## Adult, Social Care Performance Report for Quarter One, 2016-2017

#### Special Cabinet Tuesday 30 August 2016 Item No 4.3



#### 01. Progress in delivery of strategic outcomes

**Integration:** Local management arrangements changed on 1st June 2016, with two joint Heads of Service with responsibility for Primary Care and Older People, and Adult Services. These posts now manage services across health and social care. Work is underway to review the management structure.

**Carers:** The publication of the Carers (Scotland) Act 2016 has allowed us to set priorities to be included in the next Carer Strategy. Guidance will be provided from the Scottish Government with a commencement date identified as 1st April 2017, and at this point Council will be in a better position to respond and work on implementing any necessary changes arising from the guidance. Community Health Inequality Team have begun offering sessions out of VOCAL (Voices of Carers Across Lothian) to support people who might struggle to prioritise their own health and support needs.

**Older people:** There have been developments across a number of areas in older peoples services, and some challenges along the way. These include the development of day care whereby Highbank day care has now moved into the Community Hospital. A project proposal is underway to develop the MARC (Midlothian Advice and Resource Centre) building into a community hub, and Woodburn day care will lead on this. The proposal to reprovision Highbank is underway with drawings being configured for the proposed new build. The joint dementia team now has an additional social worker with the aim to manage emergency situations for people with dementia by the autumn. Challenges have included increasing demand on care at home with limited capacity from external providers. The transformation of Newbyres to include a specialist dementia unit is well underway. We anticipate that the new staffing structure will be in place by October 2016.

**Long Term Conditions**: A number of new Health and Wellbeing services are now quite well established providing support to people with long term health conditions, common mental health problems and those experiencing health inequalities.

**Learning Disability:** The programme of transformation continued, with building work started on the complex care housing development in Penicuik, and is on course for completion in February 2017. Significant work has also been undertaken in the re-commissioning of residential and respite care provision while plans are in place or being developed to increase supported living provision, including arrangements for the three remaining people with learning disabilities living in a hospital setting.

**Mental Health:** To help tackle long waiting lists locally for psychological therapies a number of social prescribing alternatives were developed to assist those waiting, and to divert people at an earlier stage by providing preventative services. There is also a focus on better links between Mental Health and Substance Misuse services through a number of initiatives with the ultimate aim of co-location of both services.

**Substance Misuse:** MELDAP (Midlothian and East Lothian Drugs and Alcohol Partnership) are required to implement savings as part of the redesign process to address the 23% reduction in drugs and alcohol monies announced by the Scottish Government in July 2016. During the first quarter of 2016/17, a Midlothian Core Delivery Group started work in identifying an initial savings plan. At its meeting on 2nd July 2016, The MELDAP Strategic Group took cognisance of the initial suggested savings and remitted the Core Delivery Group to identify further savings to provide a balanced budget for the beginning of 2017/18. The MELDAP Strategic Group agreed to use the under spend from previous years to service the 23% reduction in funding for the financial year 2016/17. A letter is to be sent to all commissioned providers, outlining this position.

**Criminal Justice:** The new Community Safety and Justice Partnership has provided governance for the transition towards the new structure for Community Justice. We now have a Partnership Working Group and a partnership analyst who has created area profiles for the seven priority areas identified by the Scottish Government that are seen as most linked to risk of offending/reoffending. These profiles are now helping the partnership to develop the local Outcomes Improvement Plan for Community Justice that will be provided to the national body, Community Justice Scotland, in March 2017. The Spring service continues to expand and new accommodation has been identified at Dalkeith Arts Centre. Funding has also been secured, on a temporary basis, to recruit a social worker for Spring.

#### 02. Emerging Challenges and Risks

**Funding Pressures:** There is a continuing requirement to seek major efficiencies despite the growing demand, particularly in relation to older people. The service was overspent primarily as a result of some very high care packages and work is being undertaken to find more cost effective ways of providing care. The move towards an integrated budget through the establishment of the Integration Joint Board provides an opportunity to make better use of collective resources. Specific funding pressures include a potential shortfall between Carers Information Strategy monies, which is due to end, and the provision of funding provided for the implementation of the Carers (Scotland) Act 2016.

