Adult, Social Care – Q3 Performance Report 2016/17

Midlothian

Progress in delivery of strategic outcomes

Integration: Consultation on the 2017-18 Directions document has been issued to NHS Lothian and Midlothian Council. Work on refreshing the Strategic Plan is underway. A Workforce Plan and a Financial Strategy are being developed and a Risk Register has been completed. The IJB (Integrated Joint Board) continues to meet formally and through Development Sessions as does the Strategic Planning Group and Audit and Risk Committee.

Older People: Older Peoples Strategy now launched, and there has been continued developed with many services. Highbank day care has now increased its numbers from 60 up to 80 and have been inspected by the Care inspectorate with grades increasing to 4's. Highbank care home has also been inspected and maintained their grades of 5s. Woodburn day care club new service the "Grassy Riggs" will have its open day in February. A community cafe within the MARC (Midlothian Advice and Resources Centre) building in Woodburn for older people. MERRIT (Midlothian Enhanced Rapid Response Service) has increased its capacity with hospital at home to enable more people to be looked after at home, avoiding unnecessary hospital admissions. Care at home capacity continues to be challenging however a review of care at home is underway to examine more outcome focussed care at home services for older people in Midlothian. The Joint Dementia Team has begun a duty service within the team responding to emergencies for people with dementia and their families. This should reduce waiting times for an emergency response. Newbyres is developing its short term dementia beds working closely with the Joint Dementia Team. The re-provisioning of Midlothian patients in Liberton Hospital is well underway with beds in the community hospital becoming accessible to manage these patients.

Carers: Development of the Midlothian Carers Strategy is progressing and the next stage is pulling discussions and consultations together to present to carer groups for comment. Subgroups will be developed to take forward themes, e.g. Emergency Planning, and Employment. The strategy proposes to support Adult and Young Carers and as such links are being developed with Education and Children's Services to discuss the content of the strategy, and identify work needed and ways forward to support the implementation of the Carers (Scotland) Act 2016 (commencement date identified as 1st April 2018). The Scottish Government have indicated a proposed date of December 2017 for the publication of guidance and regulations to support the new Act. Paper prepared for Corporate Management Team regarding the update on carer legislation and implementation, to be presented during Q4.

Learning Disability: Work continues on the 12 person Complex Care service, the build remains on target and a care provider has now been appointed. A review of Day Service provision is progressing and a project plan is in place, this includes the development of neighbourhood networks to increase the opportunity for people to develop skills, interests and relationships in their local community.

Physical Disability and Sensory Impairment: A programme of Awareness Raising continues to be delivered to health and social care staff. 14 volunteers have been recruited to provide a hearing aid repair service in local libraries. Audiology has given a clear commitment to provide local clinics for adults in the Community Hospital early in the New Year. Scottish Govt published "A Fairer Scotland for Disabled People" in late December and we will need to consider implications for local services.

Long Term Conditions: MERRIT (Midlothian Enhanced Rapid Response Service) has recently recruited an Advanced Practitioner Physiotherapist (APP), to take up post during Q3, who will be instrumental in developing a Community Respiratory Service to support people living with Chronic Obstructive Pulmonary Disease across Midlothian. The APP will work closely with MERRIT Hospital at Home and the Royal Infirmary Respiratory Multi Disciplinary Team, to support self management and reduce hospital admissions for this patient group.

Self Directed Support: Work is continuing to embed Self Directed Support into a 'business as usual' activity. Currently the focus of work is in two areas: (1) Reviewing back office finance processes to ensure these are not a barrier to greater flexibility in support provision and are able increase in bespoke support arrangements. (2) Reviewing support planning with providers to ensure support is being focussed on meeting outcomes and where appropriate choice and control is embedded within service provision.

Substance Misuse: In December 2016, the MELDAP (Midlothian and East Lothian Drugs and Alcohol Partnership) identified and agreed in principle a programme of savings to be made from some of its commissioned services for financial year 2017/18. This is in response to the implications of the 23% reduction in drugs and alcohol funding through the Scottish Government for 2016-17. Work is ongoing to develop a Recovery Hub in Dalkeith. This has the potential to deliver a number of key requirements of the change process including some of the required savings.

