

01. Progress in delivery of strategic outcomes

Our Vision: People in Midlothian are enabled to lead longer and healthier lives.

Our Values: Right support, right time, right place.

The Midlothian Health and Social Care Partnership 2019-22 Strategic Plan outlines our 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. Many voluntary sector and independent providers work with the Partnership to deliver our objectives. The Midlothian Health and Social Care Partnership (HSCP) has continued to implement the ambitions of the Strategic Plan against the challenging impact of the COVID-19 pandemic.

1. Integration

The COVID-19 pandemic continued to bring many challenges to the Health and Social Care Partnership, its partners and the communities it serves. The vaccination programme continued to expand with various community venues being established, including Gorebridge Leisure Centre. In addition bespoke vaccination clinics were established, for example clinics for people in homeless accommodation and for people with a learning disability. Community based testing also expanded and testing in health and social care settings, including care homes continued.

Care Homes and other services areas continued to receive support and advice as they managed the safety of people, communities and staff. Services continued to support clients effectively and safely during this time. Staff continued to see people face-to-face where this was clinically essential, but in order to reduce face-to-face contact, where feasible, teams adapted how they delivered services. The provision of personal protective equipment (PPE) and staff testing evolved but continued to be led by the Partnership.

2. Service Transformation

Health and Social Care services continued to develop during Q1. This included the ongoing transformation of local service pathways to support people to stay at home as opposed to hospital. This included service developments to support people out of hospital as soon as they are considered fit for discharge such as the Discharge to Assess Team and the redesign of Care at Home Service contracts. It also included service improvement to support people to avoid a hospital admission such as the Community Respiratory Team and Care Home Support Team.

Substance Misuse and Justice services continued to operate and adapt according to COVID guidelines.

3. Justice Service

Activity during Q1 continued to focus on recovery and our response to the COVID-19 pandemic. Service delivery focused on managing individuals in the Justice system through a mixture of face-to-face and virtual meetings. This continues to be based on dynamic assessments using risk and needs to determine levels of involvement. The Justice team are continuing to design alternatives to prosecution/Court disposals. Diversion, Structured Deferred Sentences and Supervise Bail are all being considered in relation to new areas of practice for the Midlothian team. It is anticipated that this will increase the options for assisting with the backlog of cases within the Court system and provide better outcomes for individuals in the Justice system. We hope to see these new areas of practice in place by September 2021.

Q1 saw a return of unpaid work service users completing their hours. Supporting this is our new unpaid work supervisor who was recruited to in response to addressing the backlog of unpaid work hours. The Justice team have also focused our efforts in engaging with our third sector partner organisations to look at opportunities for expanding the work placements available to our service users. It is hoped to include placements in community gardens, increased training opportunities with a local college and placements in a community hub supporting one of the most deprived areas of Midlothian.

The Justice specific Men's service is progressing in its development. The holistic trauma-informed group for men is due to start in August. To support the delivery of this service, Justice identified funding to recruit a health and social care practitioner. Some of the work of this service mirrors the work being undertaken by Spring, our women's service. Spring continues to support women and has been able to re-establish group work activities. Our funded Peer Support Co-ordinator post was previously reviewed in relation to the role and remit with a clear focus being given to the

development of a pathway for volunteer peer supporters to form a network for services within Number 11. Recruitment to this post is being taken forward by Health in Mind and Justice.

4. Substance Misuse

Key services based in Number 11 in Dalkeith continued to provide services including outreach treatment, injecting equipment provision [IEP], naloxone, information/advice and door step deliveries of Opiate Substitute therapy [OST] and other medication to those requiring this support within Scottish Government guidance. Despite Covid restrictions impacting service delivery the Midlothian Substance Misuse service instigated an outreach model to those individuals who were most at risk. This includes the trialling of Buvidal [an injectable form of Buprenorphine].

There continues to be concerns about the availability in some communities of what would appear to be illicit Diazepam tablets and also Etizolam and Alprazolam [Xanax] whose quality is variable but would appear to be much stronger. These tablets are likely to be used in conjunction with other drugs [poly drug use] increasing the level of risk. Alerts and Intelligence were [and are] shared between Police Scotland, MELDAP and Drug Treatment and Support services to ensure that officers/workers had information to support harm minimisation information and support to people who use drugs. MELDAP has provided Police colleagues with credit card sized information cards with information on available treatment and support services. Police are issuing these when appropriate to do so. MELDAP services are developing electronic and other versions of information highlighting the risks caused by poly drug use. MELDAP services continue to provide data packages, basic smart phones and tablets to those individuals as part of impacting the digital inequalities agenda. The partnership intends to continue this work in 2021/22. MELDAP has requested that all services consider what learning and practice developments driven by the Covid pandemic need to continue as restrictions ease. One particular area is providing a blended care approach of one to one engagement augmented with the use of digital/phone platforms according to choice and need.

5. Technology

Technology offers a range of tools to support pathway and service redesign in terms of both iterative improvements and transformative initiatives. We continued to proactively engage with the emerging digital agenda in Scotland to maximise the value that technology, in all its forms, can add. With the inauguration of a new Digital Governance Group within our structure we anticipate improved planning and resourcing of projects (internally) which connect effort across the partnership. Furthermore, we hope to be able to present a united front to and for our key business partners with regard to digital development planning and to support prioritisation.

6. Learning Disabilities

Implementation of a framework for providing positive behavioural support within Midlothian has been completed and continues to receive support from all stakeholders. Implementation has been impacted by COVID19, but the steering group has now reconvened and training at levels one and two is underway.

The project to review and redesign Day Services to reduce costs including transport is now being progressed as part of the COVID-19 Remobilisation Plan with a focus on re-establishing and building up centre based services within the restriction of current guidance and supplemented by home based, community based, and on line using new models of support. Analysis of Day Service transport and tender of the taxi contract has started.

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. Bonnyrigg High Street site scheduled for completion late 2022. Primrose Lodge in Loanhead plans complete.

7. Older People

Older People's services have continued to see an increase in referrals as an impact of COVID-19. The impacts of carer stress, isolation and lack of physical activity on older people's health and wellbeing continue to be of concern as restrictions ease. Mental health referrals have increased, along with Adult Support and Protection referrals relating to financial harm. As unpaid carers return to work there are an increasing number of referrals for urgent assessment for packages of care or admission to care. This is likely to increase further.