**Capacity and Quality of Services**; The ongoing shortfall in care at home capacity has been difficult to manage and has had a knock-on impact on the Reablement Service as the limited capacity of external providers has impacted the ability to move people following their period of reablement. The longer term viability of services in both care homes and care at home services requires a long term approach to workforce planning and the promotion of social care as a career, and this work is being undertaken on a multi-agency basis involving NHS Lothian and the Third Sector. A specific development has been the establishment of a Health and Care Academy. The decision to fund the Living Wage in the care sector also provides an opportunity to create a more sustainable and stable workforce.

#### Suggested changes to priorities in Service Plan

ASC.S.09.03a - suggest change in wording from "Increase the number of violent offenders with MAPPA involvement" to "Monitor the number of violent offenders with MAPPA involvement"

# Adult, Social Care PI summary

### 01.1 Outcomes and Customer Feedback

Priority	Indicator	2015/1 6	Q1 2015/1 6			Q1 2016/17		Annual Target 2016/1	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend	7		
01. Provide an efficient complaints service	Number of complaints received (cumulative)	20	5	10	<b>2</b>	Q1 16/17: Data Only.	₽			
01. Provide an efficient	Average time in working days to					<b>Q1 16/17:</b> On Target. This relates to two complaints at stage 1.			Number of complaints complete at Stage 1	2
complaints service	respond to complaints at stage 1	1	1	13		Stage one complaints relating to social care have a target time of 20 working days, and not 5.	•	20	Number of working days for Stage 1 complaints to be Completed	26
efficient complaints	Average time in working days to respond to complaints at stage 2			56		<b>Q1 16/17:</b> Off Target. Outstanding complaints			Number of complaints complete at Stage 2	1
		15	19			and timescales being progressed internally by relevant managers.		40	Number of working days for Stage 2 complaints to be Completed	56
01. Provide an	Percentage of			100%	<b></b>	<b>Q1 16/17:</b> On Target. This relates to two complaints at stage 1.			Number of complaints complete at Stage 1	2
01. Provide an efficient complaints service	complaints at stage 1 complete within 5 working days	100%	100%			Stage one complaints relating to social care have a target time of 20 working days, and not 5.		95%	Number of complaints at stage 1 responded to within 5 working days	2
01. Provide an	Percentage of					Q1 16/17: Off Target.			Number of complaints complete at Stage 2	1
efficient complaints	complainte at ataga	100%	100%	0%		Outstanding complaints and timescales being progressed internally by relevant managers.	₽	95%	Number of complaints at stage 2 responded to within 40 working days	0

01.2 Making the Best Use of our Resources

Priority	Indicator	2015/1 6	Q1 2015/1 6	Q1 2016/17					Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend	2016/1 7		
02. Manage budget effectively	Performance against revenue budget	N/A	£ 35.491 m	N/A		Q1 16/17: Performance against budget will be reported to the Council in September				
03. Manage	Average number of working days lost					Q1 16/17: Off Target.			Number of days lost (cumulative)	1,369.8 4
stress and absence	due to sickness absence (cumulative)	12.83	2.53	3.36		Absence management continues to be addressed.	•	11.87	Average number of FTE in service (year to date)	407.09

