

Adult Health and Social Care Performance Report 2022/23



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.

Midlothian Integration Joint Board plan and direct the services that are delivered by Midlothian Health and Social Care Partnership (HSCP). The HSCP is a partnership between NHS Lothian and Midlothian Council and is responsible for services that help Midlothian residents to live well and get support when they need it. This includes all community health and social care services for adults in Midlothian and some hospital based services such as Accident and Emergency.

In order to meet the legal requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, the HSCP was required to develop, consult on, and publish a new 3 year Strategic Plan in 2022. The new Strategic Plan for 2022-25 was published in April 2022.

HSCP COVID-19 Response

The Health and Social Care Partnership, its partners and the communities it services continued to be impacted by the ongoing effects of the COVID19 pandemic. A recent spike in infections over the winter months coupled with Influenza cases has caused significant pressure on our workforce due to absences. The Health and Social Care Partnership has maintained delivery of services and continues to work with its partners to ensure resources are being managed and deployed to cover staff absences where needed. The partnership continue to deliver the vaccination programme across sites in Midlothian. Midlothian Community Hospital have seen a return in face-to-face outpatient clinics. More recently, guidance around PPE has been further relaxed and there has been an indication from the World Health Organisation (WHO) that, "with great hope", the pandemic is at an end.

Seasonal Flu/COVID Booster Programmes

The Midlothian Vaccination Team have responsibility for all vaccinations; Seasonal Flu, all covid vaccines, shingles and pneumococcal and all unscheduled vaccines that were part of the Vaccination Transformation Programme from the GPs to the HSCP.

The Autumn/Winter 2022/23 Vaccination Programme for Flu and Covid boosters concluded on 31st March 2023. As of 31st March 2023, the uptake of flu vaccines for adults administered in Midlothian HSCP is 71% for Flu vaccines and 70% for Covid Booster vaccines.

The Community Vaccination Team continue to deliver the school flu programme and the 0-5 immunisation team deliver the 2-5 year flu programme with a 61% uptake on 31st March 2023.

Shingles and Pneumococcal vaccinations – as of 31st March 2023, Shingles vaccination uptake for Midlothian is 82% and the pneumococcal vaccination uptake for Midlothian is 78% with some second offers outstanding. This will be picked up following the spring booster vaccination programme.

The Spring Covid Booster Vaccination Programme commenced on 27th March 2023. The first two weeks have been dedicated to Care Home and House Bound patients. All eligible cohorts thereafter, 75+ and those 12+ with Weakened Immune Systems (WIS), have been invited for their vaccinations across 3 venues from 11th April 2023 – Midlothian Community Hospital, Rosewell Steading and Dalkeith Medical Practice.

As part of the ongoing inclusivity plan and to promote further uptake in line with the Scottish Government, Pop-up vaccination clinics have taken place to target areas of deprivation, areas of lower uptake, residents in homeless accommodation, those with substance misuse and those involved in the Criminal Justice System. These venues include: IKEA Edinburgh, Mayfield Community Big Dig event, local Ukrainian coffee morning, Dalkeith Library/Arts Centre and Warm Hubs in Midlothian, separate clinic sessions were held inviting individuals in homeless

accommodation and Learning Disabilities teams continue to support with vaccinating their patient who are unable to attend clinics.

Service Transformation

Whilst there remains some pause on the work to develop a National Care Service, discussions continue around the preparation required at both Chief Social Work Officer meetings and other Social Work Scotland fora.

It should be noted that both COSLA and Social Work Scotland have requested that the Scottish Government pause on the Bill pending further consultation. Notice was provided in March 2023 that there would be a pause in NCS progression pending the outcome of the election of a new First Minister. It had been anticipated that work would re-start in June 2023 but the new Minister for Social Care, Wellbeing and Sport, Maree Todd, has indicated that the debate may be pushed further back in the timetable.

Justice

The Justice Team have continued to deliver a range of interventions that fulfil our statutory requirements, despite managing a number of vacancies throughout the financial year. This has included making progress to implement the national outcomes outlined in the Scottish Government's [Vision for Justice in Scotland](#). To ensure that we are able to provide early interventions at the Court stage we continue to liaise with colleagues locally and nationally to enable us to offer and provide a range of bail services to those resident in Midlothian. As evidenced by the updated performance measures we have made good progress against the performance indicators, despite workforce pressures and this has been supported by close partnership working to ensure that we can achieve positive outcomes for service users.

Throughout the 2022-2023 financial year the Community Justice and Safety Manager has continued to work with partner agencies (statutory and third sector) to deliver the outcomes in the 2020-2023 Community Justice Outcome and Improvement Plan (CJOIP) and to develop the forthcoming 5 year plan (2023-2028). The importance of communicating and increasing awareness and understanding of Justice and Community Justice was highlighted and during 2022-23 financial year and we worked in collaboration with media students at Edinburgh College (Dalkeith Campus) to raise awareness around the issues on topics including Hate Crime, Masculinity, Restorative Justice and Violence against Women and Girls. The project culminated in the students producing short videos highlighting the issues which were showcased at an event on 21st February 2023. This prompted detailed and positive discussions allowing sharing of knowledge & expertise between the students, professionals and others in attendance. In addition the event allowed opportunities for discussion on gaps that Midlothian Council and partners could address in the coming years to address issues and concerns together with establishing and developing partnership. Feedback from the event was extremely positive with partner agencies keen to build on the work undertaken to inform learning and development within their own organisations.

Substance Misuse

Key services based in Number 11 in Dalkeith continued to provide services including outreach treatment, injecting equipment provision (IEP), Naloxone, and information/advice. Currently, there are challenges with recruitment. However, the Midlothian Substance Use Service continues to support and treat those individuals who are most at risk. This includes the provision of Buvidal (an injectable form of Buprenorphine).

MELDAP is in the top six ADPs in terms of the uptake of Buvidal. The national uptake is 12.5% while the MELDAP figure is 25%.

MELDAP has been advised of a provisional Green rating for Medication Assisted Treatment (MAT) Standards 1-5. MAT 1 included improved access and starting treatment on the same day as presenting. For Q4 the waiting times performance was 95%. (National standard is 90%). Midlothian is well placed to deliver MAT Standards 6 -10 by the March 2024. The Scottish Government predicts a rating of amber for these standards. This is due to the fact that Scottish Government have yet to confirm the processes and measurements associated with the delivery of these standards.

Learning Disabilities

Finance and Performance Group approved the recommendations of the Complex Care Expert Panel for allocation of the Community Change Fund. The key spending priorities are the recruitment to a Transition Development Worker, Improvements to Day Service Venues for people with Complex Needs, A Positive Behavioural Support Training Programme and grants to third sector organisations.

The Human Rights Expert Panel has completed its first programme of activity and has now agreed a programme of two monthly meetings for the remainder of 2023.

Building work has started on the flats at Bonnyrigg High Street and is scheduled for completion in June 2024. Designs for Primrose Lodge in Loanhead are complete, and the property is now vacant. A reapplication for capital to fund the project was refused, and alternative sources of funding are being sought. Renovations at Teviot Court are now complete with the exception of some outside groundwork that should not affect tenants.

Numbers on the Learning Disability waiting list remain constant. Cases are prioritised based on urgency and the figures will mask the turnover of cases on the waiting list or cases that have been allocated immediately. The waiting list is regularly reviewed for any change in circumstances that will require immediate allocation.

Older People

Care at home: Our internal and external providers delivered 68,765 planned hours of care during this quarter. Our internal Care at Home service delivered 35% of the planned hours, and a total of 56,537 visits across Midlothian. A new Resource Manager was appointed and face to face meetings have been held with carers in each area, jointly with Union partners. Staff feedback and engagement has helped with the development of a Service Improvement Plan. Learning and Development continues to be a significant focus, with the opening of the new training suite at Hardengreen offering a local space to facilitate Moving and Handling training.