Some day care and day support services have reopened. The Bungalow, operated by Alzheimer's Scotland, opened to a limited number of clients with dementia on Tuesday 6th April. St Davids Day Centre has also reopened also with limited capacity and over fewer days. The Grassy Riggs hub has reopened for organised groups, rather than for drop ins. Broomhill Day Centre plan to open in September. The third sector continue to support individuals and their families in the community through creative alternatives and increasingly through direct face to face support. This is continually reviewed through the Older People's Planning Group.

The Care Home Support Team are beginning to focus on educational programmes and improvement support, including rolling out the Restore2 Toolkit, and improving Anticipatory Care Planning. Care homes are committed to working with all partners to maintain high standards of infection control and compliance while providing a homely and stimulating environment for residents.

Plans for the development of Extra Care Housing complexes across three sites in Midlothian is ongoing with Spring 2023 proposed for completion.

A review of intermediate care and rehab services is underway to improve pathways and ensure individuals receive the right care in the right place at the right time, implementing the Home First principles, as agreed by NHS Lothian.

8. Carers

Following the review and recommissioning process during 2020/21 which had been slightly delayed by the pandemic, Q1 (2021/22) was the extension period of the existing contracts. During Q1 the new contracts were prepared and finalised in preparation for beginning 1st July 2021. Staff TUPE has taken place, and a reporting schedule and monitoring and evaluation framework is being agreed between the HSCP and VOCAL.

The Scottish Government recently announced a significant additional resource for carers for 2021/2022. This announcement and budget was announced at the end point of recent recommissioning. In discussion with the Carers Strategic Planning Group it was agreed that a series of workshops to support collaborative discussions would help decide on priorities, to be shared with the IJB in August. The first workshop took place in June, with proposals submitted under the themes of: strengthening existing service; identifying and addressing gaps; areas of innovation; use of underspend from Q1, 2021/22. Feedback will be collated, and shared with the IJB.

A draft Midlothian Carers Strategy has been shared with the planning group for feedback by mid July.

9. Mental Health

The Mental Health Strategic Planning group developed the Mental Health Action Plan reflecting the priorities set out in the Midlothian HSCP Strategic Plan. Primary Care Mental Health Nurses are now in 12 practices and the role of OT is being recruited to supplement the service. Evaluation of the impact of primary care nurses is being developed.

Midlothian Access Point has re-started and people can access the service directly via email and then will be allocated an assessment.

Recommissioning of community mental health and wellbeing supports currently delivered by Health in Mind has been concluded; this involved key stakeholders staff and third sector colleagues working across the HSCP, as well as consultation with people who use services through a paper questionnaire, online survey monkey, focus groups and individual interviews. New contracts will commence 1st July 2021.

10. Adults with Long Term Conditions, Disability and Impairment

It has not been possible to progress the creation of Audiology clinics in the Midlothian Community Hospital due to the pandemic. This has, however, brought an opportunity to look at potential new technologies which could facilitate more local provision.

Awareness training sessions for HSCP staff, provided by Deaf Action and The Royal National Institute of Blind People (RNIB) have also not been possible due to the pandemic and training over Zoom or Teams cannot provide practical, hands on training.

In response to the closure to the public of the Audiology Department due to Covid restrictions, we recruited volunteers to uplift peoples' faulty hearing aids from their homes and delivered the aids to Midlothian Community Hospital for an Audiology technician to repair, and then return the repaired aids back to the individuals.

Hybrid model up and running for delivery of face to face and digital for all weight management programmes. Digital devices secured for people referred so they are able to decide what options best suits their needs.

ICJ Midlothian went live March 2021 with a soft start. The person-centred approach is focused on providing support to those living with, or previously affected by cancer, and help develop an understanding of their needs. During Q1 key tasks in terms of managing referrals by phone and email, contacting people to make appointments and developing efficient processes to ensure people affected by cancer have progressed well. As of 18th June, there had been 25 referrals to the service. Of these, one person has declined and no health needs assessment was completed. 18 are now completed while the remaining are in progress.

11. Sport and Leisure

Sport & Leisure Services resumed operations at all sites on a phased basis from 31st August 2020 in line with Scottish Government guidelines. COVID-19 restrictions are in place to protect the public and staff members. Community sport and activity clubs and other external lets have resumed where the current guidance, facility availability and reasonable Covid modifications has allowed.

Newtongrange Leisure Centre has been utilised to accommodate Midlothian residents with pre-existing health conditions who access the Midlothian Active Choices (MAC) and Ageing Well programmes to provide safe, specific

support to that vulnerable client group. Tier 2 weight adult weight management (Get Moving with Counterweight) and paediatric weight management (Get Going) courses are scheduled to resume when Covid restrictions allow.

Sport & Leisure Services has supported Midlothian HSCP colleagues in delivering Flu Vaccination clinics and Let's Prevent, the Type 2 diabetes prevention programme by accommodating and integrating those services within Sport & Leisure facilities and programmes. Sport & Leisure Services via its Ageing Well and MAC programmes is directly involved in the Falls Prevention strategy and pathways for those experiencing or at risk of falls.

Sport & Leisure services will continue to develop its digital capabilities including an expanded role out of online booking and advance payment for all activities, online fitness classes and activities as well as deploying digital platforms such as MS Teams for internal and external communication and workforce training and development.

Lockdown #2 during Q4 resulted in the closing of all Sport & Leisure sites and activities and the redeployment of staff to support critical services across the Council and Health & Social Care Partnership including Care Homes, Schools, Roads Services, IT Services, Housing and Homelessness, General Admin, Vaccination rollout, PPE Hub, and In School LFD testing pilot.

Sport and Leisure reopened following Lockdown #2 on 26th April 2021 under Level 3 restrictions which affected capacities, bookings, cleaning and distancing procedures etc as pre-lockdown. Adult fitness classes resumed on 17th May 2021 following movement into Level 2 restrictions and were ongoing for the remainder of Q1.

02. Challenges and Risks

COVID-19

The challenges of the COVID-19 pandemic continues to impact the Health and Social Care Partnership, its partners and the communities it serves. Increased anxiety and pressure on many service users, unpaid carers and staff will be evident for the foreseeable future. Covid will continue to influence how the HSCP delivers core services, works with partners and communities and develops the workforce. In addition the Partnership will continue to adapt to deliver Covid related services, such as vaccination clinics.

A growing and ageing population

We are the second smallest Local Authority in mainland Scotland but the fastest growing. This will continue to pose challenges for health and social care services whilst also changing some local communities. As people live for longer many more people will be living at home with frailty and/or dementia and/or multiple health conditions. An increasing number of people live on their own, and for some this will bring a risk of isolation.