01.3 Corporate Health											
Priority	Indicator	2015/1 6	Q1 2015/1 6			Q1 2016/17		Annual Target	Feeder Data	Value	
·		Value	Value	Value	Status	Note	Short Trend	2016/1 7			
04. Complete all	% of service priorities on target /	75 76	96.15	80.95		<b>Q1 16/17:</b> Off Target. 34 out of 42 actions on target. Detail of	•		Number of service & corporate priority actions	42	
service priorities	completed, of the total number	%	%	%		corrective action contained within body of report.	1	90%	Number of service & corporate priority actions on tgt/completed	34	
05. Process	% of invoices paid within 30 days of invoice receipt (cumulative)				•	Q1 16/17: Off Target.			Number received (cumulative)	2,955	
invoices		92%	99%	91%		Backlog continues to be addressed.		97%	Number paid within 30 days (cumulative)	2,700	
						<b>Q1 16/17:</b> Off Target. 5 out of 7 indicators on			Number of PI's on tgt/ tgt achieved	16	
06. Improve PI performance	% of PIs that are on target/ have reached their target.	64%	, 65.79 71.43 % %		•	target. Corrective action for those off target can be found in the body of the report. There are a further 17 which are noted as data only. It is expected that some of these will be reportable in Q2.	1	90%	Number of PI's	27	
07. Control risk	% of high risks that have been	100%	100%	100%		<b>Q1 16/17:</b> On Target (100%). Three high risks	_	100%	Number of high risks reviewed in the last quarter	3	
	reviewed in the last quarter					reviewed in quarter one. One downgraded to medium.			Number of high risks	3	

### 01.4 Improving for the Future

Priority	Indicator	2015/1 6	Q1 2015/1 6			Q1 2016/17		Annual Target 2016/1	Feeder Data	Value
		Value	Value	Value	Status	Note	Short Trend	7		
	% of internal/external audit actions in progress					<b>Q1 16/17:</b> Off Target. One outstanding audit			Number of on target actions	0
08. Implement improvement plans		0%	16.67 %	0%		action relating to the upgrade of Social Care information Management system implementation of remains off target.		90%	Number of outstanding actions	1

## Adult, Social Care Action report



Code	Priority	Action	Due Date	lcon	Progress	Comment & Planned Improvement Action
ASC.S. 01.01		The Adults & Social Care Service will participate in and contribute to the area targeting projects	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target.
ASC.S. 01.02	01. Health Inequalities	Social care staff will be trained on inequalities and poverty	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Training sessions on health inequalities delivered to the Community Planning Partnership, GPs and practice staff, Health and Social Care staff, and the third sector, with 85 participants. Training included health inequalities, health literacy and good conversations. Upwards of 85% said the training would benefit their practice.
ASC.S. 01.03		The Social Care Service will establish links with new local services e.g. Community Health Inequalities Team and the Thistle Project	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Practitioner Forum established to ensure effective partnership working.
ASC.S. 02.01		Reduce the waiting times for occupational therapy and social work services	31-Mar-2017		15%	<b>Q1 16/17:</b> Off Target. Service in process of recruiting one occupational therapist and two community care assistants. Plans to progress in place but not yet implemented. Performance tracked through monthly performance monitoring frameworks.
ASC.S. 02.02		Address the lack of capacity to undertake care package reviews	31-Mar-2017		15%	<b>Q1 16/17:</b> Off Target. Service in process of recruiting one occupational therapist and two community care assistants. Plans to progress in place but not yet implemented. Performance tracked through monthly performance monitoring frameworks.
ASC.S. 02.03	02. Review the model of care management	Strengthen joint working with health colleagues	31-Mar-2017		25%	Q1 16/17: On Target. Initial analysis of processes and volume undertaken.
ASC.S. 02.04		Social Care staff will have more involvement in anticipatory care planning	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Currently at early planning stages, working out the understanding and needs of staff to be able to contribute effectively to anticipatory care planning.
ASC.S. 02.05		Fully implement the uptake of Self Directed Support	31-Mar-2017		75%	<b>Q1 16/17:</b> On Target. Work is continuing to embed Self Directed Support as a business as usual process. Current focus is on finance and admin processed to support flexibility in the provision of support.

