external providers.	31-Mar-2020		70%	**Q3 19/20**: On Target Continual improvement in the in house care at home service is demonstrating improved management oversight, reducing sickness absence and improved training achievements.

06. Mental Health

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.6.1	Enhance mental health services in Primary Care including the expansion of the Access Point	31-Mar-2020		80%	**Q3 19/20**: On Target Primary Care nurses in 8 GP practices testing model. The model has been agreed between the various stakeholders and will be rolled out across a number of practices. Decision taken to hold off expanding MAP, while the Primary Care MH Team is being developed and embedded in most GP practices in Midlothian. Health in Mind Social Prescribing worker supporting people to access mental health supports within the community. The Health in Mind worker is now receiving referrals from MAP and from the Primary Care nurses while in the GP practices. Attendances at MAP have stabilised we are attributing this to the expansion of Primary Care Nurses.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.6.2	Evaluate the triage with Police Scotland and other emergency services	31-Mar-2020	▶	80%	**Q3 19/20**: On Target Monthly monitoring statistics gathered. Evaluation to follow.
ASC.P.6.3	Implementation of the new specialist employment project for people with mental health issues	31-Mar-2020	✔	100%	**Q2 19/20**: Complete Successful candidate in post implementing the IPS programme in Midlothian.
ASC.P.6.4	Establish partnership working to ensure effective implementation of the Wayfinder Grade 4 model within the rehabiliation pathway	31-Mar-2020	▶	80%	**Q3 19/20**: On Target Up to full complement of 8 residents. There is a number of activities that residents engage with such as gym, swimming, walking. Two residents are going to start computing courses. Unannounced Care Inspectorate Visit Quality of Care – 6; Quality of Management and Leadership – 6. The Wayfinder Service at Park was highlighted in relation to service design and working in partnership/multidisciplinary models to provide the best outcomes for people reflecting the Health and Social Care Standards.

07. Learning Disability

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.7.1	Implementation of framework for providing positive behavioural support within Midlothian	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Activity ongoing.
ASC.P.7.2	Reduce the average length of time since last assessment or review of cases	31-Mar-2020	▶	60%	**Q3 19/20**: On Target Work ongoing to target reviews with greatest time since last assessment / review.
ASC.P.7.3	Complete the review and redesign of day services reducing costs including transport	31-Mar-2020	▶	40%	**Q3 19/20**: On Target Activity progressing on redesign of services.

08. Adults Substance Misuse

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.8.1	Complete work with relevant service managers on core services for the Recovery Hub, which will bring together Mental Health, Substance Misuse and Criminal Justice Services, including third sector partners, together	31-Mar-2020	▶	70%	**Q3 19/20**: On Target All of the key services; substance misuse and criminal justice and Mental Health and MELD have moved into the building. Low Threshold and rapid access sessions are being held in premises in Dalkeith.
ASC.P.8.2	Continue work of Peer Support Co-ordinator in embedding Peer Support provision in new Recovery Hub, which will bring together Mental Health, Substance Misuse and Criminal Justice Services, including third sector partners, together	31-Mar-2020	▶	70%	**Q3 19/20**: On Target The Peer Support Co-ordinator is Chair of the Peer Support Working Group. The group has agreed, in principle to a framework which details MELDAP's expectations in terms of career qualifications and its commitment to fund a fully developed salary structure. This has been agreed by the MELDAP Commissioning and performance Group.

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.8.3	Work with partners to enhance the complementary role partner services such as VOCAL and Children First in the Recovery Hub	31-Mar-2020	▶	50%	**Q3 19/20**: On Target Work is being undertaken to implement this now all core services have been co-located.

09. Adult Offenders

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.9.1	Continue interventions to non-Court mandated domestic abuse perpetrators referred through the Safe and Together approach	31-Mar-2020	▶	50%	**Q3 19/20**: On Target There was one referral to MFF in Q3 and this was from C&FSW. It was not been possible to formally progress referrals from other agencies as we are waiting for communications to provide leaflets and posters. Justice Team Leader, has been liaising with Team Leaders in C&FSW to ensure that the service is considered and is due to provide a briefing to a C&FSW meeting on 08/01/20.
ASC.P.9.2	Continue to implement and expand the Spring Service provision in line with funding.	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Afternoons at Spring continue to provide a variety of activities with the aim of increasing knowledge of health issues and where to access support as well as opportunities to try new things and visit local places. This quarter has included yoga; healthy relationships session with women's aid, candle making, visit to Rosslyn chapel and a taster Bibliotherapy session. Spring continues to develop these sessions with feedback and ideas from women attending.
ASC.P.9.3	Continue to develop multi-agency arrangements to include violent offenders.	31-Mar-2020	▶	75%	**Q3 19/20**: On Target