Higher rates of long-term conditions

Managing long-term conditions is one of the biggest challenges facing health care services worldwide, with 60% of all deaths attributable to them. Older people are more susceptible to developing long-term conditions; most over 65s have two or more conditions and most over 75s have three or more conditions. People living in areas of multiple deprivation are at particular risk with, for example, a much greater likelihood of early death from heart failure. They are also likely to develop 2 or more conditions 10-15 years earlier than people living in affluent areas.

Higher rates of mental health needs

Many mental health problems are preventable, and almost all are treatable, so people can either fully recover or manage their conditions successfully and live fulfilling healthy lives as far as possible. The incidence of mental health issues in Midlothian, while similar to the rest of Scotland, is a concern. Living in poverty increases the likelihood of mental health problems but also mental health problems can lead to greater social exclusion and higher levels of poverty. People who have life-long mental illness are likely to die 15-20 years prematurely because of physical ill-health.

Our services are under pressure

People place a high value on being able to access effective health services when they need them. People expect to receive high quality care services when these are needed whether as a result of age, disability, gender or long term health conditions. Yet there are a number of pressures on our services.

Financial pressures

Financial pressures on public services are well documented. There is no doubt that we need to do things differently: the traditional approach to delivering health and care services is no longer financially sustainable.

Workforce pressures

The COVID-19 pandemic has and will continue to influence the demand for, and deployment of, the health and care workforce for the foreseeable future. Mass vaccination programmes and other large scale recruitment programmes related to COVID-19 have increased pressure on already stretched resource. How the workforce interacts with people has also changed with an increased use of digital or telephone appointments. The Scottish Government has

requested that IJBs develop a 3 year Workforce Plan no later than 31st March 2022. An interim workforce plan was submitted to the Scottish Government in April 2021 to cover the period from April 2021 to March 2022 setting out a cohesive picture of our workforce across the Partnership.

Unpaid carers

Unpaid carers fulfil significant, valuable and wide-ranging roles within Midlothian communities, helping to keep people with care and support needs within our communities. During the pandemic many people have become carers for the first time, or seen changes to their caring role, resulting in them providing significantly more care for their elderly, sick or disabled family, friends and neighbours. Through this period Community services supporting carers have continued to offer a range of support, including digitally, and by telephone, though services supporting the person they provide support to may have been reduced, e.g. respite and day services, resulting in an impact on carers. It is essential that we work to reduce the significant pressure and impact of caring that carers report feeling, by continuing to explore innovative options to enable support to be given to both carers and the cared-for, and for there to be opportunities for breaks from caring leading to caring being more sustainable. We are constantly looking for ways to offer respite and support to reduce the stress and impact of caring.

Acute hospitals

Acute hospitals are under huge pressure due to unsustainable demand and financial restrictions. We need to invest in community based and work with carers alternatives that will minimise avoidable and inappropriate admissions and facilitate earlier discharge. By treating people closer to home, or in their own home we can support admission avoidance and improve patient outcomes.

Adult, Health and Social Care

Successes and Challenges

Corporate Performance Indicators (latest)

● 5 ✓ 7 ? 1 📄 8

Service Plan Actions (latest)

▲ 2 ✓ 33 ? 0

Service Plan PIs (latest)

● 6 ✓ 24 ? 1 📄 15

Service Risks (latest)

▲ 2

Corporate PIs Off Target

PIs ● 5

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

% of Service PIs that are on target/ have reached their target. (does not include Corporate PIs)

% of internal/external audit actions progressing on target or complete this quarter.

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

Percentage of complaints at stage 1 complete within 5 working days

Service Plan Actions Off Target

Actions ▲ 2

Improve awareness and understanding of sensory impairment among HSCP staff and partners by delivering training with RNIB and Deaf Action.

Reduce waiting times for occupational therapy and social work services.

Service Plan PIs Off Target

PIs ● 6

Number of people receiving the Wellbeing Service across all 12 GP practices

Average wait time for occupational therapy services

Average wait time for social work services

Number of carers accessing short breaks through VOCAL Wee Breaks Service (cumulative)

Number of stress control classes run in community venues.

Number of individuals referred through the Safe and Together approach.

High Risks

Risks ▲ 2

COVID 19

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

Key
PIs

- Off Target
- ✓ On Target
- 📄 Data Only
- ? Data Not Yet Available

Key
Actions

- ▲ Off Target
- ✓ On Target/Complete
- ? Data Not Yet Available

Key
PIs

- Off Target
- ✓ On Target
- 📄 Data Only
- ? Data Not Yet Available

Key
Risks



- ▲ High Risk/Medium Risk
- ? Data Not Yet Available

Adult Health and Social Care PI summary



01. Manage budget effectively

Priorities	Indicator	2020/21	Q1 2020/21	Q1 2021/22				Annual Target 2021/22	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
01. Manage budget effectively	Performance against revenue budget	N/A	N/A	N/A		Q1 21/22: Data not available				



02. Manage stress and absence

Priorities	Indicator	2020/21	Q1 2020/21	Q1 2021/22				Annual Target 2021/22	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	13.65	1.23	4.92		Q1 21/22: On Target Staff Governance Group monitoring sickness absence and identified pockets of higher absence.		10.53	Number of days lost	2,857.5
									Number of FTE in service	580.94


03. Complete all service priorities

Priorities	Indicator	2020/21	Q1 2020/21	Q1 2021/22				Annual Target 2021/22	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
03. Complete all service priorities	% of service priority Actions on target / completed, of the total number	77.14 %	N/A	94.29 %		Q1 21/22: On Target Two actions Off Target. (1) Wait times continue to be a challenge and being reviewed as a priority to better understand contributing factors and identify activity taking place to reduce wait time to an acceptable level. (2) Sensory impairment awareness and training has been limited during the first quarter due to a need to prioritise remobilisation of services post Covid and the practical nature of training due to Covid 19 restrictions.		90%	NUMBER of service priority actions in total	35
									NUMBER of service priority actions on target / completed	33



04. Process invoices efficiently

Priorities	Indicator	2020/2 1	Q1 2020/2 1	Q1 2021/22				Annual Target 2021/22	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	92%	92%	92%		Q1 21/22: Off Target Service works to address delayed invoice payment, however, processing delays often result from invoices being queried with external providers.		97%	Number of invoices received (cumulative)	240
									Number paid within 30 days (cumulative)	220