Mental Health: Mental Health Access Points were launched in two locations in Midlothian in August and already the service is well used. Staff at the Access Points guide people to access the support they need to increase their mental wellbeing; reducing low mood and feelings of stress; increasing confidence; and self-esteem. Staff help people to decide what support will work best for them, this includes psychological therapies. Around half of those who have attended have been offered assessment for psychological therapies. The House of Care Wellbeing project based at Newbattle Health centre was initially aimed at people with Long Term Conditions however many of those attending the service are presenting with Mental Health issues and are receiving support with this. The Community Health Inequalities Team continues to offer physical health checks to people with mental health issues in several locations throughout Midlothian.

Criminal Justice: A review is currently taking place of the Unpaid Work service. New job descriptions have been agreed for Unpaid Work supervisors. The intention is to establish an Unpaid Work culture that promotes a learning environment for service users. In the revised service, Unpaid Work supervisors will deliver training courses to improve clients' vocational skills. The aim will be to increase opportunities and encourage desistance from further offending. This work has already started with all individuals on Unpaid Work attending first aid training delivered by one of the supervisors. In addition Unpaid Work projects are now being targeted to areas and groups particularly affected by offending. This includes prioritising projects in areas such as Woodburn and also carrying out work to support the victims of domestic abuse.

Emerging Challenges and Risks

Funding Pressures: There is a continuing requirement to seek major efficiencies despite the growing demand, particularly in relation to older people and those with complex needs. The service was overspent primarily as a result of some very high care packages and work is being undertaken to find more cost effective ways of providing care. The move towards an integrated budget through the establishment of the Integration Joint Board provides an opportunity to make better use of collective resources. 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. Currently managing large scale investigations for one care home and one care at home provider.

Adult, Social Care PI summary

Outcomes and Customer Feedback

Priority	Indicator	2015/16	Q3 2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17				Annual Target 2016/17	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
01. Provide an efficient complaints service	Number of complaints received (cumulative)	20	N/A	10	18			**Q3 16/17**: Some issues were identified within the system which meant that the accuracy of the complaints data was not reliable. A data cleansing exercise is being undertaken. As a result no quarter three data has been included and work is ongoing to rectify this.				

Making the Best Use of our Resources

Priority	Indicator	2015/16	Q3 2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17				Annual Target 2016/17	Feeder Data	Value
		Value	Value	Value	Value	Value	Status	Note	Short Trend			
02. Manage budget effectively	Performance against revenue budget	£ 37.234 m	£ 39.693 m	£ 39.141 m	£ 40.015 m	£ 40.122	✅	**Q3 16/17:** On Target	⬆			
03. Manage stress and absence	Average number of working days lost due to sickness absence (cumulative)	12.73	8.84	3.36	6.45	9.25	🛑	**Q3 16/17:** Off Target Absence management continues to be addressed by relevant service managers and situation is improving, however the demands of an ageing workforce make this a complicated area.	⬇	11.87	Number of days lost (cumulative)	4,152.04
											Average number of FTE in service (year to date)	449.07

Corporate Health

Priority	Indicator	2015/16 Value	Q3 2015/16 Value	Q1 2016/17 Value	Q2 2016/17 Value	Q3 2016/17 Value	Q3 2016/17 Status	Q3 2016/17 Note	Short Trend	Annual Target 2016/17	Feeder Data	Value
04. Complete all service priorities	% of service priorities on target / completed, of the total number	75.76%	93.94%	80.95%	80.95%	85.71%	🛑	**Q3 16/17:** Off Target 36 out of 42 actions on target. Detail of corrective action contained within body of report.	⬆	90%	Number of service & corporate priority actions	42
											Number of service & corporate priority actions on tgt/completed	36
05. Process invoices efficiently	% of invoices paid within 30 days of invoice receipt (cumulative)	92%	94%	91%	93%	90%	🛑	**Q3 16/17:** Off Target Service continues to work to identify reasons for slow invoice payment. Changes to the Living Wage and Sleepover rates requires manual updates on information systems, resulting in processing delays.	⬇	97%	Number received (cumulative)	10,953
											Number paid within 30 days (cumulative)	9,833
06. Improve PI performance	% of PIs that are on target/ have reached their target.	64%	73.08%	71.43%	70%	71%	🛑	**Q3 16/17:** Off Target 10 out of 14 indicators on target. Task actions contained in body of report. There are a further 20 indicators included for data only.	⬆	90%	Number of PI's on tgt/ tgt achieved	16
											Number of PI's	27
07. Control risk	% of high risks that have been reviewed in the last quarter	100%	100%	100%	100%	100%	✅	**Q3 16/17:** On Target. Two high risks reviewed in quarter three.	▬	100%	Number of high risks reviewed in the last quarter	2
											Number of high risks	2