10. Adults with Long Term Conditions, Disability and Sensory Impairment

Code	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.P.10.1	Promote Weight Management Programmes to help address and prevent obesity and type 2 diabetes	31-Mar-2020	▶	75%	**Q3 19/20**: On Target Midlothian continues to be part of the East Region work stream for Weight Management and the local service has increased in capacity. Weight management services continue to be promoted and additional programmes in 2019-20 have been fully booked.
ASC.P.10.2	Implementation of plans for delivering Audiology clinics in Midlothian Community Hospital	31-Mar-2020	✖	0%	**Q3 19/20**: Off Target Remains off target with no funding opportunity available to facilitate implementation.
ASC.P.10.3	Working with RNIB (Royal National Institute for the Blind) and Deaf Action to provide training	31-Mar-2020	▶	50%	**Q3 19/20**: On Target Half day training session offered to Leisure staff in December.

Adult, Social Care PI Report 2019/20

Midlothian

		01. Health Inequalities								

PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.1.1a	Number of people receiving the Wellbeing Service across all 12 GP practices	N/A	N/A	438	N/A	418	📈	▬	**Q3 19/20**: Data Only Number of referrals is an estimate based on October data as the data capture tool from ehealth has not been available as yet.		
ASC.P.1.2a	Number of referrals to Community Health Inequalities Team	N/A	N/A	80	67	31	📈	⬇	**Q3 19/20**: Data Only		

		02. Assessment and Care Management								

PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.2.1a	Average waiting time for occupational therapy services	6 weeks	12 weeks	6 weeks	8.5 weeks	9.7 weeks	🛑	⬇	**Q3 19/20**: Off Target	6 weeks	
ASC.P.2.1b	Average waiting time for social work services	8 weeks	12 weeks	5 weeks	9 weeks	9 weeks	🛑	▬	**Q3 19/20**: Off Target	6 weeks	
ASC.P.2.2b	Increase the % of people who feel they are participating more in activities of their choice	85.7%	94%	91.6%	93.9%	85.1%	✅	⬇	**Q3 19/20**: On Target	75%	

PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.2.2c	The proportion of people choosing SDS option 1	6.9%	7.7%	5.7%	6.2%	6.1%			**Q3 19/20**: 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. Includes those under the age of 18.		
ASC.P.2.2d	The proportion of people choosing SDS option 2	2.7%	2.6%	2.9%	2.9%	2.7%			**Q3 19/20**: 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. Includes those under the age of 18.		
ASC.P.2.2e	The proportion of people choosing SDS option 3	84.6%	82.8%	88%	87.7%	88.2%			**Q3 19/20**: 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. Includes those under the age of 18.		
ASC.P.2.2f	The proportion of people choosing SDS option 4	5.7%	6.9%	3.4%	3.2%	2.9%			**Q3 19/20**: 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. Includes those under the age of 18.		

03. Supporting Service Users Through the Use of Technology

PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.3.3a	Number of services utilising the 'Attend Anywhere' video conferencing platform	N/A	N/A	1	1	2			**Q3 19/20**: Data Only IBS and Coeliac progressing with eHealth Pilot.		

04. Carers

PI Code	PI	2018/19 Value	Q3 2018/19 Value	Q1 2019/20 Value	Q2 2019/20 Value	Q3 2019/20 Value	Status	Short Trend	Note	Annual Target 2019/20	Benchmark
ASC.P.4.2a	Number of carers receiving an adult carer support plan of their care needs by Adult Social Care (Accumulative)	122	87	33	55	82		⬆	**Q3 19/20**: Data Only This does not include Adult Carer Support Plans undertaken by VOCAL.		
ASC.P.4.2b	Number of carers receiving an adult carer support plan of their care needs by VOCAL (accumulative)	N/A	N/A	N/A	255	411		⬆	**Q3 19/20**: Data Only 156 for Q3		
ASC.P.4.3a	Number of Carers receiving 1:1 support by VOCAL (accumulative)	N/A	N/A	565	801	1,342		⬆	**Q3 19/20**: Data Only Q3 data: 541		