### 03. Service Priority

Code	Priority	Action	Due Date	lcon	Progress	Comment & Planned Improvement Action
ASC.S. 03.01	03. Supporting service users through the use of technology	Introduce community frailty assessments	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target.
ASC.S. 04.01		Continue to work with voluntary organisations to seek to identify hidden carers	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. This continues to be a priority. In addition, working towards an application for "Carer Positive" status through links with the Midlothian Council Healthy Working Lives Group; working towards supporting employees in their paid work lives whilst they are undertaking an unpaid carer role. Seeking guidance regarding developing an information sharing agreement with a voluntary organisation so that an improved mapping and better appreciation of individual numbers of carers can be calculated; assisting with development and targeting of services.
ASC.S. 04.02	04. Carers	Review the carer assessment process in light of new legislation	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Opportunities for staff training regarding supporting carers and statutory requirements have been offered, and more training is planned. Current adult carer assessment practice continues, and more significant changes will be incorporated in light of guidance to accompany the Carers (Scotland) Act (2016) when this is published, anticipated to be in 2017. Ongoing separate working group looking at the impact and requirements of the legislation in relation to Young Carers, and thought being given to who will undertake the Young Carer Statement; creation of eligibility criteria; how the legislation relates to the requirements of the Children & Young People (Scotland) Act 2014.
ASC.S. 04.03		Develop a more structured and comprehensive approach to the provision of emergency planning for carers	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Responding to input from members of the Midlothian Carers Strategic Planning Group and Carers Action Midlothian, and also the priority issue identified within the Carers (Scotland) Act (2016) legislation, a working group focussing on Emergency Planning for Carers will be established. The group will seek to explore options which best support carers, and will include discussions regarding what support carers and cared for can expect in an emergency; who develops and updates the emergency plans; who hold the emergency plan information.
ASC.S. 05.01		Develop and expand the MERRIT service to provide increased support and enable quicker discharge from hospital	31-Mar-2017		70%	<b>Q1 16/17:</b> On Target. Current discussions are taking place by the MERRIT (Midlothian and East Lothian Rapid Response and Intervention Team) project team members to agree further expansion of the team and will consider the best skill mix of staff required across both nursing and care support staff.
ASC.S. 05.02		Increase the range of intermediate care options within the community	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Highbank and MERRIT (Midlothian and East Lothian Rapid Response Intervention Team) at full capacity, which may impact on responding to referrals for hospital discharge or crises in the community.

Code	Priority	Action	Due Date	lcon	Progress	Comment & Planned Improvement Action
ASC.S. 05.03		Expand the 7 day working capacity of the Hospital at Home Team to manage 10 people at any one time	31-Mar-2017		90%	<b>Q1 16/17:</b> On Target. The Hospital at Home team nurses have been working over 7 days for the past 9 months. The Medicine of the Elderly on call consultant at the Royal Infirmary provides medical advice to the nurses at the weekend. The virtual ward remains at 10 beds.
ASC.S. 05.04		Develop a business case for the reprovision of Highbank care home to become a purpose built intermediate care home	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Business case completed. Funding agreed, and plans currently being drawn up.
ASC.S. 05.05		Develop Inreach Hospital Discharge Team with a focus on identifying the readmission rates and reasons with the Hospital Inreach Nurse	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Working closely with hospitals.
ASC.S. 05.06	05. Older People	Implement the Falls Strategy	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Strategy now in place.
ASC.S. 05.07		Development of the Joint Dementia Service to manage crisis referrals for people with dementia and their families	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Fixed term appointment concluded for Social Work post. Worker in post, commenced with service 13th June. Current period of induction and 'skilling up' with view to introduction of duty response within the service late autumn. GP forum on 10th May updated regarding proposal.
ASC.S. 05.08		Develop Day Support services to older people focussing on community hubs and a day support referral panel	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Highbank daycare now in the community hospital and developing a hub in the MARC (Midlothian Advice & Resource Centre) Building.
ASC.S. 05.09		Reprovision Gore Avenue extra care housing	31-Mar-2017		15%	<b>Q1 16/17:</b> Off Target. Existing housing on the site now demolished. Builder to be appointed and application for planning permission to be taken forward for this development, but units will not be completed by March 2017.
ASC.S. 05.10		Increase support to all care homes through a Care Home Nurse Advisor	31-Mar-2017	0	100%	Q1 16/17: Complete. Nurse Advisor now in post.
ASC.S. 06.01		Improve access to early intervention including through Gateway Services	31-Mar-2017		95%	<b>Q1 16/17:</b> On Target. Gateway Services due to go live on 27th August. Premises established and staff in place, currently going through induction.
ASC.S. 06.02	06 Adulta Mantal Haalth	Address the physical health needs by providing drop in sessions in the community hospital.	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target.
ASC.S. 06.03	06. Adults - Mental Health	Address the physical health needs through the Community Inequalities Team	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target.
ASC.S. 06.04		Strengthen self-management through peer support and House of Care services	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. New access point established to improve ease of access to services.