Carers

Unpaid carer management oversight changed to Service Manager Disabilities at the start of Q4. Work during Q3 to produce a business case and plan committing available recurring and underspent Carers Act funding continued during Q4, but the change in manager allowed the opportunity for a status check on HSCP internal funding utilisation and commitment. Carers Act funding is ring-fenced, but recognition is being given to the impact on carers and services of the wider Council/HSCP budgetary situation. Head of Adult Services has been apprised of carer funding proposals, and is working with the Service Manager and Carer Planning Officer regarding a transparent and collaborative decision making process regarding the commitment of available funds.

The Carer Planning Officer is in discussion with Alzheimer Scotland senior managers regarding the Dementia Carer Support Practitioner post. Identification of an HR issue has resulted in changes to the original /person specification, but this is resolved and can hopefully result in the post being advertised as soon as possible.

Mental Health

Primary Care 2022 Action 15 developments continues to be postponed still awaiting update from Scottish Government.

Individual Placement Support Occupational therapist post has been recruited into and commenced and has a triage referral caseload of 25 individuals. During Q4 up until the IPS OT commenced post it's important to note that the core Adult Mental Health OT service has been able to support the following individuals: Employment (14), Volunteering (3), and Education (17).

Continued Strong partnership working continues between Housing, Health and Social care with third sector. Providing support for individuals with complex needs, through the housing first model.

The current local Adult Mental Health Social Work Team/Mental Health Officer team comprises 4 full time Mental Health Officers (MHO), 2 trainees currently out of practice and 1 part time social worker. The team is currently progressing with the recruitment of 1 further Social Worker for the team.

Over the last year there have been various challenges in relation to workforce pressures and recruitment of MHOs. Locally we identified the need to support further development, training and retention of MHOs within the current Midlothian Social Work teams, thus enhancing the capacity to address both the Mental Health Social Work waiting list and the Welfare Guardianship Order waiting list.

As a service we addressed these challenges through the review of the current waiting list at the time, identified the local Social Work staff who were appropriate to progress with MHO training as well as having the opportunity to invest further through additional monies the recruitment of a 1 wte permanent Social Worker for the team. We were also able to proceed with the recruitment and support of one agency MHO and one casual MHO to support with progressing and reducing the Welfare Guardianship Order waiting list.

Over 2022/2023 we have successfully made a significant impact on our waiting list from 60 individual's waiting for MHO report to current waiting list being 18.

We are hopeful that once our current MHO trainees are back in practice and the new Social Worker is in post, we will be able to maintain a minimal waiting list and be reactive to WGO's, as a service we will continue to monitor the demand and waiting list on a monthly basis.

Adults with Long Term Conditions, Disability and Impairment

Awareness training sessions for relevant HSCP staff, provided by Sight Scotland are being delivered, starting in June 2023. Sight Scotland continue to provide information sessions to staff in relation to the services they provide and report back on the people they have worked with. They continue to reduce waiting lists for people requiring their service, which is offered in their community and evidence this through quarterly reporting.

Deaf Action now have a qualified Social Worker in place who has actively engaged with Social Work and Physical Disabilities Teams within the Partnership. A review of work being undertaken by CCA's at Deaf Action has taken place jointly with the Physical Disabilities Team.

Volunteers continue to uplift peoples' faulty hearing aids from their homes and deliver the aids to Midlothian Community Hospital for an Audiology technician to repair, and then return the repaired aids back to the individuals. Specially trained staff are also able to repair hearing aids for people on the same day. This service is offered both by HSCP and Red cross staff. There has been no active movement in terms of re-introducing Community Audiology Clinics as there has been no communication from the Audiology Service, despite several attempts.

The Physical Disabilities Team and Long Term Conditions Team is currently part of a joint project with the Thistle Foundation which aims to improve support provided to someone who has Neurological Condition. This is due to be evaluated in the Autumn. The Service is also in the process of reviewing its Guidelines for the provision of Aids and Adaptations with the aim that this document can be shared with members of the public to help them understand better the role and remit of the Service

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 Improving.

Sport and Leisure

The Sport and Leisure Service Review is nearing completion and the new structure will be implemented from early 2023/24. Vacancies remain in the service and recruitment is continuing for these.

ToneZone Memberships have increased from 4103 at the start of the quarter to 4346 at the end of Q4. On return from Covid we had 3570 memberships which currently sits at 4346 (1796 less than pre Covid) however up 776 since reopening.

Factors influencing a decline in returning customers include:

- . post Covid training habits – more people are inclined to use the outdoor spaces;
- . delayed access in returning to facility of choice (specifically Lasswade and Newbattle);
- . current cost of living;
- . alternative gyms opening in the Midlothian and outside Midlothian.

The management team in Sport and Leisure are working hard to identify opportunities to increase participation, membership and income and these include:

- . A Tone Zone marketing plan (£0 costs involved) is available – initiatives include reduced joining and membership fees, a focus in December on fitness, free months;
- . Promote all our offerings on social media platforms and via the Council Communications team regularly (43 posts about classes, 70 posts about individual centres and operational matters, 13 posts about offers such as joining fees, 20 general media type posts such as success of Ageing Well initiatives, Destination Hillend updates and Walk the Line calls for entries);
- . We also promote through Active Schools (April 23) 15 tweets, 17.4K tweet impressions, 544 visits, 24 mentions and 3 new followers.

Project work

We continued to undertake various project work including:

- . CLLE: we have continued to work in partnership with CLLE to offer opportunities to identified young people and families;
- . Daily Mile: We are continuing to work on promoting and providing support for schools to deliver this;
- . Cycle fund: We have received £7522 from Scottish Cycling to purchase some bikes and organise training to allow us to deliver more cycling sessions and make cycling more accessible to all. We plan to apply for year 2 funding to expand this programme to allow us to take a more targeted approach;
- . Kit for All: we have continued to develop this with Young Ambassadors driving this project. They are currently promoting the project and coordinating donation and collection of kit. This is currently running in 3 areas, with plans to expand into others.

Secondary Schools

Work in our Secondary Schools continues:

- . Young Ambassadors: Our young ambassadors have worked on various projects this term including kit for all, inter house events, Active Girls events & promotion and organisation of Lasswade Sports Personality event;
- . Fit for Girls (FFG) – our existing and new FFG group attended a workshop delivered by national trainers to help with planning and development of our FFG work in Midlothian.

Challenges and Risks

COVID-19

The Health and Social Care Partnership, its partners and the communities it serves continued to be impacted by the COVID 19 pandemic. The Health and Social Care Partnership has maintained delivery of services and continues to work with its partners to ensure resources are being managed and deployed to cover staff absences where needed and continue to develop our remobilisation plans. We continue to work to ensure key staff receive both the Covid and flu vaccine. The winter covid 19 vaccination programme has been completed, with plans for the spring booster programme by cohort groups planned to commence 27 March 2023

A growing and ageing population Midlothian is 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. We have invested further in providing post-diagnostic support to people living with dementia in their own homes, particularly to those newly diagnosed. We are working hard to ensure all people diagnosed with dementia have access to a link worker for the first year post-diagnosis

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. Our Community Treatment and Assessment centres (ctac) continue to develop within our localities linked to our GP practices. We provide phlebotomy services Long term condition monitoring, wound management in our CTAC clinics. We plan to collaboratively develop a digital platform that engages people to access preventative support with activities of daily living (ADLs) using the LifeCurve platform to empower people to feel more in control of their own health and wellbeing. This will bring together learning and insights from several projects including the Neurological Conditions project, the Long Covid Pathway and the Integrated Falls Pathway which aim to target support for the wellbeing and symptom management of those living with long term conditions in Midlothian.