05. Improve PI performance

Priorities	Indicator	2020/2 1	Q1 2020/2 1	Q1 2021/22				Annual Target 2021/22 2	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
05. Improve PI performance	% of Service PIs that are on target/ have reached their target. (does not include Corporate PIs)	67.6%	N/A	86.96 %		Q1 21/22: Off Target Position reflects current status at Q1. Performance expected to pick up during the remainder of the year for the majority of the PIs currently off target.		90%	Number on tgt/complete or Data Only	40
									Number of PI's in total	46

06. Control Risk

Priorities	Indicator	2020/2 1	Q1 2020/2 1	Q1 2021/22				Annual Target 2021/22 2	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
06. Control Risk	% of high risks that have been reviewed in the last quarter	100%	N/A	100%		Q1 21/22: On Target		100%	Number of high risks reviewed in the last quarter	2
									Number of risks that are graded as high	2

07. Implement Improvement Plans

Priorities	Indicator	2020/2 1	Q1 2020/2 1	Q1 2021/22				Annual Target 2021/22 2	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend			
07. Implement Improvement Plans	% of internal/external audit actions progressing on target or complete this quarter.	85.71 %	N/A	50%		Q1 21/22: Off Target One internal audit action off target due to Covid restrictions in leisure centres.		90%	Number of internal/external audit actions on target or complete	1
									Total number of internal/external audit actions	2

Adult Health and Social Care Complaints Indicator Summary

Commitment to valuing Complaints

Indicator	2020/21	Q1 2020/21	Q1 2021/22				Annual Target 2021/22
	Value	Value	Value	Status	Note	Short Trend	
Number of complaints received (quarterly)	47	7	14		Q1 21/22: Data Only		
Number of complaints closed in the year	33	5	11		Q1 21/22: Data Only		
Number of complaints upheld (quarterly)	7	2	1		Q1 21/22: Data Only		
Number of complaints partially upheld (quarterly)	11	1	3		Q1 21/22: Data Only		
Number of complaints not upheld (quarterly)	13	2	4		Q1 21/22: Data Only		
Number of complaints Resolved (quarterly)			3		Q1 21/22: Data Only		
Average time in working days to respond to complaints at stage 1	16.29	4.4	7.45		Q1 21/22: Off Target Service continues to address issues and identify and progress complaints within timelines.		5
Average time in working days to respond to complaints at stage 2	0	0	0		Q1 21/22: There were no Stage 2 Complaints.		20
Average time in working days for a full response for escalated complaints	14.5	0	0		Q1 21/22: There were no Escalated Complaints.		20
Percentage of complaints at stage 1 complete within 5 working days	45.16%	80%	36.36%		Q1 21/22: Off Target There are 11 Stage 1 Complaints and 4 were completed within 5 working days.		95%
Percentage of complaints at stage 2 complete within 20 working days	0%	100%	100%		Q1 21/22: There were no Stage 2 Complaints.		95%
Percentage of complaints escalated and complete within 20 working days	100%	100%	100%		Q1 21/22: There were no Escalated Complaints.		95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (quarterly)	3	0	3		Q1 21/22: Data Only		
Number of Compliments	5	2	2		Q1 21/22: Data Only		

Adult Social Care Performance







01. Health Inequalities



PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.1.1a	Support people living with long term health conditions or facing challenging life situations through the Midlothian Wellbeing service based in Midlothian GP Practices.	Q1 21/22: On Target Work progressing well and the reduction in referrals due to the pandemic appears to be reversing. Work with local GPs and other staff continues.	Number of people receiving the Wellbeing Service across all 12 GP practices	1,027	N/A	221			Q1 21/22: Off Target Number of people referred during Q1.	250
AHSC.P.1.2a	Support people vulnerable to health inequalities by referral to the Community Health and Inequalities Team.	Q1 21/22: On Target Work during the pandemic included a focus on people living in homeless accommodation and clients at Number 11. Vacancy filled in May with an additional part-time nurse starting. Work with unpaid carers restarted.	Number of people who received a health assessment from the Community Health Inequalities Team.	82	N/A	38			Q1 21/22: On Target	37.5
P.AHSC.4.1a	Deliver Welfare Rights service to people with health and social care needs	Q1 21/22: On Target Demand for this service continues to be high. Good outcomes.	Number of people supported with Cancer	239	N/A	118			Q1 21/22: On Target	62.5





02. Assessment and Care Management



PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.2.1a	Reduce waiting times for occupational therapy and social work services.	Q1 21/22: Off Target Reducing wait times continues to be a challenge. Action within the service continues to be taken.	Average wait time for occupational therapy services	15.5 weeks	N/A	17.2 weeks			Q1 21/22: Off Target Work continues to be progressed and action taken to reduce wait times for OT services.	6 weeks
AHSC.P.2.1b		Q1 21/22: Off Target Reducing wait times continues to be a challenge. Action within the service continues to be taken.	Average wait time for social work services	12 weeks	N/A	16 weeks			Q1 21/22: Off Target Work continues to be progressed and action taken to reduce waiting times.	6 weeks
AHSC.P.2.2a	Continue to implement and monitor Self Directed Support	Q1 21/22: On Target	Proportion of people choosing SDS option 1	6%	5.7%	5.7%			Q1 21/22: 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.	
AHSC.P.2.2b		Q1 21/22: On Target	Proportion of people choosing SDS option 2	2%	2.4%	2.1%			Q1 21/22: 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.	
AHSC.P.2.2c		Q1 21/22: On Target	Proportion of people choosing SDS option 3	89.5%	89.1%	89.5%			Q1 21/22: 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.	