Improving for the Future

Priority	Indicator	2015/16 Value	Q3 2015/16 Value	Q1 2016/17 Value	Q2 2016/17 Value	Q3 2016/17 Value	Q3 2016/17 Status	Q3 2016/17 Note	Short Trend	Annual Target 2016/17	Feeder Data	Value
08. Implement improvement plans	% of internal/external audit actions in progress	0%	0%	0%	97.37%	14.81%	🛑	**Q3 16/17:** Off Target 4 out of 27 audit actions on target.	⬇	90%	Number of on target actions	4
											Number of outstanding actions	27

Adult, Social Care Action report

Midlothian

Service Priority Actions						
Code	**Priority**	**Action**	**Due Date**	**Icon**	**Progress**	**Comment & Planned Improvement Action**
ASC.S.01.01	01. Health Inequalities	The Adults & Social Care Service will participate in and contribute to the area targeting projects	31-Mar-2017		40%	**Q3 16/17:** Off Target Project meetings have now recommenced.
ASC.S.01.02		Social care staff will be trained on inequalities and poverty	31-Mar-2017		75%	**Q3 16/17:** 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 an accumulative total of 147 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		75%	**Q3 16/17:** On Target (75%) Professional forum on "House of Care" held in December, and attended by social care staff.
ASC.S.02.01	02. Review the model of care management	Reduce the waiting times for occupational therapy and social work services	31-Mar-2017		35%	**Q3 16/17:** Off Target Improvements in the numbers and length of wait is now evident, however work continues to address underlying issues.
ASC.S.02.02		Address the lack of capacity to undertake care package reviews	31-Mar-2017		50%	**Q3 16/17:** Off Target Increased capacity using social care transformation monies, small team providing reviews, and a clear plan of review prioritisation in place until the end of the financial year.
ASC.S.02.03		Strengthen joint working with health colleagues	31-Mar-2017		75%	**Q3 16/17:** On Target Management review across Health and Social Care currently underway, and progress will continue once this is complete.
ASC.S.02.04		Social Care staff will have more involvement in anticipatory care planning	31-Mar-2017		75%	**Q3 16/17:** On Target
ASC.S.02.05		Fully implement the uptake of Self Directed Support	31-Mar-2017		75%	**Q3 16/17:** 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.

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.03.01	03. Supporting service users through the use of technology	Introduce community frailty assessments	31-Mar-2017	▶	50%	**Q3 16/17:** On Target eHealth frailty index now in place with Health Improvement Scotland. Not yet showing frailty levels expected, and an exercise is underway to interrogate the data, and address coding or data quality robustness.
ASC.S.04.01		Continue to work with voluntary organisations to seek to identify hidden carers	31-Mar-2017	▶	75%	**Q3 16/17:** On Target Review of Carers Action Midlothian, looking at wider groups to include to ensure wider representation.
ASC.S.04.02	04. Carers	Review the carer assessment process in light of new legislation	31-Mar-2017	▶	75%	**Q3 16/17:** On Target Still awaiting guidance from Scottish Government, which is necessary to inform direction.
ASC.S.04.03		Develop a more structured and comprehensive approach to the provision of emergency planning for carers	31-Mar-2017	▶	75%	**Q3 16/17:** On Target This remains a priority for development.
ASC.S.05.01		Develop and expand the MERRIT service to provide increased support and enable quicker discharge from hospital	31-Mar-2017	▶	70%	**Q3 16/17:** On Target Advanced Practitioner Physiotherapist has been recruited to and starts end January 2017 to work closely with Hospital at Home and the Respiratory Multidisciplinary Team in the Royal Infirmary to support patients with Chronic Obstructive Pulmonary Disease in the community. Posts have been authorised for Community Care Assistant and 4 part time care support workers (temporary contracts initially). Nursing posts remain vacant.
ASC.S.05.02		Increase the range of intermediate care options within the community	31-Mar-2017	▶	75%	**Q3 16/17**: On Target
ASC.S.05.03	05. Older People	Expand the 7 day working capacity of the Hospital at Home Team to manage 10 people at any one time	31-Mar-2017	✔	100%	**Q3 16/17:** Complete Hospital at Home nurses working 7 days per week.
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	▶	75%	**Q3 16/17:** On Target Report sent to Corporate Management Team, and business care completed. Architects now working on designs.
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	▶	75%	**Q3 16/17:** On Target
ASC.S.05.06		Implement the Falls Strategy	31-Mar-2017	✔	100%	**Q3 16/17:** Complete