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. Alongside more established nursing and social work services, Midlothian HSCP established the Mental Health and Resilience Service (MHARS) in August 2022. This is a 7-day per week telephone service people can access for advice and support around how they can better manage their mental health. It is self-referral and there are a range of options available post-telephone call.

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, sex, gender or long term health conditions. Yet there are a number of pressures on our services. For example, we have particular pressures regarding transitions of young people with learning disabilities from childrens' to adults' 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. We have particular pressures in our disability services with challenges to meet complex needs in the community when in the past care settings may have been considered. In working through the IJB budget for 2023-24, we are beginning to look at how we can make efficiencies. It is likely that difficult choices may have to be made.

Transitions from Children's Services There is a specific pressure regarding the transition of young people from childrens' to adult services (mainly with learning disabilities). There is an increasing number of young people meeting eligibility criteria for support and the number of young people with particularly complex needs also increasing. In addition to the overall financial pressure of increased support provision by adult services there are challenges related to improving the experience of transitions, Improvement work is being progressed to improve multi-agency practice in relation to transitions and embed the newly developed Principles of Good Transitions. Specific ring-fenced Learning Disability funding will be used to recruit a development worker who will be tasked specifically taking forward this work related to improving the transition pathway.

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. There is reduced availability of staff with appropriate qualifications or skills, including General Practitioners, Social Care Workers and Staff Nurses. This impacts on service delivery and development. Whilst we continue to attempt recruitment, we acknowledge that some areas remain stubbornly difficult to recruit to. To offset this, where we can, we look to change workforce skills mix but this is not always feasible.

Our Lothian wide clinical education plans have been developed to respond to the need to develop numbers of staff working at and Advanced Practice level in nursing and AHP as part of the approach to orienting the whole system to meet modern challenges, thus enabling GPs focus on more complex work by developing the skills of the nursing and AHP workforce to undertake diagnosis and prescribing. Midlothian currently has a Pharmacy team that is fully established and has a recent history of successful recruitment. This team is deployed in GP practices supporting the principles of the 2018 GMS contract focussing on delivery of Pharmacotherapy, within the limits of the current funding allocation. Practice pharmacy teams have discussions with patients daily to ensure the safest and most appropriate use of their medicines.

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 became carers for the first time, or saw 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 services supporting carers 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, impacting on carers. Further work is required to reduce the significant pressure and impact of caring that carers reported, 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. We are currently working with key stakeholders to determine how best to allocate the resources we have for unpaid carers. We are particularly keen to see an increase in capacity of respite opportunities for both individuals and their carers.

Acute hospitals Acute hospitals are under huge pressure due to unsustainable demand and financial restrictions. Investing in community based services and work with carers is required to minimise avoidable and inappropriate admissions and facilitate earlier discharge. By treating people closer to home, or in their own home the HSCP can support admission avoidance and improve people's outcomes. Winter has seen a consistent pressure at the front doors of our hospital sites across Lothian. Midlothian HSCO community services are focusing on flow through the hospital and have invested in an umbrella of community services to embed our Home First model of care delivery. Community Respiratory Team, Rapid response team, district nursing, care at home services have been supported to increase capacity to sustain support to those within community and avoid hospital admission.

Adult Health and Social Care PI summary

01. Manage budget effectively

Priorities	Indicator	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Feeder Data	Value
		Value	Value	Value	Value	Value	Value	Value	Value	Status	Note			
01. Manage budget effectively	Performance against revenue budget	£52.319m	£52.319m	£59.284m	£59.258m	£59.388m	£56.611.752	£56.611.752		22/23: On Target		£56.611.752		

02. Manage stress and absence

Priorities	Indicator	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Feeder Data	Value
		Value	Value	Value	Value	Value	Value	Value	Status	Note	Short Trend			
02. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	17.10	17.10	4.83	10.56	15.78	21.16	21.16		22/23: Off Target		10.53	Number of days lost	13,404.72
													Number of FTE in service	633.42

03. Complete all service priorities

Priorities	Indicator	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Feeder Data	Value
		Value	Value	Value	Value	Value	Value	Value	Status	Note	Short Trend			
03. Complete all service priorities	% of service priority Actions on target / completed, of the total number	82.86%	82.86%	91.89%	89.19%	94.44%	72.97%	72.97%		22/23: Off Target 10 service actions identified as off target: Commentary contained within report. 1 Health Inequalities; 1 Assessment and Care Management; 1 Carers; 2 Older People; 1 Learning Disability; 1 Adults with Long Term Conditions; 2 Extra Care Housing; 1 Sport and Leisure		90%	NUMBER of service priority actions in total	37
													NUMBER of service priority actions on target / completed	27

04. Process invoices efficiently

Priorities	Indicator	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Feeder Data	Value
		Value	Value	Value	Value	Value	Value	Value	Status	Note	Short Trend			
04. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	96%	96%	96%	96%	97%	97%	97%		22/23: On Target		97%	Number of invoices received (cumulative)	1,447
													Number paid within 30 days (cumulative)	1,408



05. Improve PI performance

Priorities	Indicator	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Feeder Data	Value
		Value	Value	Value	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)	76.09%	76.09%	92.86%	88.1%	84.09%	70.45%	70.45%		22/23: Off Target 13 performance indicators identified off target: Commentary contained the report. 3 Health Inequalities; 2 Assessment and Care Management; 1 Carers; 1 Older People; 2 Learning Disability; 1 Adults with Long Term Conditions; 2 Extra Care Housing; 1 Sport and Leisure		90%	Number on tgt/complete or Data Only	31
													Number of PI's in total	44

06. Control Risk

Priorities	Indicator	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Feeder Data	Value
		Value	Value	Value	Value	Value	Value	Value	Status	Note	Short Trend			
06. Control Risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%	100%	100%	100%	100%		22/23: On Target		100%	Number of high risks reviewed in the last quarter	0
													Number of risks that are graded as high	0







07. Implement Improvement Plans

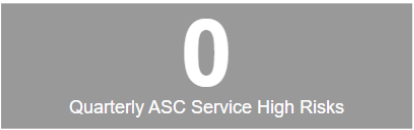
Priorities	Indicator	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Feeder Data	Value	
		Value	Value	Value	Value	Value	Value	Value	Status	Note				Short Trend
07. Implement Improvement Plans	% of internal/external audit actions progressing on target or complete this quarter.	66.6%	66.67%	80%	100%	83.33%	100%	100%		22/23: On Target		90%	Number of internal/external audit actions on target or complete	16
													Total number of internal/external audit actions	16

Adult Health and Social Care Complaints Indicator Summary

Commitment to valuing Complaints 4. Outcomes and Customer Feedback

Indicator	2021/ 22	Q4 2021/ 22	Q1 2022/ 23	Q2 2022/ 23	Q3 2022/ 23	Q4 2022/ 23	2022/23				Annual Target 2022/ 23
	Value	Value	Value	Value	Value	Value	Value	Status	Note	Short Trend	
Number of complaints received (quarterly)	53	13	15	21	20	19	75		22/23: Data only		
Number of complaints closed in the year	53	13	14	17	20	14	65		22/23: Data only		
Number of complaints upheld (quarterly)	3	0	0	0	3	1	4		22/23: Data only		
Number of complaints partially upheld (quarterly)	3	0	0	2	2	1	5		22/23: Data only		
Number of complaints not upheld (quarterly)	33	11	13	10	9	9	40		22/23: Data Only		
Number of complaints Resolved (quarterly)	14	2	1	5	4	1	11		22/23: Data only		
Average time in working days to respond to complaints at stage 1	13.17	12.38	7.9	4.14	3.18	5.8	5.11		22/23: Off Target The marginal breach of the 5 day target was due to continued operational pressure across the system, with increased staff shortages due to high levels of sickness and annual leave. We are confident that this will be brought within tolerance within Q1 2023/24.		5
Average time in working days to respond to complaints at stage 2	14.83	14.2	19.67	9.33	12.2	17.75	14.6		22/23: On Target		20
Average time in working days for a full response for escalated complaints	0	0	20	0	0	0	0		22/23: On Target		20
Percentage of complaints at stage 1 complete within 5 working days	36.17 %	62.5%	70%	85.71 %	81.82 %	70%	77.78 %		22/23: Off Target The marginal breach of the 5 day target was due to continued operational pressure across the system, with increased staff shortages due to high levels of sickness and annual leave. We are confident that this will be brought within tolerance within Q1 2023/24.		95%
Percentage of complaints at stage 2 complete within 20 working days	66.67 %	60%	33.33 %	100%	80%	75%	73.33 %		22/23: Off Target The marginal breach of the 20 day target was due to continued operational pressure across the system, with increased staff shortages due to high levels of sickness and annual leave. We are confident that this will be brought within tolerance within Q1 2023/24.		95%