Code	Priority	Action	Due Date	lcon	Progress	Comment & Planned Improvement Action
ASC.S. 07.01	07. Adults - Learning	Develop and implement 12 new homes specifically to meet the housing needs for people with complex learning disabilities	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Site build started, on schedule and within budget. Tender for care provision due to take place in July.
ASC.S. 07.02	Disability	Seek to invest in the development of a service to support families and paid care staff working with people with challenging behaviour	31-Mar-2017		20%	<b>Q1 16/17:</b> Off Target. Work ongoing to review complex care provision on a Lothian wide basis. Development sessions with staff planned to take place during Q2.
ASC.S. 08.01	08. Adults substance	Reshape local services following reduction in funding	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. A "potential savings" paper has been agreed by the Midlothian Core Delivery Group and MELDAP (Midlothian and East Lothian Drugs and Alcohol Partnership) Strategic Group.
ASC.S. 08.02	misuse	Shift our use of resources to services which support recovery including peer support such as the Recovery Cafe and Health Centre pilot work	31-Mar-2017		50%	<b>Q1 16/17:</b> On Target. Whilst the Midlothian Core Delivery Group will endeavour to protect the post- treatment Recovery services, there may be a need to further develop co- production and partnership initiative to creatively ensure the further development of Recovery services.
ASC.S. 09.01		Continue and expand the SPRING service provision in line with funding	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Vacancy for Spring Social Worker advertised, and expected to recruit during Q2. Service moving to Dalkeith Arts Centre by end of Q1.
ASC.S. 09.02	09. Adults - Offenders	The new service to be provided by the Communities Health Inequalities Team will include specific targeting of people who have offended	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Communities Health Inequalities Team met with social work team leaders to progress working together.
ASC.S. 09.03		Extend Multi-Agency arrangements to include violent offenders	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Processes in place and ready to be implemented, however there have not yet been any suitable candidates identified.
ASC.S. 10.01		Lifestyle management work will be progressed with the Thistle Project to support the House of Care	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Wellbeing and Inequalities Team established. Peer Support Grants now available for new groups.
ASC.S. 10.02	10. Adults with long term conditions, disability and sensory impairment	Lifestyle management work will be progressed with the Communities Health Inequalities project to support the House of Care	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Communities Health Inequalities Team now working in Midlothian in areas such as homelessness.
ASC.S. 10.03		OT provided lifestyle management work will be progressed to support the House of Care	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Two Occupational Therapists funded through the Integrated Care Fund are now in place.