05. Older People

PI Code	PI	2018/19 Value	Q3 2018/19 Value	Q1 2019/20 Value	Q2 2019/20 Value	Q3 2019/20 Value	Status	Short Trend	Note	Annual Target 2019/20	Benchmark
ASC.P.5.1a	Reduce number of unplanned admissions to hospital from a care home	N/A	N/A	62	N/A	N/A		▬	**Q3 19/20**: Data under review. Expected early February 2020.		
ASC.P.5.2a	Number of individuals receiving support from the Hospital at Home and Rapid Response Team (MERRIT)	N/A	N/A	101	102	96		⬇	**Q3 19/20**: Data Only		
ASC.P.5.2b	Reduce the number of people in hospital for last 6 months of their life	N/A	N/A	N/A	N/A	N/A		▬	**Q3 19/20**: Data Only There is significant lag time in this data becoming available. Data for 2018/19 shows the target of 8.8% was not achieved, 9.5% was the		

15

PI Code	PI	2018/19 Value	Q3 2018/19 Value	Q1 2019/20 Value	Q2 2019/20 Value	Q3 2019/20 Value	Status	Short Trend	Note	Annual Target 2019/20	Benchmark
									average % of time people in their last six months of life spent in hospital.		
ASC.P.5.4a	Number of Individuals receiving care at home at Qtr End	1,604	1,513	1,075	997	962		⬇	**Q3 19/20**: Data Only		
ASC.P.5.4b	Number of Individuals waiting for a 'Care at Home' package of care	106	24	119	123	116		⬇	**Q3 19/20**: Data Only		
ASC.P.5.4c	Reduce the number of patients delayed in hospital for more than 72 hours at census date	35	22	18	16	15		⬆	**Q3 19/20**: Data Only		

06. Mental Health

PI Code	PI	2018/19 Value	Q3 2018/19 Value	Q1 2019/20 Value	Q2 2019/20 Value	Q3 2019/20 Value	Status	Short Trend	Note	Annual Target 2019/20	Benchmark
ASC.P.6.1a	Increase the number of individuals who had a mental health assessment at the Access Point	N/A	N/A	247	246	209		⬇	**Q3 19/20**: Data Only		
ASC.P.6.2a	The number of people signposted or referred to the Intensive Home Treatment Team from Police Scotland	N/A	N/A	58	51	56		⬆	**Q3 19/20**: Data Only		
ASC.P.6.3a	Number of people in employment following intensive intervention	N/A	N/A	0	1	4	✅	⬆	**Q3 19/20**: On Target	6	

07. Learning Disability

PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.7.2a	Average length of time since last assessment	N/A	N/A	1.83	2.5	3.4	📊	⬆️	**Q3 19/20**: Data Only Work ongoing to progress outstanding reviews / assessments.		

09. Adult Offenders
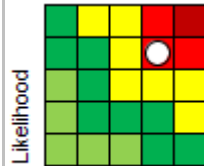
PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.9.1a	Number of individuals through the Safe and Together approach	N/A	N/A	2	2	1	📊	⬇️	**Q3 19/20**: Data only One referral in Q3 from C&FSW		
ASC.P.9.2a	Numbers accessing SPRING service (active users of the service)	71	17	25	25	26	📊	⬆️	**Q3 19/20**: Data only Active users during Quarter 3. This figure includes new referrals who have been seen just once or twice, those who engaged then disengaged, women involved in each phase of the programme.		
ASC.P.9.3a	Monitor the number of violent offenders with MAPPA involvement	1	1	0	2	2	📊	➖	**Q3 19/20**: Data only		
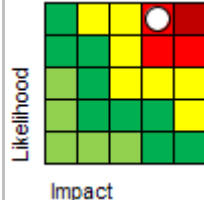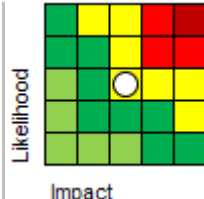
10. Adults with Long Term Conditions, Disability and Sensory Impairment
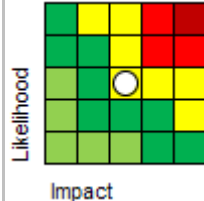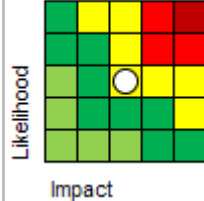
PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.10.1a	Number of people who go through weight management triage	N/A	N/A	150	126	119	📊	⬇️	**Q3 19/20**: Data Only		
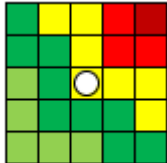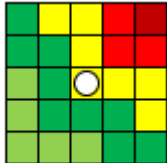
PI Code	PI	2018/19	Q3 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20				Annual Target 2019/20	Benchmark
		Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.P.10.3a	Number of RNIB (Royal National Institute for the Blind) and Deaf Action training awareness sessions	N/A	N/A	0	0	1			**Q3 19/20**: Data Only Training session offered to Leisure staff in December.		
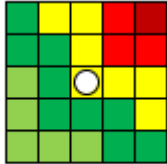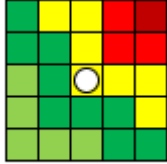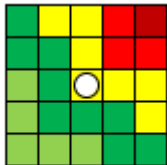
Adult & Social Care Service Risks