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
										Includes those under the age of 18.	
AHSC.P.2.2d	Continue to implement and monitor Self Directed Support	Q1 21/22: On Target	Proportion of people choosing SDS option 4	2.5%	2.8%	2.7%			Q1 21/22: 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.		
AHSC.P.2.2e		Q1 21/22: On Target	Increase the % of people who feel they are participating more in activities of their choice	60%	72.7 %	79.5 %			Q1 21/22: On Target	75%	











03. Carers

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.3.1a	Provide carers with the tools and skills to manage their caring role through the provision of Adult Carer Support Plans and 1 to 1 support.	Q1 21/22: On Target ACSP continue to be delivered by the HSCP and VOCAL. Q1 has been an extension period to the existing contract, with the new service and contract beginning 01/07/21. Reporting schedule and monitoring & evaluation	Number of Carers receiving 1:1 support via VOCAL (cumulative)	2,278	524	620			Q1 21/22: Data Only 506 existing carers; 114 new carers	

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
		framework is being progressed. A change with the new contracts will be that all services commissioned by the HSCP to deliver carer support will have the ability to complete ACSPs.									
AHSC.P.3.1b		Q1 21/22: On Target ACSP continue to be delivered by the HSCP and VOCAL. Q1 has been an extension period to the existing contract, with the new service and contract beginning 01/07/21. Reporting schedule and monitoring & evaluation framework is being progressed. A change with the new contracts will be that all services commissioned by the HSCP to deliver carer support will have the ability to complete ACSPs.	Number of carers receiving an adult carer support plan of their care needs by Adult Social Care (cumulative)	38	3	17			Q1 21/22: Data only		
AHSC.P.3.1c	Provide carers with the tools and skills to manage their caring role through the provision of Adult Carer Support Plans and 1 to 1 support.	Q1 21/22: On Target ACSP continue to be delivered by the HSCP and VOCAL. Q1 has been an extension period to the existing contract, with the new service and contract beginning 01/07/21. Reporting schedule and monitoring & evaluation framework is being progressed. A change with the new contracts will be that all services commissioned by the HSCP	Number of carers receiving an adult carer support plan of their care needs by VOCAL (cumulative)	1,585	374	457			Q1 21/22: On Target Revised annual target from Service Plan. 391 existing carers; 66 new carers	300	

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
		to deliver carer support will have the ability to complete ACSPs.									
AHSC.P.3.2a	Support and enable Adult Carers to access breaks from caring through the VOCAL Wee Breaks Service.	<p>Q1 21/22: On Target</p> <p>Q1 has been an extension period to the existing contract, so the funding supporting posts for the Wee Breaks service has remained unchanged. Funding for the provision of grants to carers has been continued, with agreement that $\frac{1}{4}$ of an annual amount be allocated to Q1 ahead of the new contract starting to enable the fund to continue until the new contract begins. The fund is in considerable demand, and has benefitted from flexibility in criteria, enabling parent carers to apply to the HSCP fund during and on an ongoing basis since the pandemic. This enables increased equity to adult carers applying for grants.</p>	Number of carers accessing short breaks through VOCAL Wee Breaks Service (cumulative)	316	63	39			Q1 21/22: Off Target Number of wee break grants awarded.	75	





04. Older People

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.4.1a	Use efrailty data to inform prioritisation of Care at Home waiting list.	Q1 21/22: On Target Efrailty data continues to inform prioritization of waiting list. To provide full update at next quarterly report.	Monitor the percentage of people with moderate to high frailty waiting for a Care at Home package.	29%	N/A	9%			Q1 21/22: Data only 9% of people currently waiting for a Care at Home Package are identified as having moderate to severe frailty.	
AHSC.P.4.5a	Consult with extra care housing tenants re the impact of Covid-19 on their health and wellbeing and identify common themes of concern around future engagement in one to one, group or wider community settings to aid future extra care housing service planning	Q1 21/22: On Target Updated consultation questionnaires being finalized by Older People's Planning Group for distribution to 67 ECH tenants August 2021.	Number of consultation questionnaires/interviews.	1	N/A	0			Q1 21/22: On Target Quarterly target n/a. Questionnaire will take place in August 2021.	0
AHSC.P.4.5b	Consult with extra care housing tenants re the impact of Covid-19 on their health and wellbeing and identify common themes of concern around future engagement in one to one, group or wider community settings to aid future extra care housing service planning	Q1 21/22: On Target Updated consultation questionnaires being finalized by Older People's Planning Group for distribution to 67 ECH tenants August 2021.	Number of extra care housing tenants consulted. (cumulative)	77	N/A	0			Q1 21/22: On Target Quarterly target n/a. Distribution to 67 tenants August 2021.	0
AHSC.P.4.6a	Work with Building Services and Housing to seek and achieve planning permission for extra care housing projects at Gorebridge and Bonnyrigg.	Q1 21/22: On Target Public consultation carried out and planning application submitted for Polton St Bonnyrigg. Peer Review being finalized for sign off for Gorebridge.	Planning permission granted for extra care housing at Gorebridge and Bonnyrigg.	1	N/A	0			Q1 21/22: On Target Quarterly target n/a. Activity ongoing to achieve planning permission by year end.	0
P.AHSC.2.2a	Support older people to attend activity groups hosted by Ageing Well each year	Q1 21/22: On Target Following the easing of lockdown 2 the project returned to face to face activities, resuming outdoors with walking and line dancing groups. As movement to level 2 allowed more indoor	Total number of people attending activity groups hosted by Ageing Well each year	3,895	N/A	3,563			Q1 21/22: On Target Quarterly target n/a. Annual target in place.	0



PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
		activities the project currently delivers 36 activities per week supported by up to 50 volunteers.									
AHSC.P.4.2a	Implement block contracts for external Care at Home Providers	Q1 21/22: On Target Contracts awarded 01.06.21. Implementation of contracts is underway. Contracts come into effect 01.09.21.	Block Contracts in place	N/A	N/A	N/A				Q1 21/22: On Target Annual target. Contracts expected to be in place during Q2.	
AHSC.P.4.2b		Q1 21/22: On Target Contracts awarded 01.06.21. Implementation of contracts is underway. Contracts come into effect 01.09.21.	Contractual requirements fulfilled	N/A	N/A	25%				Q1 21/22: On Target	25%
AHSC.P.4.3a	Explore and expand options to offer day support to people in Midlothian to reduce isolation.	Q1 21/22: On Target Day support group established. Undertaking work to establish support needed by community groups and people who continue to be isolated / lack confidence to return to activities.	Number of people accessing day support to reduce isolation	N/A	N/A	250				Q1 21/22: Data only	



05. Mental Health

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
AHSC.P.5.1a	Implement Individual Placement Support specialist employment	Q1 21/22: On Target Support delivered through a blended model of phone,	Number of people (per annum) in employment or education following intervention.	14	N/A	3				Q1 21/22: On Target Annual measure. Quarterly target n/a.	0


PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
	support for people with mental health issues.	NHS near me. and some face to face.								3 IPS outcomes from 1st April to 30th June: 2 employment outcomes and 1 education.	
AHSC.P.5.2a	Enhance community resources for social prescribing by running a specific stress control classes in community venues.	Q1 21/22: On Target Stress control is open access large scale psycho-educational class, due to current Covid 19 restrictions face to face delivery not able to happen. Restrictions around the licensing mean that practitioners in Midlothian are not allowed to deliver via virtual methods.	Number of stress control classes run in community venues.	0	N/A	0				Q1 21/22: Off Target None due to Covid restrictions.	1
AHSC.P.5.3a	Expand mental health development in Primary Care	Q1 21/22: On Target Primary Care Mental Health Nurses are now in 12 GP Practices and the role of OT is being recruited to supplement the service. Evaluation of the impact of primary care nurses is being developed.	Number of individuals accessing the Midlothian Access Point	605	43	411				Q1 21/22: On Target	0