Code	Priority	Action	Due Date	lcon	Progress	Comment & Planned Improvement Action
ASC.S. 10.04		Implementation of a new service funded by MacMillan to support individuals following cancer treatment to address lifestyle issues including employment, exercise, diet, counselling and social activities	31-Mar-2017		25%	<b>Q1 16/17:</b> On Target. Service implemented in June 2016. MacMillan Work Service committed to monthly bookings, and drop in services are available for all issues noted except counselling, which will continue to be progressed during 2016/17. This pilot scheme will allow for further development and learning through the remainder of the year.
ASC.S. 10.05		Evaluate the need and most appropriate service response to the needs of people under 65yrs, learning from the experience of such facilities in Highbank for older people.	30-Apr-2017		15%	<b>Q1 16/17:</b> Off Target Planning underway to ascertain demand from this service group.
ASC.S. 10.06	10. Adults with long term conditions, disability and sensory impairment	Coordinate the production of clear information on the availability and suitability of taxis available in Midlothian	30-Apr-2017		15%	<b>Q1 16/17:</b> Off Target. Still in planning stage, however included as part of the 16/17 action plan.
ASC.S. 10.07		Coordinate the development and promotion of a resource pack to inform and support employers to recruit people with disabilities	31-Mar-2017		15%	<b>Q1 16/17:</b> Off Target. Still in planning stage, however included as part of the 16/17 action plan.
ASC.S. 10.08		Coordinate the provision of hearing aid maintenance and repair clinics in libraries including the recruitment of volunteers	30-Apr-2017		25%	<b>Q1 16/17:</b> On Target. Work ongoing, and contained within 16/17 action plan. Capacity issues within audiology preventing progression but being monitored and managed, with further progress expected during Q2.
ASC.S. 10.09		Arrange and deliver training to all health and social care staff working with NHS Lothian partners to ensure the implementation of a system to flag up sensory impairment on medical records	30-Apr-2017		10%	<b>Q1 16/17:</b> Off Target. Included in 2016/17 action plan. This is included in general awareness training, but it is acknowledged that this is a challenging target to achieve by the end of 2016/17.

## Adult, Social Care PI Report



03. Service Priority

			2015/16	Q1 2015/16				Q1 2016/17	Annual	
PI Code	Priority	PI	Value	Value	Value	Status	Short Trend	Note	Target 2016/17	Benchmark
ASC.S.01.02a	01. Health Inequalities	Increase the number of staff trained in inequalities & poverty	New for 16/1	7	85			<b>Q1 16/17:</b> Data Only. This is a new measure. Results for 2016/17 will help to inform any future target setting.		
BS.ASC.S.02. 05b	02. Review the model of care management	Increase the percentage of people who say they are able to look after their health or who say they are as well as they can be	83%	86%	83%	<b></b>		<b>Q1 16/17:</b> On Target. Information from the annual user survey 2015 reported that 82 out of 99 (83%) of clients (who expressed an opinion) agreed with the statement "Services have helped me feel healthy". Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting.	83%	
		Average waiting time for social work services	New for 16/1	7	19 weeks		-	<b>Q1 16/17:</b> Off Target. Service in process of recruiting one occupational therapist and two community care assistants. Plans to progress in place but not yet implemented. Performance tracked through monthly performance monitoring frameworks.	6 weeks	
ASC.S.02.05a		Improved reported outcomes by service users	87.57%	83.4%	87.8%	<b></b>		<b>Q1 16/17:</b> On Target. Reviews include nine outcomes focussed questions. Since not all questions are asked at each review, this measures the proportion of people who responded positively to at least 66% of the questions they were asked. Target has been reviewed and increased to 75%, as performance over eight reported quarters has consistently been over 80%.	75%	

			2015/16	Q1 2015/16				Q1 2016/17	Annual	
PI Code	Priority	PI	Value	Value	Value	Status	Short Trend	Note	Target 2016/17	Benchmark
ASC.S.02.05c	02. Review the model of care management	Increase the % of people who said that the care and support they received had a positive impact on their quality of life	89%	86%	89%	<b></b>		<b>Q1 16/17:</b> On Target. Responses over four user survey (2015) questions were averaged. These questions were that social work services have helped them in the following ways: a. "to feel safer" (93%); b. "to lead a more independent life" (96%); c. "to feel part of my community" (82%); d. "feel healthy" (83%). Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting.		
ASC.S.02.05d		Increase the % of people who feel they are participating more in activities of their choice	88.24%	77%	90.48%	<b>②</b>	1	<b>Q1 16/17:</b> On Target. Responses over four user survey (2015) questions were averaged. These questions were that social work services have helped them in the following ways: a. "to feel safer" (93%); b. "to lead a more independent life" (96%); c. "to feel part of my community" (82%); d. "feel healthy" (83%). Results have been calculated by excluding the "neither agree nor disagree" response to ensure consistency with previous reporting.		
ASC.S.02.05e		The proportion of people choosing SDS option 1	5.1%	5.3%	5.4%		1	<b>Q1 16/17.</b> Data Only . There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This refers to 122 out of 2,254 individuals choosing option 1, and includes those under the age of 18.		
ASC.S.02.05f		The proportion of people choosing SDS option 2	5.2%	6.8%	4.8%	<b></b>	•	<b>Q1 16/17.</b> Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This refers to 110 out of 2,254 individuals choosing option 2, and includes those under the age of 18.		