Midlothian

Code & Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score
ASC.RR.01–01 Capacity of voluntary and private sector to meet Council's requirements in relation to quality and cost of services	**Risk Cause:** Providers have a lack of capacity to deliver contracted service **Risk Event:** Shortfall in service volume and or quality **Risk Effect:** Delivering poor quality care that places service users at risk of harm. Unable to meet the increasing demands for provision particularly in relation to care at home. Ceasing trading due to financial difficulties creating risks around service provision for large groups of very vulnerable people.	01 - Service level agreements and contracts 02 - Quality assurance officers monitoring of care homes and home care provision 03 - Large scale investigation protocol involving multi-agency investigation of risk of harm within services and risk management planning. 04 - Monitoring of Care Inspectorate Reports and reporting performance across the sector including exception reports. 05 - Quarterly care home, care at home and day care providers forum to ensure good communication and partnership working with commissioned services 06 - Service Managers role with responsibility for monitoring of commissioned services 07 - Ensuring regular review of cases in accordance with level of risk and designated team leader responsibilities. 08 - Commissioning processes to ensure robust decision-making.	⚠️	A review of the continuing difficulties in the provision of services by one of the Care at Home providers is being undertaken to determine whether a new Provider should be commissioned Workforce Plan is being developed to address long term sustainability of services. This work includes the involvement of MVA, Council and NHS Lothian.			16

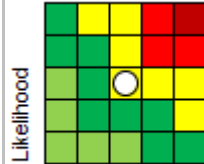| Code & Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score
ASC.RR.01–05 Meeting growing demands with constrained /reduced budgets, especially from external funders	**Risk Cause:** Increasing ageing population of over 75's Increasing numbers of adults with disabilities and complex needs Rising customer expectations Insufficient budget **Risk Event:** Change programme does not meet future years projected budget gaps **Risk Effect:** Inability to deliver against strategic priorities	01 - Eligibility criteria; fair access to care policy etc, 02 - Performance reporting 03 - Service transformation programme 04 - Capacity planning and commissioning LD and complex needs 05 - Monitoring and reporting waiting times 06 - Developing performance indicators for reviewing policy 07 - Monitoring performance to meet contractual requirements 08 - Budget monitoring	🔴	In preparation for the 72 hour Delayed Discharge target the expansion of key services including Merrit intermediate care and re- ablement will be undertaken through the new Social Care Monies			20
ASC.RR.01–06 Capacity of communities to meet changing requirements of them to support social inclusion within local communities	In the current financial climate service users and family carers will become increasing dependent on support from local communities to ensure that their needs for meaningful activities and social interaction are met. Significant investment of resources and skills will be required to ensure that communities are able to respond to these needs. **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Role of MVA in supporting the voluntary sector 02 - Voluntary Sector Compact agreement 03 - Day Opportunities Review for Older people 04 - Day Service Modernisation Programme LD 05 - Change fund programme 06 - FSF Programme 07 - Developing capacity of Community Councils 08 - Neighbourhood planning 09 - Community planning processes	🟡				9