06. Learning Disability

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
AHSC.P.6.2a	Support people with Profound and Multiple Learning Disabilities to live in suitable accommodation by supporting the	Q1 21/22: On Target Awaiting property to become available.	Renovation of Primrose Lodge complete.	0.75	N/A	0.75				Q1 21/22: On Target	0.75

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
	renovation of Primrose Lodge in Loanhead for three people and with the provision of respite for two people.										
AHSC.P.6.1a	Strengthen joint working of Learning Disability Services and care providers to inform longer-term changes in how adult social care is planned and delivered.	Q1 21/22: On Target Focus has been primarily on services during COVID. Regular Providers' Meetings cover remobilisation of services and longer term service planning.	Activity of Day Service Providers' Group incorporated into the Remobilisation programme.	N/A	N/A	25%			Q1 21/22: On Target	25%	
AHSC.P.6.3a	Support people with complex needs in crisis by training practitioners on positive behavioural support as part of embedding PBS in Learning Disability services.	Q1 21/22: On Target Programme impacted by suspension of face to face training. Individual and small group training is being prioritized and delivered around high risk individual cases.	Positive behavioural support pathway to be updated to include staff training at level one.	N/A	N/A	75%			Q1 21/22: On Target	50%	




07. Substance Misuse


PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.7.1a	Ensure those most at risk of overdose have continued	Q1 21/22: On Target Covid lockdown and staffing challenges have limited the	Number of Naloxone kits replenished by MELD, SMS and Peer Workers.	N/A	N/A	9			Q1 21/22: Data only	

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
	access to take-home Naloxone kits to.	opportunities to widen the delivery of Naloxone. 16 Naloxone kits were distributed by MELD, SMS and Peer Workers [9 replenished kits] in Q1. As Covid restrictions ease, Service Managers have been given an action to maximize opportunities to encourage the uptake of Naloxone.									
AHSC.P.7.2a	Expand the offer of buprenorphine prolonged release injections as part of Medication Assisted Treatment options.	Q1 21/22: On Target Despite Covid restrictions impacting service delivery SMS Midlothian have instigated the delivery of Buprenorphine Injections as a widening of the availability and choice to people as part of the implementation of the National Medication Assisted Treatment Standards. The number of people taking u.p offer of buprenorphine prolonged release injections was 7.	Number of people taking up offer of buprenorphine prolonged release injections.	N/A	N/A	7			Q1 21/22: Data only		
AHSC.P.7.3a	Deliver 'rapid access to prescribing and treatment' to help individuals who have dropped out of treatment re-engage.	Q1 21/22: On Target Despite Covid restrictions impacting service delivery, SMS Midlothian instigated an outreach model to those individuals who were most at risk both current patients in service and also offering support and treatment to those individuals identified through an outreach approach [who were not currently in service]. The number of people assisted	Number of people assisted via 'rapid access to prescribing and treatment'	N/A	N/A	11			Q1 21/22: Data only		



PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
		in this way in Q1 was 11. This is over and above the patients normally seen through other aspects of service delivery.								

08. Justice Service



PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.8.1a	Further develop the No11 Practitioners Allocation Meeting to maximise the range of services offered to people involved in the justice service by working collaboratively with Health, Substance Misuse Services, Social Work, Housing and third sector agencies	Q1 21/22: Complete This service continues to provide bespoke packages of care to individuals being released from all HMP establishments. Partners are committed in their engagement and have signed the Information Sharing Protocol.	No 11 Allocation Meeting adapted to support individuals assessed suitable for the Alcohol Problem Solving Court.	N/A	N/A	Yes			Q1 21/22: Complete	Yes
AHSC.P.8.2a	Increase referrals through the Safe and Together approach for noncourt mandated domestic abuse perpetrators.	Q1 21/22: On Target The uptake for this service has remained low, with 0 referrals during this quarter. To support the increase in referrals the following actions have been progressed: Development of a Midlothian Families First oversight group with Social Workers and Team Leader to be involved in promotion and development of the programme; the draft version of the leaflet has	Number of individuals referred through the Safe and Together approach.	4	N/A	0			Q1 21/22: Off Target The uptake for this service has remained low, with 0 referrals during this quarter. To support the increase in referrals a number of actions are being progressed.	4






PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
		been shared with the group and will be finalized by communications. During the next quarter the leaflet will be circulated to internal teams and external organisations and members of the oversight group will attend meetings to promote the service.								
AHSC.P.8.3a	Develop a trauma informed service that focuses on tailored, structured intervention and access to wraparound services for men on Community Payback Order supervision.	Q1 21/22: Complete The inception of 'Stride' (men's service) has been a long process of consultation, research and considered design. The Men's Group will be facilitated by social workers (from Justice and the Substance Misuse Service) and peer support workers with lived experience. The expectation is that all men placed on a CPO will be considered for the Men's Service. It is hopeful that as the group develops, other external services that aim to promote better outcomes for men will become involved. Group work is likely to commence in August 21.	Service planned, designed and implemented.	N/A	N/A	80%			Q1 21/22: On Target Service planned and designed. Group work likely to commence in August 21.	25%



09. Adult Support and Protection

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.9.1a	Raise awareness of self-neglect and hoarding.	Q1 21/22: Complete The Public Protection Office have devised an online survey for frontline staff to evaluate the usefulness of the self-neglect and hoarding protocol. This will provide data on the extent of the use of the protocol and any improvements required.	Number of self-neglect and hoarding referrals which resulted in an investigation.	5	N/A	0			Q1 21/22: Data only 12 referral received relating to self neglect but none resulted in an investigation.	