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.05.07	05. Older People	Development of the Joint Dementia Service to manage crisis referrals for people with dementia and their families	31-Mar-2017	▶	80%	**Q3 16/17:** On Target Duty trial commenced. Two social workers undertake duty cover, each covering 0.5 week with some provision for 'back up' for leave and absence. Phased referrals have started, originating from within Joint Dementia Service or from wider Duty Team. Duty workers also acting as single point of contact for the joint service in the mornings, thus reducing time other team members commit to this task: proportionately increasing scope for colleagues to attend to community-based interventions. Duty worker keeping log of duty work undertaken to enable review of duty pilot - ensuring demand and capacity are manageable within available resources and understanding impact of pilot on non duty referrals.
ASC.S.05.08		Develop Day Support services to older people focussing on community hubs and a day support referral panel	31-Mar-2017	▶	75%	**Q3 16/17:** On Target
ASC.S.05.09		Reprovision Gore Avenue extra care housing	31-Dec-2017	▶	15%	**Q3 16/17:** Off Target Start date still to be determined and tender still to be progressed. Care is being taken to ensure that problems which arose from the gas leak which affected the area recently is taken in to account.
ASC.S.05.10		Increase support to all care homes through a Care Home Nurse Advisor	31-Mar-2017	✅	100%	**Q3 16/17:** Complete
ASC.S.06.01	06. Adults - Mental Health	Improve access to early intervention including through Gateway Services	31-Mar-2017	▶	95%	**Q3 16/17:** On Target Service is called now Access Point, and not Gateway Services. Numbers attending have been higher than expected in Bonnyrigg, but lower in Penicuik. This continues to be addressed in an effort to raise attendance.
ASC.S.06.02		Address the physical health needs by providing drop in sessions in the community hospital.	31-Mar-2017	✅	100%	**Q3 16/17:** Complete
ASC.S.06.03		Address the physical health needs through the Community Inequalities Team	31-Mar-2017	✅	100%	**Q3 16/17:** Complete The Community Health Inequalities Team continues to offer a service to adults in homeless accommodation, women involved with Spring Project, people with mental health and/or substance misuse issues and people in other settings/ other groups. Forty three people engaged with the service in Q3.
ASC.S.06.04		Strengthen self-management through peer support and House of Care services	31-Mar-2017	▶	75%	**Q3 16/17:** On Target Services extended to eight health centres.
ASC.S.07.01	07. Adults - Learning Disability	Develop and implement 12 new homes specifically to meet the housing needs for people with complex learning disabilities	31-Mar-2017	▶	76%	**Q3 16/17:** On Target Tender awarded, however some challenges remain with build which may cause delays.