Percentage of complaints escalated and complete within 20 working days	100%	100%	100%	100%	100%	100%	100%		22/23: On Target		95%
Number of complaints where an extension to the 5 or 20 day target has been authorised (quarterly)			4	2	4	0	10		22/23: Data only		
Number of Compliments	3	1	2	0	1	0	3		22/23: Data only		



Adult Health and Social Care INDICATORS Off Target

Code & Title	Gauge	Value	Target	Last Update	History
AHSC.MPI.02 Average number of working days lost due to sickness absence (cumul...		21.16	10.53	Q4 2022/23	
AHSC.P.12.1a Number of specific activities available per site for target population.		582	2,450	Q4 2022/23	
HSCP.P.4.8a Review complete. Future model of delivery identified.		35%	100%	Q4 2022/23	
AHSC.P.2.1a Average wait time for occupational therapy services		13 weeks	6 weeks	Q4 2022/23	
AHSC.P.10.8a Lines of communication formally agreed with all relevant agencies.		45%	100%	Q4 2022/23	
AHSC.P.6.6a Draft Dynamic Risk Tool trialled.		50%	100%	Q4 2022/23	
BS.ASC.S.05.05c Maintain at zero the number of patients delayed in hospital for mo...		6	0	Q4 2022/23	
xPAHSC.4.2a Additional benefit income to Midlothian residents identified as frail		£104,988	£150,000	2022/23	
ASC.SPSO.05.1 Percentage of complaints at stage 1 complete within 5 working days		70%	95%	Q4 2022/23	
AHSC.P.11.1a Complete opening and active use of Extra Care units (including 1 bari...		75%	100%	Q4 2022/23	
AHSC.P.11.3a Completion of 6 month pilot of residential respite within Cowan Court ...		75%	100%	Q4 2022/23	
AHSC.P.3.3a Local Power of Attorney campaign delivered.		75%	100%	Q4 2022/23	
AHSC.P.6.4a Renovation and Remodelling complete.		75%	100%	Q4 2022/23	
AHSC.MPI.05 % of Service PIs that are on target/ have reached their target. (does n...		70.45%	90%	Q4 2022/23	
ASC.SPSO.05.2 Percentage of complaints at stage 2 complete within 20 working days		75%	95%	Q4 2022/23	
AHSC.MPI.03 % of service priority Actions on target / completed, of the total number		72.97%	90%	Q4 2022/23	
BS.ASC.07 % of satisfactory complete Community Payback Orders		73%	80%	Q4 2022/23	
AHSC.P.2.1b Average wait time for social work services		7.5 weeks	6 weeks	Q4 2022/23	
xPAHSC.4.1a Number of people supported with Cancer - Welfare Rights Service (a...		233	250	Q4 2022/23	
ASC.SPSO.04.1 Average time in working days to respond to complaints at stage 1		5.8	5	Q4 2022/23	

← 1 of 1 →

SMP Adult Health and Social Care ACTIONS Off Target

...	Code & Title	Progress	Status	Due Date	...	Type
	AHSC.P.2.1 Reduce waiting times for occupational therapy and social work services.	<div style="width: 30%;"><div style="width: 30%;"></div></div>	30% Overdue	31 Mar 2023		Action
	AHSC.P.3.3 Support carers to be involved in future planning by developing a local po...	<div style="width: 75%;"><div style="width: 75%;"></div></div>	75% Overdue	31 Mar 2023		Action
	AHSC.P.6.4 Develop Primrose Lodge in Loanhead into long term accommodation for...	<div style="width: 75%;"><div style="width: 75%;"></div></div>	75% Overdue	31 Mar 2023		Action
	AHSC.P.10.8 Establish effective links between the Physical Disability Planning Grou...	<div style="width: 45%;"><div style="width: 45%;"></div></div>	45% Overdue	31 Mar 2023		Action
	AHSC.P.11.1 Open and actively use the 48 new build Extra Care units (including 1 b...	<div style="width: 75%;"><div style="width: 75%;"></div></div>	75% Overdue	31 Mar 2023		Action

← 1 of 2 →

Adult Social Care Performance



01. Health Inequalities

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target	
				Value	Value	Value	Value	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.	22/23: On Target The service completes this year having delivered 11 Courses, 4 courses were on line and 7 courses were in person at Community Venues. 96 people have attended these courses. The number of people referred to the Wellbeing Service from across all 12 GP Practices has increased by 18.63% from last year.	Number of people referred to the Wellbeing Service across all 12 GP practices	966	271	263	273	285	325	1,146			22/23: On Target	1,000	250
AHSC.P.1.2a	Support people vulnerable to health inequalities by referral to the Community Health and Inequalities Team.	22/23: On Target Referrals come from a variety of sources including, temporary accommodations, justice and self-referrals.	Number of people who received a health assessment from the Community Health Inequalities Team.	162	16	56	22	71	18	167			22/23: On Target	150	150
xP.AHSC.4.1a	Deliver Welfare Rights service to people with health and social care needs	Q3 22/23: On Target Service continues for people receiving a Health and Social care service. Referrals remain steady. Positive outcomes continue.	Number of people supported with Cancer - Welfare Rights Service (accumulative)	270	270	116	137	171	233	233			22/23: Off Target	250	250

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
xP.AHSC.4.2a	Work with Red Cross to support people who are frail to access financial support available to them.	22/23: Off Target Work continues to support people identified on the frailty scale to access financial support. This stream of work recommenced in March 2023. No financial update in Q4.	Additional benefit income to Midlothian residents identified as frail	£216,112	Not measured for Quarters					£104,988			22/23: Off Target H2 22/23: Off Target The DWP return for 1st Oct -31st Dec is nil due to stopping identification of frailty patients from old GP lists. No financial data available for Q4.	£150,000	£150,000





02. Assessment and Care Management



PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
AHSC.P.2.1a	Reduce waiting times for occupational therapy and social work services.	22/23: Off Target Wait times being addressed and monitored weekly.	Average wait time for occupational therapy services	4.6 weeks	4.6 weeks	6 weeks	8.6 weeks	12 weeks	13 weeks	13 weeks			22/23: Off Target Complexity of request and workforce pressures	6 weeks	6 weeks
AHSC.P.2.1b	Reduce waiting times for occupational therapy and social work services.	22/23: Off Target Wait times being addressed and monitored weekly.	Average wait time for social work services	10.8 weeks	10.8 weeks	13.4 weeks	19 weeks	10.8 weeks	7.5 weeks	7.5 weeks			22/23: Off Target Improvement noted	6 weeks	6 weeks
AHSC.P.2.2a	Continue to implement and monitor Self Directed Support	22/23: On Target	Proportion of people choosing SDS option 1	8.4%	8.4%	8.8%	9.4%	9.3%	8.8%	8.8%			22/23: Data only		
AHSC.P.2.2b	Continue to implement and monitor Self Directed Support	22/23: On Target	Proportion of people choosing SDS option 2	1.9%	1.9%	1.8%	1.5%	1.7%	1.6%	1.6%			22/23: Data only		
AHSC.P.2.2c	Continue to implement and monitor Self Directed Support	22/23: On Target	Proportion of people choosing SDS option 3	86.7%	86.7%	86.9%	86.3%	86.6%	87.2%	87.2%			22/23: Data only		