			2015/16	Q1 2015/16				Q1 2016/17	Annual	
PI Code	Priority	PI	Value	Value	Value	Status	Short Trend	Note	Target 2016/17	Benchmark
ASC.S.02.05g	02. Review the	The proportion of people choosing SDS option 3	97.2%	87.9%	93.2%		1	<b>Q1 16/17.</b> Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This refers to 2,102 out of 2,254 individuals choosing option 3, and includes those under the age of 18.		
ASC.S.02.05h	model of care management	The proportion of people choosing SDS option 4	7.4%	N/A	4%		-	<b>Q1 16/17.</b> Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This includes those under the age of 18. As option 4 refers to individuals who choose more than one option, these service users are also included in at least two of the first three options.		
ASC.S.04.02a	04. Carers	Increase the number of people receiving an assessment of their care needs (Carer Conversations)	126	27	33	<b>I</b>	₽	<b>Q1 16/17:</b> On Target.	138	
ASC.S.04.02b		The ratio of workflow which is a Carer's Conversation	New for 16/1	7	4.23%		-	<b>Q1 16/17:</b> Data Only. Workflow in this measure refers to assessments, reviews and carer's conversations completed during Q1 16/17.		
ASC.S.05.01a		Increase the proportion of MERRIT callouts which result in a fall assessment	23.57%	20%	38%		€	<b>Q1 16/17:</b> On Target. 334 out of 878 callouts during April-June were for falls. Target for 2016/17 based on performance during 2015/16.	30%	
ASC.S.05.02a	05. Older People	Increase the percentage of Intermediate Care at Home clients who returned home with no package of care	4%	0%	N/A		-	<b>Q1 16/17:</b> Data Only. Technical issues being investigated to ensure performance can be reported in quarter 2. Target adjusted to take account of performance in 2015/16.		Baseline 8.7% 2014/15

	Priority	PI	2015/16	2015/16 Q1 2015/16 Q1 2016/17						
PI Code			Value	Value	Value	Status	Short Trend	Note	Target 2016/17	Benchmark
ASC.S.05.02b		Decrease the percentage of Intermediate Care at Home Clients who were admitted to a care home	15%	11.5%	N/A			<b>Q1 16/17:</b> Data Only. Technical issues being investigated to ensure performance can be reported in quarter 2. Target adjusted to take account of performance in 2015/16.		Baseline of 15.2% identified at end of 14/15.
ASC.S.05.02c		Decrease the percentage of Intermediate Care at Home Clients who returned to hospital	11.9%	6.5%	N/A		-	<b>Q1 16/17:</b> Data Only. Technical issues being investigated to ensure performance can be reported in quarter 2. Target adjusted to take account of performance in 2015/16.	15%	Baseline of 39% identified at end of 14/15.
ASC.S.05.05a		Reduce the rate of per 1,000 population emergency admissions for people aged 75+	44.96	27.36	354		•	<b>Q1 16/17:</b> Data only. This is an NHS HEAT (Health Improvement; Efficiency; Access to Treatment; Treatment) target, supplied by NHS six months in arrears. Difficult to set targets as this is not wholly within the control of Council.		
ASC.S.05.05b	05. Older People	Reduce the number of patients delayed in hospital for more than 72 hours at census date	1	8	7	•	₽	<b>Q1 16/17:</b> Off Target. Whilst there were seven patients delayed for more that 72 hours at census date, 72 hours is a target to be implemented in approximately three years, and is included in reporting structures in preparation for this.	0	
ASC.S.05.08a		Increase the number of older people attending day centres	New for 16/1	7	279		-	<b>Q1 16/17:</b> Data Only. Any target setting for future reporting will be based on activity measured in 2016/17.		
BS.ASC.S.05. 01b		Decrease the percentage of falls which result in a hospital admission for clients aged 65+	4.79%	8.4%	1.19%		1	<b>Q1 16/17:</b> On Target. 4 out of 334 falls resulted in a hospital admission in the period April-June. Target for 2016/17 based in performance during 2015/16.	10%	
BS.ASC.S.05. 05c		Maintain at zero thenumber of patientsdelayed in hospital formore than 2 weeks atcensus date	1	0	2		₽	<b>Q1 16/17:</b> Off Target. Two patients delayed at census date, but actively managed to facilitate discharge.	0	