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.07.02	07. Adults - Learning Disability	Seek to invest in the development of a service to support families and paid care staff working with people with challenging behaviour	31-Mar-2017		50%	**Q3 16/17:** On Target Tender awarded, however some challenges remain with build which may cause delays.
ASC.S.08.01		Reshape local services following reduction in funding	31-Mar-2017		90%	**Q3 16/17:** On Target The Core Group made a number of recommendations to the Strategic Group and in December 2016 all services were informed of the level of reduction to their budgets from April 2017 onwards.
ASC.S.08.02	08. Adults substance 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		80%	**Q3 16/17:** On Target The Core Group's recommendations recognised the need to protect post treatment recovery services in order to maintain an effective recovery orientated system of care. These services were partially protected from the 23% reduced level of funding experienced by other services. Funding for Peer Support workers was protected. Work to develop an integrated Recovery Hub is progressing.
ASC.S.09.01		Continue and expand the SPRING service provision in line with funding	31-Mar-2017		75%	**Q3 16/17:** On Target Temporary Team Leader recruited to cover period of leave, due to start in January.
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		75%	**Q3 16/17:** On Target
ASC.S.09.03		Extend Multi-Agency arrangements to include violent offenders	31-Mar-2017		75%	**Q3 16/17:** On Target Processes in place and ready to be implemented if necessary.
ASC.S.10.01		Lifestyle management work will be progressed with the Thistle Project to support the House of Care	31-Mar-2017		50%	**Q3 16/17:** On Target Services extended to eight health centres.
ASC.S.10.02		Lifestyle management work will be progressed with the Communities Health Inequalities project to support the House of Care	31-Mar-2017		75%	**Q3 16/17:** On Target Funding agreed to extend project until March 2018.
ASC.S.10.03	10. Adults with long term conditions, disability and sensory impairment	OT provided lifestyle management work will be progressed to support the House of Care	31-Mar-2017		75%	**Q3 16/17:** On Target
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		100%	**Q3 16/17:** Complete
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		75%	**Q3 16/17:** On Target.

Code	Priority	Action	Due Date	Icon	Progress	Comment & Planned Improvement Action
ASC.S.10.06		Coordinate the production of clear information on the availability and suitability of taxis available in Midlothian	30-Apr-2017	▶	15%	**Q3 16/17:** Off Target Progress stalled, due to capacity issues, however included as part of 16/17 action plan so anticipate that further progress will be made before year end.
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%	**Q3 16/17:** Off Target Impacted due to long term absence, with no backfill to progress action.
ASC.S.10.08	10. Adults with long term conditions, disability and sensory impairment	Coordinate the provision of hearing aid maintenance and repair clinics in libraries including the recruitment of volunteers	30-Apr-2017	▶	75%	**Q3 16/17:** On Target Volunteers identified, and awaiting training dates from Audiology.
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	▶	75%	**Q3 16/17:** On Target Ongoing awareness training program underway, and also direct work with GP practices to ensure sensory impairment is highlighted on medical records. It is acknowledged that this is an ongoing piece of work, and processes will be implemented and reviewed on an continual basis as workstream becomes a "business as usual" practice.

Adult, Social Care PI Report

Midlothian

							Q3 2016/17				Annual Target 2016/17	Benchmark
							Service Priority Performance Indicators					

PI Code	Priority	PI	2015/16	Q3 2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17				Annual Target 2016/17	Benchmark
			Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.S.01.02a	01. Health Inequalities	Increase the number of staff trained in inequalities & poverty	New for 16/17		85	123	147	📈	▬	**Q3 16/17:** Data Only		
ASC.S.02.01b	02. Review the model of care management	Average waiting time for social work services	New for 16/17		19 weeks	22 weeks	25 weeks	🛑	⬇	**Q3 16/17:** Off Target Improvements in the numbers and length of wait is now evident, however work continues to address underlying issues.	6 weeks	
ASC.S.02.05a		Improved reported outcomes by service users	87.57%	84.92%	87.8%	86.4%	87.73%	✅	⬆	**Q3 16/17:** 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. 243 out of 277 people responded positively to at least 66% of the outcomes focussed questions they were asked.	75%	
ASC.S.02.05c		Increase the % of people who said that the care and support they received had a positive impact on their quality of life	89%	89%	89%	89%	89%	✅	▬	**Q3 16/17:** 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.	85%	

PI Code	Priority	PI	2015/16	Q3 2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17				Annual Target 2016/17	Benchmark
			Value	Value	Value	Value	Value	Status	Short Trend	Note		
ASC.S.02.05d		Increase the % of people who feel they are participating more in activities of their choice	88.24%	87.5%	90.48%	90.48%	90.48%	✅	▬	**Q3 16/17:** 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. 2016 survey due to be carried out during Q4.	75%	
ASC.S.02.05e	02. Review the model of care management	The proportion of people choosing SDS option 1	5.1%	4.9%	5.4%	5.9%	5.9%	📈	▬	**Q3 16/17:** 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 132 out of 2,225 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%	5.3%	4.8%	4.5%	4.9%	📈	⬆	**Q3 16/17:** 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 111 out of 2,225 individuals choosing option 2, and includes those under the age of 18.		
ASC.S.02.05g		The proportion of people choosing SDS option 3	97.2%	91.4%	93.2%	93.3%	93.2%	📈	⬆	**Q3 16/17:** 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 2,073 out of 2,225 individuals choosing option 3, and includes those under the age of 18.		