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
AHSC.P.2.2d	Continue to implement and monitor Self Directed Support	22/23: On Target	Proportion of people choosing SDS option 4	2.9%	2.9%	2.5%	2.8%	2.4%	2.4%	2.4%			22/23: Data only		
AHSC.P.2.2e	Continue to implement and monitor Self Directed Support	22/23: On Target	% of people who feel they are participating more in activities of their choice	86.9%	86.9%	88.2%	80.7%	85.7%	83.7%	83.7%			22/23: On Target	75%	75%

03. Carers





PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
AHSC.P.3.1b	Provide carers with the tools and skills to manage their caring role through the provision of Adult Carer Support Plans and information and advice services.	22/23: On Target Adult Carer Support Plans (ACSP) continue to be delivered by the HSCP and VOCAL. Reporting schedule and monitoring & evaluation framework in place and supplemented by additional information as requested. Monitoring and evaluation meeting scheduled for May; planned review of reporting targets and requirements in light of amended service specification due to increased funding during 2022. Access to quality information and advice to lessen the impact of caring, as well as support to enable them to care for as long as they are able and willing to is fundamental to the carer support being provided, and	Number of completed Adult Carer Support plans by the HSCP (accumulative)	80	80	31	63	88	122	122			22/23: On Target	60	60

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
		a key aspect of the Carer Act legislation and Midlothian Carers Strategic Plan.													
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 information and advice services.	22/23: On Target Adult Carer Support Plans (ACSP) continue to be delivered by the HSCP and VOCAL. Reporting schedule and monitoring & evaluation framework in place and supplemented by additional information as requested. Monitoring and evaluation meeting scheduled for May; planned review of reporting targets and requirements in light of amended service specification due to increased funding during 2022. Access to quality information and advice to lessen the impact of caring, as well as support to enable them to care for as long as they are able and willing to is fundamental to the carer support being provided, and a key aspect of the Carer Act legislation and Midlothian Carers Strategic Plan.	Number of completed Adult Carer Support plans by VOCAL (accumulative)	1,930	1,930	187	356	550	686	686			22/23: On Target ACSPs continue to be well taken up by carers	600	600
AHSC.P.3.1e	Provide carers with the tools and skills to manage their caring role through the provision of Adult Carer Support Plans and information and advice services.	22/23: On Target Adult Carer Support Plans (ACSP) continue to be delivered by the HSCP and VOCAL. Reporting schedule and monitoring & evaluation framework in place and supplemented by additional information as requested. Monitoring and evaluation meeting scheduled for May;	Number of Carers accessing Information and Advice services from VOCAL and British Red Cross			212	172	196	209	865			22/23: Data only		

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
		planned review of reporting targets and requirements in light of amended service specification due to increased funding during 2022. Access to quality information and advice to lessen the impact of caring, as well as support to enable them to care for as long as they are able and willing to is fundamental to the carer support being provided, and a key aspect of the Carer Act legislation and Midlothian Carers Strategic Plan.													
AHSC.P.3.3a	Support carers to be involved in future planning by developing a local power or attorney communications campaign to compliment ongoing national campaign.	22/23: Off Target Action Plan development and capture of progress delayed by low attendance at recent short life working group meetings. Enquiries re delivery of training via Bite-size workshops highlighted that this means of staff training is not proceeding at this time. Continued attendance at National POA Steering Group, and involvement in coordinating POA National Campaign presentation at Carer Leads meeting in May. Plan to review approach with manager overseeing this area of work.	Local Power of Attorney campaign delivered.			25%	50%	65%	75%	75%			22/23: Off Target Action Plan development and capture of progress delayed by low attendance at recent short life working group meetings. Enquiries re delivery of training via Bite-size workshops highlighted that this means of staff training is not proceeding at this time. Continued attendance at National POA Steering Group, and involvement in coordinating POA National Campaign presentation at Carer Leads	100%	100%

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target	
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note			
														meeting in May. Plan to review approach with manager overseeing this area of work.		

04. Older People







PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
HSCP.P.4.7a	Sustain and increase the range of online, outdoor and creative opportunities for people to connect with each other, including: Ageing Well and British Red Cross radio show; and online groups.	22/23: On Target On average 234 activities contained in the calendar each month, the calendar is updated at the end of each month with groups providing up to date information.	Number of activities including online / outdoor publicised in British Red Cross Community Calendar.			189	202	N/A	234	234			22/23: On Target On average 234 activities contained in the calendar each month, the calendar is updated at the end of each month with groups providing up to date information.	200	200
HSCP.P.4.8a	Identify a service delivery model that enables the HSCP Home Care Service to be sustainable by reviewing HSCP Internal Home Care service.	22/23: Off Target The Resource Manager has been appointed and a Service Improvement Plan has been developed which identifies further areas for development within the service.	Review complete. Future model of delivery identified.			0%	30%	N/A	35%	35%			22/23: Off Target The Resource Manager has been appointed and a Service Improvement Plan has been developed which identifies further areas for development within the service.	100%	100%

HSCP.P.4.9a	Identify a model for delivering future day support for older people: Provide day support for people with complex support needs whilst Highbank Day Service is unavailable.	22/23: Off Target The scope of the Day Service review has been presented to and agreed with Finance and Performance committee. A Planning Officer has been successfully recruited and due to start in Q1 who will support the Day Service review.	Number of day services places available for people who need support with personal care or have more advanced dementia.			66	76	N/A	71	71			22/23: On Target	70	70
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05. Mental Health

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target	
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend			Note
AHSC.P.5.1a	Implement Individual Placement Support specialist employment support for people with mental health issues.	22/23: On Target IPS OT recruited and has a triage caseload of 25, and progressing.	Number of people (per annum) in employment or education following intervention.	7	1	4	0	0	25	29			22/23: On Target	13	13
AHSC.P.5.5a	Mental Health self-management through increased access to Midspace.	22/23: On Target 15% increase for Q4 over all 10% increase of users 14,714 compared to the previous comparable year of 13,346.	The number of people accessing self-management support through Midspace increased by 10%. (annual measure)	Not measured for Quarters						Yes		-	22/23: On Target	Yes	Yes
HSCP.P.5.4a	Improve housing support for individuals who experience homelessness with complex needs.	22/23: On Target 20 individuals offered housing through the housing first model.	Number of individuals who are receiving support from the HSCP through housing first model.			5	4	7	4	20		-	22/23: On Target	20	0



06. Learning Disability

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target	
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend			Note
AHSC.P.6.4a	Develop Primrose Lodge in Loanhead into long term accommodation for people with profound and multiple learning disabilities and a two person short break facility.	22/23: Off Target Reapplication for Capital Funding refused. Alternative funding is being identified.	Renovation and Remodelling complete.			0%	0%	0%	75%	75%			22/23: Off Target Reapplication for Capital Funding refused. Alternative funding is being identified.	100%	100%
AHSC.P.6.5a	Strengthen joint working between Learning Disability Services and care providers to inform continuous improvement through a staged approach to developing Quality Assurance procedures.	22/23: On Target The Quality Assurance Group now well established with monthly meetings overseeing the QA Spreadsheet and incident reporting. Visit schedules established. Monthly reporting template and provider reporting schedule complete.	Suite of QA procedures and measures complete.			25%	50%	75%	100%	100%			22/23: On Target	100%	100%
AHSC.P.6.6a	Strengthen work with people with complex needs by improving staff skills in using positive behavioural support and through the application of a dynamic risk tool.	22/23: On Target Still awaiting Risk register from Scottish Government. Positive Behavioural Support Training at Level 2 scheduled for 23rd and 24th May.	Draft Dynamic Risk Tool trialled.			0%	50%	50%	50%	50%			22/23: Off Target Await Risk register from Scottish Government.	100%	100%