Code & Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score
ASC.RR.01–07 Property risks in terms of maximising the property asset to the benefit of service delivery and accessibility including DDA compliance	**Risk Cause:** Insufficient Capital Resources. **Risk Event:** Failure to maintain and modernise existing building stock **Risk Effect:** People are supported in environments of poor quality	01 - Regular dialogue with Asset Management re needs of service. 02 - Divisional Business Continuity Plan advises on crises management situations. 03 - Development of community assets through regeneration 04- Strategic Capital Programme Board 05- Development of IJB Property Strategy	⚠️				9
ASC.RR.01–08 Harm by offenders to members of the public	This is the risk of despite having comprehensive procedures and systems in place but one offender may commit a serious crime, causing harm to a member of the public and the council reputation damage. Risk Score likely to remain medium (low likelihood but high impact = medium). **Risk Cause:** Offender committing a serious crime **Risk Event:** Offence incident occurs. **Risk Effect:** Harm to member of the public Reputational damage to the Council	01 - Risk management authority for serious violent and sex offenders is now established and is able to provide guidance. 02 - Various risk assessment tools and associated training mandatory for relevant Criminal Justice staff. 03 - Partnership working with other agencies around the management of risk in individual cases well established. 04 - Standards forms and procedures for staff to follow with relevant training. 05 - Multi-agency Risk Panels (MARP) meet monthly 06 - MAPPA which is a process for managing Registered Sex Offenders . 07 - Integration of group work programme with probation supervision 08 - Monitoring of staff compliance with National Outcomes and Standards	⚠️				9

Code & Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score
		through client review system. 09 - Access to Visor database of sex offenders linked to MAPPA. 10 - Offender Management Group established					
ASC.RR.01–09 Adult Protection	**Risk Cause: F**ailure to identify the risk to the individual. Failure of adult protection procedures when invoked to adequately assess and manage the risk. **Risk Event:** Adult at risk of harm. **Risk Effect:** Reputational Damage to the Council. Harm to vulnerable service user.	01 - Public Protection Committee 02 - Adult Protection Procedures 03 - Large scale investigation protocol 04 - IRD Review Group established (and links with the Police) 05 - Adult protection training programme 06 - Case file governance arrangements 07 - Adult Protection Lead Officer 08 - Training Programme 09 - Development of Adult Protection Team within Fieldwork	⚠️				9
ASC.RR.01–10 Capacity to manage scale of transformational change	A major programme of service review and transformation is currently underway. Failure to manage this programme will lead to risks in not achieving coherent arrangements for the continuing delivery of sustainable public services in the new financial climate. **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Project management approach adhered to 02 - Business Transformation Board and reporting arrangements. 03 - New posts to support implementation of IRF, Dementia Demonstrator site and Change Fund 04 - Support for service review from Business Transformation Section. 05 - Project Plans agreed. 06 - 2 new Project Officers	⚠️	Business Transformation is supporting the transformation of Learning Disability services . Additional capacity is also being put in place to support the redesign of Highbank and the relocation of services from Liberton Hospital.			9

Code & Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score
ASC.RR.01–13 Capacity of Workforce	**Risk Cause:** Employees not suitably trained/development for the roles required of them. Challenges around maximising attendance Limited availability of staff in certain sectors Ageing workforce **Risk Event:** Inadequate staffing levels/skills. **Risk Effect:** Low morale. Inability to deliver services.	01- Workforce Plan 02- Learning and Development Team	⚠️	In recognition of the changing role of Newbyres and in response to the recent internal review a new staffing structure has been developed.			9
ASC.RR.01–14 Information Management and Data Protection	All Heads of Service are mandated to monitor compliance with the Data Protection Act. **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Action Plan to improve information management and data protection. This is being controlled through covalent.	⚠️	Data sharing The frameworki system has been upgraded to Mosaic and arrangements are being finalised to enable local staff to use the Information Exchange portal.			9
ASC.RR.01–16 Legislative requirement for health and community care to integrate	This is viewed as a major change that will require huge investment in time and buy-in from stakeholders **Risk Cause:** **Risk Event:** **Risk Effect:**	01 - Business Transformation Board and an NHS Lothian Project Group regularly review progress with arrangements in Midlothian 02 - NHS Lothian and Midlothian Council have both conducted Internal Audit reviews 03- The Joint Management Team chaired by the Joint Director maintains an overview of the implementation of the new arrangements	⚠️				9