PI Code	Priority	PI	2015/16 Value	Q3 2015/16 Value	Q1 2016/17 Value	Q2 2016/17 Value	Q3 2016/17 Value	Status	Short Trend	Note	Annual Target 2016/17	Benchmark
ASC.S.02.05h	02. Review the model of care management	The proportion of people choosing SDS option 4	7.4%	3.8%	4%	3.7%	4%		⬆	**Q3 16/17:** Data Only. There is no target for self directed support options, as this is included in order to monitor the spread of uptake, which is determined by service user choice. This includes those under the age of 18. As option 4 refers to individuals who choose more than one option, these service users are also included in at least two of the first three options. This figure equates to 90 out of 2,225 individuals.		
BS.ASC.S.02.05b		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%	83%	83%	83%	83%	✅	▬	**Q3 16/17:** 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. 2016 survey due to be carried out during Q4.	83%	
ASC.S.04.02a	04. Carers	Increase the number of people receiving an assessment of their care needs (Carer Conversations)	126	101	33	66	84	✅	⬆	**Q3 16/17:** On Target 84 people received a Carers Conversation between April and December 2016.	138	
ASC.S.04.02b		The ratio of workflow which is a Carer's Conversation	New for 16/17		4.23%	4.5%	4.07%		▬	**Q3 16/17:** Data Only. Workflow in this measure refers to assessments, reviews and carer's conversations completed during April - December 2016.		
ASC.S.05.01a	05. Older People	Increase the proportion of MERRIT callouts which result in a fall assessment	23.57%	24.3%	38%	36.96%	50.35%	✅	⬆	**Q3 16/17:** On Target This refers to 1,016 out of 2,018 callouts.	30%	

PI Code	Priority	PI	2015/16 Value	Q3 2015/16 Value	Q1 2016/17 Value	Q2 2016/17 Value	Q3 2016/17 Value	Status	Short Trend	Note	Annual Target 2016/17	Benchmark
BS.ASC.S.05.01b		Decrease the percentage of falls which result in a hospital admission for clients aged 65+	4.79%	4.9%	1.19%	4.07%	4.63%	✅	⬇	**Q3 16/17:** On Target. This figure relates to 47 out of 1,016 falls.	10%	
ASC.S.05.02a		Increase the percentage of Intermediate Care at Home clients who returned home with no package of care	4%	3.6%	N/A	0%	1.03%	🛑	⬆	**Q3 16/17:** Off Target This figure does not include respite.	5%	Baseline 8.7% 2014/15
ASC.S.05.02b	05. Older People	Decrease the percentage of Intermediate Care at Home Clients who were admitted to a care home	15%	17%	N/A	0%	11.3%	📊	⬆	**Q3 16/17:** Data Only 11 out of 97 people admitted to a care home following intermediate care. Target to be determined. This figure does not include respite.		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%	13.4%	0%	0%	21.6%	🛑	⬇	**Q3 16/17:** Off Target Figure off target, but lower than baseline figure determined in 2014/15. This figure does not include respite.	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	44.96	354	346	324	📊	⬆	**Q3 16/17:** Data Only. This information relates to a rolling year, and covers the period September 2015 - September 2016, which is the most up to date information available.		
ASC.S.05.05b		Reduce the number of patients delayed in hospital for more than 72 hours at census date	1	6	7	9	17	📊	⬇	**Q3 16/17:**Data Only. Whilst there were seventeen 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.		