10. Adults with long term conditions, physical disabilities and sensory impairment

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.10.1a	Deliver weight management programmes to help address and prevent obesity and type 2 diabetes.	Q1 21/22: On Target Waiting times longer due to Covid backlog alongside some additional staffing challenges. Steps are being taken to proactively address this. Hybrid model up and running for delivery of face to face and digital for all programmes. WMS have secured digital devices for people referred so they are able to decide what options best suits their needs.	Number of people referred to Weight Management Triage.	190	N/A	138			Q1 21/22: On Target	100


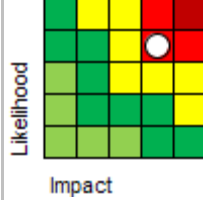

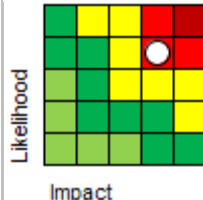
PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.10.2a	Improve awareness and understanding of sensory impairment among HSCP staff and partners by delivering training with RNIB and Deaf Action.	Q1 21/22: Off Target Limited progress has been made as a result of staff absence and a need to prioritise remobilisation of services post covid.	Number of training awareness sessions	0	N/A	0			Q1 21/22: On Target Annual target. Quarterly target n/a. Limited progress has been made as a result of staff absence and a need to prioritise remobilisation of services post covid.	0
AHSC.P.10.3a	Encourage the need for early identification of housing needs and solutions by acting early and having the right housing conversation with individuals.	Q1 21/22: On Target Virtual training sessions completed in April and June 2021 with sessions planned for September and October. There have been good representation from all HSCP staff, housing and third sector staff. Discussions are ongoing about training for GP practices.	Number of housing solutions online training sessions.	N/A	N/A	4			Q1 21/22: On Target	2
AHSC.P.10.3b		Q1 21/22: On Target Virtual training sessions completed in April and June 2021 with sessions planned for September and October. There have been good representation from all HSCP staff, housing and third sector staff. Discussions are ongoing about training for GP practices.	Number of people who attended housing solutions training sessions.	N/A	N/A	60			Q1 21/22: data only	
AHSC.P.10.4a	Support those living with, or previously affected by cancer to stay active by taking part in physical activity to help prevent and manage some of the effects of treatment.	Q1 21/22: On Target ICJ Midlothian saw 26 people. Of these, 2 people have been referred into a physical activity service = 7.7%. As well as the two referrals, an additional 8 people had actions linked to physical activity in terms of	Number of referrals into Move More or equivalent physical activity referral programme from ICJ (Improving the Cancer Journey)	N/A	N/A	2			Q1 21/22: Data only ICJ Midlothian saw 26 people. Of these, 2 people have been referred into a physical activity service = 7.7%	

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target	
				Value	Value	Value	Status	Short Trend	Note		
		advice and information given. This may lead to referrals as support from ICJ continues. In addition, there were related concerns that link with being more active. Again, this may lead to referrals as the work progresses.									
AHSC.P.10.4b	Support those living with, or previously affected by cancer to stay active by taking part in physical activity to help prevent and manage some of the effects of treatment.	Q1 21/22: On Target ICJ Midlothian saw 26 people. Of these, 2 people have been referred into a physical activity service = 7.7%. As well as the two referrals, an additional 8 people had actions linked to physical activity in terms of advice and information given. This may lead to referrals as support from ICJ continues. In addition, there were related concerns that link with being more active. Again, this may lead to referrals as the work progresses.	% of the total participants in the physical activity programmes	N/A	N/A	1.77 %				Q1 21/22: Data only 1.77% of total referrals.	
AHSC.P.10.5a	Collaborative approach to develop a pathway for people living with a neurological condition.	Q1 21/22: On Target Funding confirmed and initial meeting with Scottish Government took place in June. Workshop planned for September. Post to be advertised July 2021.	Pathway activity development for 2021/22 completed for people living with a neurological condition.	N/A	N/A	5%				Q1 21/22: On Target	5%

11. Digital

PI Code	Priority/Action	Action Note	PI	2020/21	Q1 2020/21	Q1 2021/22				Target
				Value	Value	Value	Status	Short Trend	Note	
AHSC.P.11.2a	Lead on development of national technology enabled care project exploring frailty system of care.	Q1 21/22: On Target Project continues to progress on target timelines for the project. We are in a period of development – ideation and prototyping of ideas.	Completion of phase 3 and 4 of the national technology enabled care project.	1	N/A	0.25			Q1 21/22: On Target Phase 3 - 10% complete Phase 4 - Will commence end of calendar year.	0.25
AHSC.P.11.1a	Pursue and explore options to progress incrementally a data exchange mechanism between the Council and NHS Lothian to improve our use of health and social care data.	Q1 21/22: On Target Digital Services recently provided an update to advise they have made a connection with technical teams in NHS Lothian to begin conversations. They will keep us apprised.	Data exchange mechanism between the Council and NHS Lothian is in place.	N/A	N/A	No			Q1 21/22: On Target	No
AHSC.P.11.3a	Establish a mechanism that provides HSCP Senior Management oversight and proper business partner support within a governance framework for accountability to plan and deliver.	Q1 21/22: On Target New Digital Governance Group convened within the HSCP Governance Structure. Inaugural meeting was 24/05/2021.	Digital Governance Group established.	N/A	N/A	Yes			Q1 21/22: On Target New Digital Governance Group convened within the HSCP Governance Structure. Inaugural meeting was 24/05/2021.	Yes
AHSC.P.11.3b	Establish a mechanism that provides HSCP Senior Management oversight and proper business partner support within a governance framework for accountability to plan and deliver.	Q1 21/22: On Target New Digital Governance Group convened within the HSCP Governance Structure. Inaugural meeting was 24/05/2021.	Identified workstreams agreed	N/A	N/A	No			Q1 21/22: On Target	No

Adult Health and Social Care Service Risks

Code & Title	Risk Control Measure	Risk Identification	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
ASC.RR.01-05 Meeting growing demands with constrained /reduced budgets, especially from external funders.	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	<p>Risk Cause: Increasing ageing population of over 75's Increasing numbers of adults with disabilities and complex needs Rising customer expectations Insufficient budget</p> <p>Risk Event: Change programme does not meet future years projected budget gaps</p> <p>Risk Effect: Inability to deliver against strategic priorities</p>		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			16	Adult Health and Social Care
ASC.RR.01-17 COVID 19	1. Communication systems and processes have been put in place. 2. Daily conferences have been set up to appraise evolving situation. 3. COVID-19 Control Team established. 4. A system set up to share information through Directors to all Midlothian staff. 5. Signage on front door of all premises advising people not to enter any of our buildings if they are	<p>There is a risk that Midlothian Health and Social Care Partnership suffer from severe disruption to providing services due to the Coronavirus pandemic (COVID-19). This may lead to:</p> <ul style="list-style-type: none"> -shortages of staff due to contraction of COVID -additional workload for those staff still able to attend work -increased pressure on other parts of the health and social care system 					16	Adult Health and Social Care