07. Substance Misuse

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
AHSC.P.7.1a	Ensure those most at risk of overdose have continued access to take-home Naloxone kits.	22/23: On Target Although there is a drop against Q3, the number of 57 would be what is expected in terms of kits delivered by No11 staff. Please note that these figures do not include THN distribution undertaken in Midlothian by HRT as this information is not available yet.	Number of Naloxone kits replenished by MELD, SMS and Peer Workers.	139	29	41	5	65	57	168			22/23: Data only		
AHSC.P.7.2a	Expand the offer of buprenorphine prolonged release injections as part of Medication Assisted Treatment options.	22/23: On Target SUS 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 new people taking up the regular offer of buprenorphine prolonged release injections in Q4 is 13.	Number of people taking up offer of buprenorphine prolonged release injections.	22	22	4	7	13	13	13			22/23: Data only Based on number of people at Q4.		
AHSC.P.7.3a	Deliver 'rapid access to prescribing and treatment' to help individuals who have dropped out of treatment re-engage.	22/23: On Target SUS Midlothian saw 8 new patients for rapid access in Q4. SUS are treating and supporting approximately 340 people at any given point. Of this number at the end of February 2023, 231 people were on Opiate Substitute Treatment with the remaining people in treatment for alcohol related issues.	Number of people assisted via 'rapid access to prescribing and treatment'	30	8	0	6	11	8	25			22/23: Data only		

08. Justice Service



PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target	
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend			Note
AHSC.P.8.2a	Increase referrals through the Safe and Together approach for non-court mandated domestic abuse perpetrators.	<p>22/23: On Target Since commencing post, the Team Leader has been working with the Women's Aid Worker to rebrand and re-launch the non-Court mandated service. A new name has been identified, Your Chance to Change, which emphasizes responsibility on the man to change his behaviour, whilst at the same time highlighting the possibility that actions can be changed in the future.</p> <p>To date, presentations have been delivered to a range of agencies including Children and Families Social Workers (duty and 0-12 team), MELD, SUS, Melville Housing, the Family Wellbeing Group along with inputs to the VAWG and Safe and Together Implementation Group.</p> <p>Presentations have been arranged for partner services within adult social care, the Police, and Housing, and these will take place within the coming weeks. A new leaflet is in the process of being developed, along with a strategy to support an online presence.</p>	Number of individuals referred through the Safe and Together approach.	4	4	0	2	2	1	5			22/23: On Target	4	1

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
		Whilst referrals have remained static across this quarter, it is anticipated that this awareness-raising strategy will result in an increase in referrals. Indeed, there have been two referrals to Women's Aid as a result of such inputs – a positive result in itself.													
AHSC.P.8.4a	Build stronger links with Department of Work and Pensions, Welfare Rights and Skills Development Scotland to ensure better access to their services by creating drop-in clinics at Number 11.	22/23: On Target The Community Safety and Justice Partnership continue to provide drop in sessions provided by DWP within Number 11. DWP are also undertaken sessions with the Spring Service (for women).	Establish DWP drop in at No11			100%	100%	100%	100%	100%			22/23: Completed in Q1	100%	100%
AHSC.P.8.5a	Plan and deliver a seven-day period of community justice mass advertising campaign focusing on case studies.	22/23: On Target Alongside Woman's Aid and Thriving Survivors, the CSJP Mid hosted an event at Edinburgh College to raise awareness to the project Midlothian Council has completed with a class of media students. During the event, the speakers informed those in attendance what the project entailed and highlighted students had been tasked to create videos covering a range of relevant topics such as Hate Crime, Masculinity, Restorative Justice and Violence against Women and Girls. Students were invited to speak about the project together with sharing their	Promote Edinburgh College project via 7 day campaign on social media.			80%	90%	90%	100%	100%			22/23: On Target	100%	100%









PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
		<p>personal experiences and opinions on these sensitive topics. Many had limited knowledge of the issues discussed and raised at the start of this project. Students who participated welcomed the opportunity to present their final projects to those in attendance and discussed their aims and ambitions they had for the final production.</p> <p>The presentation session provided students with the opportunity to showcase their completed final videos. In addition, the event provided the chance to explore the issues further through a question and answer session. Topics covered during the event included the public perception of Restorative Justice and positive preventative methods aimed at reducing Violence against Women and Girls. This prompted detailed and positive conversations and discussions allowing an exchange, sharing of knowledge & expertise between the students, professionals and others in attendance.</p> <p>In addition, the event allowed opportunities for discussion on gaps and aims that Midlothian Council and partners could address in the</p>													





PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
		coming years to address issues and concerns raised together with establishing and developing partnership working further amongst a variety of stakeholders, organisations and departments.													

09. Adult Support and Protection







PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23				Annual Target 2022/23	Target
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend	Note		
AHSC.P.9.1a	Raise awareness of self-neglect and hoarding.	22/23: On Target There is an event planned to take place in Q4 that focuses on self-neglect and hoarding. Work remains ongoing.	Number of self-neglect and hoarding referrals which resulted in an investigation (accumulative)	4	2	2	3	5	13	13			22/23: On Target	5	5

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







PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target	
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend			Note
AHSC.P.1 0.1a	Deliver weight management programmes to help address and prevent obesity and type 2 diabetes.	22/23: On Target Hybrid model up and running for delivery of face to face and digital for all programmes. Digital devices available for people referred so they are able to decide what options best suits their needs.	Number of people referred to Weight Management Triage. (Tier 2 and Tier 3)	508	121	177	150	150	167	644			22/23: On Target	200	100
AHSC.P.1 0.4a	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.	22/23: On Target Activity for Jan-March 2023: 44 referrals received (down from 54 in Q3); 34 people opted into the service and 21 people were seen (uptake rate 47%, down from 55% in Q3)	Number of referrals into Move More or equivalent physical activity referral programme from ICJ (Improving the Cancer Journey)	9	2	0	2	1	0	3			22/23: Data only		
AHSC.P.1 0.4b	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.	22/23: On Target Activity for Jan-March 2023: 44 referrals received (down from 54 in Q3); 34 people opted into the service and 21 people were seen (uptake rate 47%, down from 55% in Q3)	% of the total participants in the physical activity programmes	1.4%	0.8%	0.4%	0.54%	0.42%	0%	0.45%			22/23: Data only		
AHSC.P.1 0.6a	Working with Audiology determine the feasibility of establishing an audiology clinic(s) in Midlothian.	22/23: Complete in Q3	Completion of option appraisal.			0%	100%	100%	100%	100%			22/23: Completed in Q2	100%	100%

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target		
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend			Note	
AHSC.P.1 0.7a	Develop locally based specialist services for people with a hearing impairment.	22/23: On Target People have the opportunity to have their hearing aid repaired by specially trained staff, or for their hearing aid to be collected and taken into Midlothian Community Hospital for repairs to take place there before the aids are returned to them.	Implementation of locally based specialist services			15%	90%	90%	100%	100%	100%			22/23: On Target	100%	100%
AHSC.P.1 0.8a	Establish effective links between the Physical Disability Planning Group and mainstream services to improve access to wider public services.	22/23: Off Target Work not progressing due to key facilitators of the Physical Disability Planning Group having left and their posts not having been filled. Planning Officer for Physical Disabilities has now been lost due to required financial savings. Conversations have taken place with voluntary sector in terms of how to re-engage but there has been no active meeting.	Lines of communication formally agreed with all relevant agencies.			25%	25%	35%	45%	45%	45%			22/23: Off Target Work not progressing due to key facilitators of the Physical Disability Planning Group having left and their posts not having been filled. Planning Officer for Physical Disabilities has now been lost due to required financial savings. Conversations have taken place with voluntary sector in terms of how to re-engage but there has been no active meeting.	100%	100%