	Priority	PI	2015/16	2015/16 Q1 2015/16 Q1 2016/17				Q1 2016/17	Annual	
PI Code			Value	Value	Value	Status	Short Trend	Note	Target 2016/17	Benchmark
ASC.S.08.02a	08. Adults substance misuse	Increase the number of people accessing peer support services	New for 16/1	7	44			Measure collected for first time. Target setting for any future monitoring will be advised by		
ASC.S.09.01a	09. Adults -	Numbers accessing SPRING service	New for 16/1	7	13		-	<b>Q1 16/17:</b> Data Only. This is the first year of data collection for this measure. Any future targets will be informed by 2016/17 data.		
ASC.S.09.03a	Offenders	Increase the number of violent offenders with MAPPA involvement	New for 16/17		0		-	<b>Q1 16/17:</b> Data Only. No violent offenders currently within Midlothian.		
ASC.S.10.04a		The number of people attending the Transforming Care after Treatment drop in centre in Lasswade	New for 16/17		5			<b>Q1 16/17:</b> Data only. 2016/17 is the first year that this information is being collected. Year end performance will be used to inform any future target setting		
ASC.S.10.04b	term conditions, disability and sensory impairment	The number of people receiving an holistic needs assessment	New for 16/1	7	9		-	<b>Q1 16/17:</b> Data Only. 2016/17 is the first year that this information is being collected. Year end performance will be used to inform any future target setting		
ASC.S.10.09a		Number of people receiving training	New for 16/17		85		-	<b>Q1 16/17:</b> Data Only.		

## Local Government Benchmarking Framework - Adult, Social Care

The LGBF data for 2015/16 will be published by the Improvement Service in January 2017 Service performance information for 2015/16 is detailed where available

#### Adult, Social Care

Code	Title	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	External Comparison	
		Value	Value	Value	Value	Value	Value		
P-SW1	Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£16.22	£16.98	£12.46	£23.81	£28.22	Data will be published	14/15 Rank 30 (Bottom Quartile). 13/14 Rank 27 (Bottom Quartile)	
P-SW2	adults 18+(LGBF)	2.70%	2.18%	2.39%	2.73%	2.62%	in January 17	14/15 Rank 18 (Third Quartile). 13/14 Rank 13 (Second Quartile)	
P-SW3	Percentage of service users 65+ with intensive needs receiving care at home. (LGBF)	36.3%	38.4%	53.6%	38.8%	30.72%	38.8%	14/15 Rank 22 (Third Quartile). 13/14 Rank 14 (Second Quartile)	
P-SW4	Percentage of adults satisfied with social care or social work services (LGBF)	51.7%		57%	42%		Data will be published	14/15 Rank 22 (Third Quartile). 13/14 Rank 29 (Bottom Quartile)	
P-SW5	The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF)	£351.30	£382.20	£390.84	£392.51	£377.86	in January 17	14/15 Rank 14 (Second Quartile). 13/14 Rank 20 (Third Quartile)	