Code & Title	Risk Control Measure	Risk Identification	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
	<p>suffering from COVID-19 symptoms.</p> <p>6. Signage up across all buildings advising of good handwashing routines and the necessity of ensuring frequent handwashing taking place.</p> <p>7. In reception areas staff have been provided with masks and alcohol gel.</p> <p>8. Staff updated regularly on NHS Lothian and National Guidelines.</p> <p>9. Resilience plans in place across the Partnership.</p> <p>10. Staff briefings to discuss responses to COVID-19 have been actioned with a focus on personal resilience plans to ensure attendance at work.</p> <p>11. Asked staff to consider unnecessary face to face contact with patients is replaced by telephone contact.</p> <p>12. Homeworking in place where appropriate.</p> <p>13. Absence reporting and monitoring in place highlighting COVID related absence.</p> <p>14. Midlothian Health and Social Care Partnership 'Remobilisation Plan' sets out a four-phased approach and recovery priorities.</p>	<p>-reduction of care provided to patients due to reduced staffing levels with a move to focus on essential work only</p> <p>-essential supplies may be difficult to source, resulting in reduced stocks.</p>						

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	2016/17	2017/18	2018/19	2019/20	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	
SW1	Corporate Indicator - Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£19.11	£19.71	£14.17	£26.60	£31.10	£28.31	£25.79	£38.65	£35.75	£35.51	19/20 Rank 28 (Bottom Quartile). 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 - Self Directed Support (Direct Payments + Managed Personalised Budgets) spend on adults 18+ as a % of total social work spend on adults 18+ (LGBF)	2.76%	2.18%	2.4%	2.78%	2.69%	3.95%	6.11%	4.75%	4.51%	5.06%	19/20 Rank 15 (Second Quartile). 18/19 Rank 18 (Third Quartile). 17/18 Rank 13 (Second Quartile). 16/17 Rank 8 (Top 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 (LGBF)	61.14 %	63.91 %	65.76 %	65.37 %	60.11 %	66.67 %	66.98 %	68.04 %	50.4%	54.09 %	19/20 Rank 29 (Bottom Quartile). 18/19 Rank 32 (Bottom Quartile). 17/18 Rank 5 (Top Quartile). 16/17 Rank 6 (Top Quartile). 15/16 Rank 9 (Second Quartile). 14/15 Rank 20 (Third Quartile).
SW4b	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. (data based on respondents whose care was funded by the council or health board) (LGBF)					81.73 %	85.7%		73.05 %		67.57 %	19/20 Rank 32 (Bottom Quartile). 17/18 Rank 31 (Bottom Quartile). 15/16 Rank 15 (Second Quartile). 14/15 Rank 28 (Bottom Quartile)
SW4c	New - Percentage of adults supported at home who agree that they are supported to live as independently as possible (data based on respondents whose care was funded by the council or health board) (LGBF)				82.61 %		77.96 %		86.28 %		80.05 %	19/20 Rank 20 (Third Quartile). 17/18 Rank 3 (TOP Quartile). 15/16 Rank 30 (Bottom Quartile). 13/14 Rank 19 (Third Quartile).

Code	Title	2010/	2011/	2012/	2013/	2014/	2015/	2016/	2017/	2018/	2019/	External Comparison
		11	12	13	14	15	16	17	18	19	20	
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	
SW4d	New - Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided (data based on respondents whose care was funded by the council or health board) (LGBF)				84.9%		84.44%		79.68%		66.95%	19/20 Rank 32 (Bottom Quartile). 17/18 Rank 6 (TOP Quartile). 15/16 Rank 1 (TOP Quartile). 14/15 Rank 8 (TOP Quartile)
SW4e	New - Percentage of carers who feel supported to continue in their caring role (data based on respondents whose care was funded by the council or health board) (LGBF)				44.48%		39.43%		32.1%		31.54%	19/20 Rank 27 (Bottom Quartile). 17/18 Rank 31 (Bottom Quartile). 15/16 Rank 21 (Third Quartile). 13/14 Rank 11 (Second Quartile).
SW5	Corporate Indicator - The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	£413.84	£443.52	£444.45	£438.45	£416.34	£428.43	£380.35	£435.00	£423.09	£453.58	19/20 Rank 21 (Third Quartile) 18/19 Rank 17 (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 (LGBF)	93.79	105.81	105.82	101.45	107.11	104.49	109.36	114.39	108.89	108.77	19/20 Rank 17 (Third Quartile) 18/19 Rank 20 (Third Quartile). 17/18 Rank 26 (Bottom Quartile). 16/17 Rank 24 (Third Quartile). 15/16 Rank 21 (Third Quartile). 14/15 Rank 27 (Bottom Quartile).
SW7	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections (LGBF)		76.6%	80%	82.98%	77.78%	76.32%	69.39%	73.91%	78.05%	76.74%	19/20 Rank 24 (Third Quartile) 18/19 Rank 25 (Bottom Quartile). 17/18 Rank 30 (Bottom Quartile). 16/17 Rank 31 (Bottom Quartile). 15/16 Rank 28 (Bottom Quartile). 14/15 Rank 21 (Third Quartile)
SW8	Number of days people spend in hospital when they are ready to be discharged, per 1,000 population (75+) (LGBF)				917.12	1059.24	834.91	971.19	1422.02	1323.32	965.62	19/20 Rank 24 (Third Quartile) 18/19 Rank 29 (Bottom Quartile). 17/18 Rank 30 (Bottom Quartile). 16/17 Rank 23 (Third Quartile). 15/16 Rank 20 (Third Quartile). 14/15 Rank 24 (Third Quartile).

Culture and Leisure

Code	Title	2010/ 11	2011/ 12	2012/ 13	2013/ 14	2014/ 15	2015/ 16	2016/ 17	2017/ 18	2018/ 19	2019/ 20	External Comparison
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	
C&L1	Corporate Indicator - NET Cost per attendance at Sports facilities (LGBF)	£4.34	£2.93	£3.82	£3.11	£3.29	£3.68	£3.79	£4.50	£3.39	£3.12	19/20 Rank 22 (Third Quartile) 18/19 Rank 26 (Bottom Quartile). 17/18 Rank 29 (Bottom Quartile). 16/17 Rank 23 (Bottom Quartile). 15/16 Rank 24 (Third Quartile). 14/15 Rank 19 (Third Quartile).