PI Code	Priority	PI	2015/16 Value	Q3 2015/16 Value	Q1 2016/17 Value	Q2 2016/17 Value	Q3 2016/17 Value	Status	Short Trend	Note	Annual Target 2016/17	Benchmark
ASC.S.05.08a	05. Older People	Increase the number of older people attending day centres	New for 16/17		279	203	196	📊	➖	**Q3 16/17:** Data Only. Woodburn Day Centre has closed, with some users relocating to Highbank, and others using the new Grassy Riggs Centre to access more day opportunities within the community, rather than a traditional day centre setting.		
BS.ASC.S.05.05c		Maintain at zero the number of patients delayed in hospital for more than 2 weeks at census date	1	2	2	17	11	🛑	⬆	**Q3 16/17:** Off Target Delayed discharge now monitored on weekly basis. Figures change on a daily basis and performance is now much improved.	0	
ASC.S.08.02a	08. Adults substance misuse	Increase the number of people accessing peer support services	New for 16/17		44	N/A	N/A	📊	➖	**Q3 16/17:** Data Not Available Work is ongoing to ensure a systematic way of providing this information so that it can be reported in Q4.		
ASC.S.09.01a	09. Adults - Offenders	Numbers accessing SPRING service	New for 16/17		13	15	17	📊	➖	**Q3 16/17:** 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		Monitor the number of violent offenders with MAPPA involvement	New for 16/17		0	0	0	📊	➖	**Q3 16/17:** Data Only		
ASC.S.10.04a	10. Adults with long term conditions, disability and sensory impairment	The number of people attending the Transforming Care after Treatment drop in centre in Lasswade	New for 16/17		5	13	17	📊	➖	**Q3 16/17:** Data Only		
ASC.S.10.04b		The number of people receiving an holistic needs assessment	New for 16/17		9	10	14	📊	➖	**Q3 16/17:** Data Only		
ASC.S.10.09a		Number of people receiving training	New for 16/17		85	123	147	📊	➖	**Q3 16/17:** Data Only		

PI Code	Priority	PI	2015/16	Q3 2015/16	Q1 2016/17	Q2 2016/17	Q3 2016/17				Annual Target 2016/17	Benchmark
			Value	Value	Value	Value	Value	Status	Short Trend	Note		
BS.ASC.02		Maximise the no. of people accessing short breaks	827	677	N/A	546	603			**Q3 16/17:** Data Only		
BS.ASC.03	11. Balanced Scorecard	Percentage of people who say that have a say in the way their care is provided	78%	78%	78%	78%	78%			**Q3 16/17:** OnTarget Information from the 2015 user survey showed that 94 out of 120 respondents who expressed an opinion stated that they agreed with the question "I have been given choices about the type of service I receive". Responses included in this are Strongly Agree; Agree; Disagree; Strongly Disagree. It does not include the response Neither Agree Nor Disagree, consistent with previous calculations. 2016 survey to be carried out during Q4.	75%	

Local Government Benchmarking Framework - Adult, Social Care

Midlothian

Adult, Social Care

Code	Title	2010/11 Value	2011/12 Value	2012/13 Value	2013/14 Value	2014/15 Value	2015/16 Value	External Comparison
SW1	Older Persons Home Care Costs per Hour (Over 65) (LGBF)	£16.22	£16.98	£12.46	£23.81	£28.22	£25.90	15/16 Rank 23 (Third Quartile). 14/15 Rank 30 (Bottom Quartile).
SW2	SDS spend on adults 18+ as a % of total social work spend on adults 18+(LGBF)	2.76%	2.18%	2.39%	2.73%	2.62%	3.85%	15/16 Rank 15 (Second Quartile). 14/15 Rank 18 (Third Quartile).
SW3	Percentage of service users 65+ with intensive needs receiving care at home. (LGBF)	36.3%	38.4%	53.6%	38.8%	30.72%	37%	15/16 Rank 12 (Second Quartile). 14/15 Rank 22 (Third Quartile).
SW4	Percentage of adults satisfied with social care and social work services (LGBF)	51.7%		57%	42%	43%	37%	15/16 Rank 31 (Bottom Quartile). 14/15 Rank 29 (Bottom Quartile).
SW4a	Percentage of adults receiving any care or support who rate it as excellent or good. (LGBF)	New for 14/15				82%	73%	15/16 Rank 32 (Bottom Quartile) 14/15 Rank 28 (Bottom Quartile)
SW4b	Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life. (LGBF)	New for 14/15				86%	86%	15/16 Rank 15 (Second Quartile) 14/15 Rank 12 (Second Quartile)
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	£406.73	15/16 Rank 22 (Third Quartile). 14/15 Rank 14 (Second Quartile).