11. Extra Care Housing & Respite


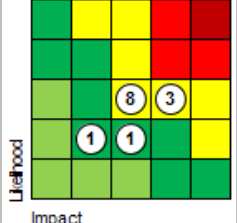
PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target	
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend			Note
AHSC.P.1 1.1a	Open and actively use the 48 new build Extra Care units (including 1 bariatric unit) at Newmills Road, Dalkeith.	22/23: Off Target Site due for completion end of June 2023.	Complete opening and active use of Extra Care units (including 1 bariatric unit) at Newmills Road, Dalkeith.			25%	50%	75%	75%	75%			22/23: Off Target Site due for completion end of June 2023.	100%	100%
AHSC.P.1 1.2a	Support housing services in progressing recommendations for a change in policy around the availability of suitable wheelchair housing in new private housing developments / social housing with ground floor bedroom.	22/23: Complete - Recommendations approved by Council August 2022.	Evidence provided to support developed proposal to Council.			100%	100%	100%	100%	100%			22/23: Completed in Q1	100%	100%
AHSC.P.1 1.3a	Increase respite bed availability in Midlothian by offering residential respite within Cowan Court Extra Care Housing complex as 6 month pilot for decision on permanent establishment and roll out to extra care housing new build facilities.	22/23: Off Target Respite continues to be offered within Cowan Court and has been extremely well received by staff and families as an additional support within the community.	Completion of 6 month pilot of residential respite within Cowan Court Extra Care Housing complex.			25%	25%	0%	75%	75%			22/23: Off Target	100%	100%


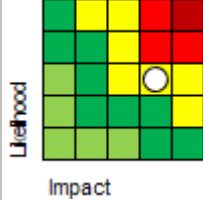
12. Sport and Leisure

PI Code	Priority/Action	Action Note	PI	2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	2022/23			Annual Target 2022/23	Target	
				Value	Value	Value	Value	Value	Value	Value	Status	Short Trend			Note
AHSC.P.1 2.1a	Improve access for people with protected characteristics to participate in specialised and mainstream physical activity opportunities.	22/23: Off Target Completion of restructure will facilitate further expansion and integration into mainstream programme as further growth is currently limited by staff availability and capacity.	Number of specific activities available per site for target population.			254	579	592	582	582			22/23: Off Target	2,450	2,450
AHSC.P.1 2.2a	Ageing Well project – Return to pre-covid levels of participation and provision.	22/23: On Target 7152 attendees (24056 for year), 1239 volunteer hours(4986 for year) from 58 active volunteers and 54 activities per week. 2 x Dementia Friendly training delivered by Alzheimer's Scotland , Walk Leader Training course and 2 x First Aid courses all delivered in November.	Number of weekly activities available.			650	689	612	702	2,653			22/23: On Target	2,500	0
AHSC.P.1 2.3a	Grow Midlothian Active Choices programme to incorporate long-term condition classes into mainstream programme.	22/23: On Target 295 new referrals for Q4. 33 physical activity sessions and 10 drop-in consultation sessions per week. Completion of S&L restructure will facilitate further expansion and integration into mainstream programme.	Number of weekly activities.			325	337	372	396	1,430			22/23: On Target	1,050	0

Adult Health and Social Care Service Risks


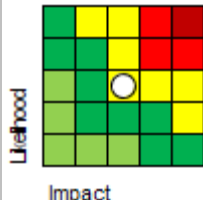



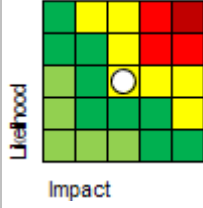

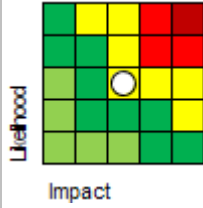
Code & Title	Risk Control Measure	Risk Identification	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
ASC.RR.01 Adult and Social Care Service		<p>This is a Head of Service operational risk register which should set a risk appetite for risks/threats within the services run. Some are 'generic' and may be found in all HOS's risk registers e.g. Fraud, Waste and Error. It has been agreed that the risk register should only list operational risks that are above a risk appetite (residual risk). Once risks are reduced to low risk they can be sidetracked. Emerging risks of any consequence should be registered immediately. This risk register should correlate with the 'Successes/Challenges' part of the Quarterly Performance Report. Each risk must have an original/inherent risk score, a current risk score, a target risk (appetite) score and a target date for low risk achievement. Each quarter a latest note should be placed</p>						Adult Health and Social Care


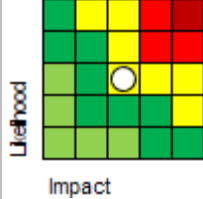

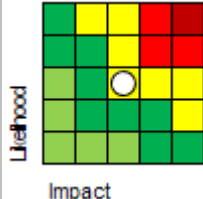

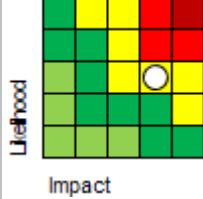
Code & Title	Risk Control Measure	Risk Identification	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
		against each risk, projecting the future. Internal Controls should also be reviewed as to their effectiveness. The Heat Map below gives an indication of the level of risk within the service.						
ASC.RR.01-01 Capacity of voluntary and private sector to meet Council's requirements in relation to quality and cost of services	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	<p>Risk Cause: Providers have a lack of capacity to deliver contracted service</p> <p>Risk Event: Shortfall in service volume and or quality</p> <p>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.</p>		<p>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</p> <p>Workforce Plan is being developed to address long term sustainability of services. This work includes the involvement of MVA, Council and NHS Lothian.</p>			12	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
	risk and designated team leader responsibilities. 08 - Commissioning processes to ensure robust decision-making.							
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 reablement will be undertaken through the new Social Care Monies			12	Adult Health and Social Care
ASC.RR.01-06 Capacity of communities to meet changing requirements of them to support social inclusion within local communities	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	<p>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.</p> <p>Risk Cause:</p>	▲				9	Adult Health and Social Care


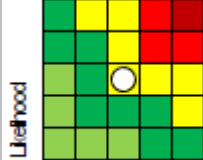


Code & Title	Risk Control Measure	Risk Identification	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
	08 - Neighbourhood planning 09 - Community planning processes	Risk Event: Risk Effect:						
ASC.RR.01-07 Property risks in terms of maximising the property asset to the benefit of service delivery and accessibility including DDA compliance	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	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	▲				9	Adult Health and Social Care
ASC.RR.01-08 Harm by offenders to members of the public	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.	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.	▲				9	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
	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 through client review system. 09 - Access to Visor database of sex offenders linked to MAPPA. 10 - Offender Management Group established	Risk Effect: Harm to member of the public Reputational damage to the Council						
ASC.RR.01-09 Adult Protection	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	Risk Cause: Failure 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.					9	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
	09 - Development of Adult Protection Team within Fieldwork							
ASC.RR.01-10 Capacity to manage scale of transformational change	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	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:		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	Adult Health and Social Care
ASC.RR.01-13 Capacity of Workforce	01- Workforce Plan 02- Learning and Development Team	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.		In recognition of the changing role of Newbyres and in response to the recent internal review a new staffing structure has been developed.			9	Adult Health and Social Care
				Data sharing				