Code & Title	Risk Identification	Risk Control Measure	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score
CCP08–CSP.08 Community Safety & Justice – Negative media impact	Risk that negative media coverage impacts on community safety & justice communication and engagement activity **Risk Cause:** Communication with the public could be poor or an event or incident has negative outcome. **Risk Event:** Failure to have in place a robust Communications Strategy and scenario planning **Risk Effect:** Potential for tremendous effort but without knowing whether the effort has been successful against negative effects.	- Other communications plans in place e.g. MAPPA - Communication monitored	⚠️				9

Local Government Benchmarking Framework
Adult Social Care

Midlothian

Adult, Social Care											

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	Value	
SW1	Corporate Indicator - Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£18.59	£19.17	£13.78	£25.83	£30.19	£27.47	£25.06	£37.57	£34.89	18/19 Rank 27 (Bottom Quartile) 17/18 Rank 29 (Bottom Quartile). 16/17 Rank 21 (Third Quartile). 15/16 Rank 25 (Bottom 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%	2.35%	2.73%	2.69%	3.95%	6.11%	4.75%	4.51%	18/19 Rank 20 (Third Quartile) 17/18 Rank 13 (Second Quartile). 16/17 Rank 9 (Second Quartile) 15/16 Rank 13 (Second Quartile). 14/15 Rank 17 (Third Quartile).
SW3	Percentage of people aged 65 and over with long-term care needs receiving personal care at home	61.14%	63.91%	65.76%	65.37%	60.11%	66.67%	66.98%	68.04%	50.4%	18/19 Rank 32 (Bottom Quartile) 17/18 Rank 5 (Top Quartile). 16/17 Rank 10 (Second Quartile) 15/16 Rank 10 (Second Quartile). 14/15 Rank 20 (Third Quartile).
SW4a	New - Percentage of adult supported at home who agree that their services and support had an impact in improving or maintaining their quality of life (LGBF)	New for 2014/15				81.73%	85.7%	N/A	73.05%	N/A	17/18 Rank 31 (Bottom Quartile). 15/16 Rank 15 (Second Quartile). 14/15 Rank 28 (Bottom Quartile)
SW4b	New - Percentage of adults supported at home who agree that they are supported to live as independently as possible	New for 2013/14			82.61%	N/A	77.96%	N/A	86.28%	N/A	17/18 Rank 3 (TOP Quartile). 15/16 Rank 30 (Bottom Quartile). 13/14 Rank 19 (Third Quartile)
SW4c	New - Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided	New for 2013/14			84.9%	N/A	84.44%	N/A	79.68%	N/A	17/18 Rank 6 (TOP Quartile). 15/16 Rank 1 (TOP Quartile). 14/15 Rank 8 (TOP Quartile)
SW4d	New - Percentage of carers who feel supported to continue in their caring role	New for 2013/14			44.48%	N/A	39.44%	N/A	73.05%	N/A	17/18 Rank 31 (Bottom Quartile). 15/16 Rank 21 (Third Quartile). 13/14 Rank 31 (Bottom Quartile)

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	2016/17 Value	2017/18 Value	2018/19 Value	External Comparison
SW5	Corporate Indicator - The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	£393.17	£422.24	£432.14	£425.81	£404.27	£415.79	£369.56	£422.93	£411.13	18/19 Rank 18 (Third Quartile) 17/18 Rank 19 (Third Quartile). 16/17 Rank 12 (Second Quartile). 15/16 Rank 19 (Third Quartile). 14/15 Rank 14 (Second Quartile).
SW6	Rate of readmission to hospital within 28 days per 1,000 discharges	93.79	105.81	105.82	101.45	107.11	104.49	109.36	114.39	108.89	2018/19 Rank 20 (Third Quartile) 2017/18 Rank 26 (Bottom Quartile) 2016/17 Rank 24 (Third Quartile) 2015/16 Rank 21 (Third Quartile)
SW7	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	New for 2011/12	76.6%	80%	82.98%	77.78%	76.32%	69.39%	73.91%	78.05%	2018/19 Rank 25 (Bottom Quartile) 2017/18 Rank 30 (Bottom Quartile) 2016/17 Rank 31 (Bottom Quartile) 2015/16 Rank 28 (Bottom Quartile)
SW8	Number of days people spend in hospital when they are ready to be discharged, per 1,000 population (75+)	New for 2013/14			917.12	1059.24	834.91	971.19	1422.02	1323.32	2018/19 Rank 29 (Bottom Quartile) 17/18 Rank 30 (Bottom Quartile) 16/17 Rank 23 (Third Quartile) 2015/16 Rank 20 (Third Quartile)