Code & Title	Risk Control Measure	Risk Identification	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
ASC.RR.01-14 Information Management and Data Protection	01 - Action Plan to improve information management and data protection. This is being controlled through covalent.	All Heads of Service are mandated to monitor compliance with the Data Protection Act. Risk Cause: Risk Event: Risk Effect:		The framework system has been upgraded to Mosaic and arrangements are being finalised to enable local staff to use the Information Exchange portal.			9	Adult Health and Social Care
ASC.RR.01-16 Legislative requirement for health and community care to integrate	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	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:					9	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	There is a risk that due to the ongoing pandemic, Midlothian Health and Social Care Partnership may suffer from continued disruption in providing services: This may lead to: -shortages of staff due to contraction of COVID or being identified as a close contact					12	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>Directors to all Midlothian staff.</p> <p>5. Signage on front door of all premises advising people not to enter any of our buildings if they are 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</p>	<p>-additional workload for those staff still able to attend work</p> <p>-increased pressure on other parts of the health and social care system</p> <p>-reduction of care provided to patients due to reduced staffing levels with a move to focus on essential work only</p>						

Code & Title	Risk Control Measure	Risk Identification	Risk Evaluation	Related Action	Related action latest note	Current Risk Matrix	Risk Score	Service
	highlighting COVID related absence. 14. Midlothian Health and Social Care Partnership 'Remobilisation Plan' sets out a four-phased approach and recovery priorities.							
CCP08-CSP.08 Community Safety & Justice - Negative media impact	- Other communications plans in place e.g. MAPPA - Communication monitored	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.				 Likelihood Impact	9	Adult Health and Social Care
SRP.RR.07 Care at Home	1. Care at Home winter assurance plan and business continuity plan complete 2. Development of Care at Home Service Improvement action plan near completion	Risk cause Internal and External providers of Care at Home services unable to meet service and quality requirements as a result of a lack of capacity.		Independent review of adult and social care	Q3 22/23: COSLA and Social Work Scotland have formally requested a pause on the NCS Bill.	 Likelihood Impact	12	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
	3. External commissioning complete and ongoing contract monitoring in place 4. External provider audits complete 5. Re-established Multi-Agency Quality in Care at Home quarterly review meetings jointly with East Lothian 6. Weekly provider meetings in place 7. Additional locum team members and contracts with agency staff in place 8. Daily discharge meeting with Multidisciplinary and Multi-agency team planning to plan and coordinate discharge to ensure care at home support in place	<p>Risk event Capacity of Community Support outstripped by demand.</p> <p>Risk effect There is a risk that patients will have their discharge delayed because there is insufficient community supports to enable timely discharge leading to deterioration in their health, beds being blocked and elective operations potentially being cancelled.</p>						

Published Local Government Benchmarking Framework – Adult Social Care



Adult, Social Care

Code	Title	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	External Comparison
		Value	Value	Value	Value	Value	Value	Value	
SW1	Corporate Indicator - Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£29.61	£27.04	£40.53	£37.62	£20.57	£26.12	£27.88	21/22 Rank 15 (Second Quartile) 20/21 Rank 11 (Second Quartile) 19/20 Rank 6 (Top Quartile) 18/19 Rank 27 (Bottom Quartile). 17/18 Rank 29 (Bottom Quartile). 16/17 Rank 21 (Third 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)	3.95%	6.11%	4.75%	4.49%	5.06%	4.32%	4.41%	21/22 Rank 21 (Third Quartile) 20/21 Rank 21 (Third Quartile) 19/20 Rank 16 (Second Quartile) 18/19 Rank 18 (Third Quartile). 17/18 Rank 13 (Second Quartile). 16/17 Rank 8 (Top Quartile).
SW3	Percentage of people aged 65 and over with long-term care needs receiving personal care at home (LGBF)	66.67%	66.98%	68.04%	50.4%	52.54%	53.6%	58.93%	21/22 Rank 22 (Third Quartile) 20/21 Rank 29 (Bottom Quartile) 19/20 Rank 32 (Bottom Quartile) 18/19 Rank 32 (Bottom Quartile). 17/18 Rank 5 (Top Quartile). 16/17 Rank 6 (Top 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)	85.7%		73.05%		67.57%	N/A	80.57%	21/22 Rank 10 (Second Quartile) 19/20 Rank 32 (Bottom Quartile). 17/18 Rank 31 (Bottom Quartile). 15/16 Rank 15 (Second Quartile). 14/15 Rank 28 (Bottom Quartile)

Code	Title	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	External Comparison
		Value	Value	Value	Value	Value	Value	Value	
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)	77.96%		86.28%		80.05%	N/A	73.44%	21/22 Rank 25 (Bottom Quartile) 19/20 Rank 20 (Third Quartile). 17/18 Rank 3 (TOP Quartile). 15/16 Rank 30 (Bottom Quartile). 13/14 Rank 19 (Third Quartile).
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)	84.44%		79.68%		66.95%	N/A	70.46%	21/22 Rank 19 (Third Quartile) 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)	39.43%		32.1%		31.54%	N/A	27.36%	21/22 Rank 26 (Bottom Quartile) 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)	£566.70	£559.76	£621.35	£611.36	£593.65	£603.71	£816.86	21/22 Rank 19 (Third Quartile) 20/21 Rank 17 (Third Quartile) 19/20 Rank 19 (Third Quartile) 18/19 Rank 20 (Third Quartile). 17/18 Rank 19 (Third Quartile). 16/17 Rank 12 (Second Quartile).
SW6	Rate of readmission to hospital within 28 days per 1,000 discharges (LGBF)	104.49	109.36	114.39	108.89	108.77	125.67	111.09	21/22 Rank 17 (Third Quartile) 20/21 Rank 22 (Third Quartile) 19/20 Rank 17 (Third Quartile) 18/19 Rank 20 (Third Quartile). 17/18 Rank 26 (Bottom Quartile). 16/17 Rank 24 (Third Quartile).
SW7	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections (LGBF)	84.96%	75.68%	89%	87.04%	83.33%	81.5%	78%	21/22 Rank 20 (Third Quartile) 20/21 Rank 24 (Third Quartile) 19/20 Rank 18 (Third Quartile) 18/19 Rank 7 (Top Quartile). 17/18 Rank 7 (Top Quartile). 16/17 Rank 29 (Bottom Quartile).
SW8	Number of days people spend in hospital when they are ready to be discharged, per 1,000 population (75+) (LGBF)	834.91	971.19	1422.02	1323.32	965.62	665.47	504.01	21/22 Rank 13 (Second Quartile) 20/21 Rank 26 (Bottom Quartile) 19/20 Rank 24 (Third Quartile) 18/19 Rank 29 (Bottom Quartile). 17/18 Rank 30 (Bottom Quartile). 16/17 Rank 23 (Third Quartile).

Children's Services

Code	Title	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	External Comparison
		Value	Value	Value	Value	Value	Value	Value	
CHN17	Percentage of children meeting developmental milestones (LGBF)	89.22%	91.48%	93.65%	92.13%	93.02%	90.95%	87.07%	20/21 Rank 4 (Top Quartile) 19/20 Rank 4 (Top Quartile) 18/19 Rank 5 (Top Quartile) 17/18 Rank 2 (Top Quartile) 16/17 Rank 3 (Top Quartile)

Culture and Leisure

Code	Title	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	External Comparison
		Value	Value	Value	Value	Value	Value	Value	
C&L1	Corporate Indicator - NET Cost per attendance at Sports facilities (LGBF)	£3.85	£3.97	£4.72	£3.65	£3.29	£94.22	£19.39	21/22 Rank 32 (Bottom Quartile) 20/21 Rank 27 (Bottom Quartile) 19/20 Rank 22 (Third Quartile) 18/19 Rank 26 (Bottom Quartile). 17/18 Rank 29 (Bottom Quartile). 16/17 Rank 23 (Third Quartile).
C&L5d	Corporate Indicator - Percentage of adults satisfied with leisure facilities (LGBF)	73.67%	74%	74.33%	70.87%	63.2%	60.2%		20/21 Rank 30 (Bottom Quartile) 19/20 Rank 29 (Bottom Quartile) 18/19 Rank 18 (Third Quartile). 17/18 Rank 16 (Second Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 21 (Third Quartile).