



Meeting of East Renfrewshire Health and Social Care Partnership Held on	Performance and Audit Committee 20 November 2024
Agenda Item	6
Title	Mid-Year Performance Update 2024-25
Summary This report provides the Performance and Audit Committee with an update on key performance measures relating to the delivery of the strategic priorities set out in the HSCP Strategic Plan 2022-2025. Where mid-year data is available for strategic performance indicators this is included. The report includes exception reporting for two PIs, providing more detailed discussion of performance for these measures. Exception reports are reports delving further into the performance of specific measures and mitigation or reasoning for current performance. They look at projected information on how to maintain or improve on current performance.	
Presented by	Steven Reid Policy, Planning and Performance Manager
Action Required Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2024-25.	

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

Report by Chief Officer

MID-YEAR PERFORMANCE UPDATE 2024-25

PURPOSE OF REPORT

1. This report provides the Performance and Audit Committee with an update on key performance measures relating to the delivery of the strategic priorities set out in the HSCP Strategic Plan 2022-2025. Where mid-year data is available for strategic performance indicators this is included. The report also includes more detailed exception reports for two key performance indicators.

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2024-25.

BACKGROUND

3. The Performance and Audit Committee (PAC) regularly reviews performance reports in order to monitor progress in the delivery of the strategic priorities set out in the HSCP Strategic Plan. These reports provide data on the agreed performance indicators in our performance framework and are presented quarterly and at mid and end-year.
4. We continue to work with members of the PAC to improve the format and content of our performance reports including the introduction of 'exception' reporting format in line with recommendations from our working group. For this current report, in addition to our full report on progress against our key performance indicators (Appendix One), we have included two exception reports (Appendix Two) giving more detailed discussion on performance trends for the following measures:
 - A&E attendances/ admissions from care homes in East Renfrewshire HSCP
 - Payment of invoices: Percentage invoices paid within agreed period (30 days)
5. The exception reports cover:
 - Purpose of the indicator – *explanation and how we use it to improve*
 - What does good look like? – *long-term objective for this area of activity*
 - Current status of measure – *current position including visualisation of data*
 - Reason/explanation for current performance – *understanding why performance is an exception*
 - Mitigating action – *approaches (with timescales) that will improve performance*
 - Investment – *current / required resources to deliver expected performance*
 - Context and benchmarking – *relevant comparative data if available*
6. For all indicators in our reporting, we aim to show clear visualisation of performance trends against targets with charts. As we develop our reporting (and particularly for our

core/exception indicator set) we intend to incorporate future performance projections against forward targets to show intended trajectories in our charts.

REPORT

7. As expected, the mid-year performance update provides a smaller number of data updates compared with end-year. The report includes data for mid-year and any updated end-year data for indicators from our Strategic Plan that have not previously been reported to the Committee. The report provides charts for all measures. Each measure is presented with a RAG status in relation to the target for the reporting period (where a target is set), along with trend arrows (showing 'up' for improvement) and commentary on performance. Many of the data trends continue to reflect the unique circumstances faced by local health and social care services since the Covid-19 pandemic. Explanations of any notable shifts in performance are included in the commentary text.
8. The report contains data updates and commentary relating to the performance measures set out under the strategic priorities in the HSCP Strategic Plan 2022-25:
 - Working together with children, young people and their families to improve mental and emotional wellbeing
 - Working together with people to maintain their independence at home and in their local community
 - Working together to support mental health and wellbeing
 - Working together to meet people's healthcare needs by providing support in the right way, by the right person at the right time
 - Working together with people who care for someone ensuring they are able to exercise choice and control
 - Working together on effective community justice pathways that support people to stop offending and rebuild lives
 - Working together with individuals and communities to tackle health inequalities and improve life chances
 - Working together with staff across the partnership to support resilience and wellbeing
 - Working together to protect people from harm
9. The final section of the data report contains a number of organisational indicators relating to our staff and customers.
10. The HSCP continues to operate at a high level of performance across service areas, including many that continue to face significant challenges and pressures. During the current period of reporting, staff have continued to resilience and commitment to deliver services to support the residents of East Renfrewshire.

Performance highlights include:

11. Supporting **looked after children** - no children who experienced 3 or more placement moves in the reporting period.
12. Supporting **independence** - a high proportion of service users (94%) continue to report that their 'living where/as you want to live' needs are being met. This is slightly reduced on the previous 6 months but continue to perform above target.

13. We are continuing to see improving performance on waiting times for **psychological therapies** with the percentage of people waiting no longer than 18 weeks increasing from 80% to 87.1% in the reporting period. This follows successful recruitment into the service.
14. We are also seeing positive performance on waiting times for **drug and alcohol recovery** services - with 97.7% of people seen within three weeks – up from 97% (target 90%).
15. Our support for women and children affected by **domestic violence** continues with high numbers of support users (97% - up from 93%) reporting improved personal safety and wellbeing outcomes.
16. We have seen significant improvement in **absence rates** for our Council-employed staff and are now ahead of our target for the 6 month period thanks to targeted support and improved absence among Care at Home staff. Absence for NHS declined slightly and remains higher than expected.
17. Our **payment of invoices** within expected timescales has continued to improve. Further information is included in our exception report at Appendix Two.

Areas that remain challenging include:

18. Unplanned **hospital admissions** have increased in the 6 month period, although performance remains within target. **Attendances** remain stable for the 6 month period and are lower than at the same time last year, suggesting fewer unnecessary attendances. We are continuing to see an increase in attendances and admissions from our care homes. In response, we are working closely with local care home to embed a Care Homes Falls Pathway and developing the alignment of OTs, physios and other Allied Health Professionals with our care homes. More information is given in our exception report at Appendix Two.
19. The number of people accessing support through **Self-directed Support** (SDS) Options 1 and 2 has reduced in the past 6 months. However, the overall trend is stable and latest data shows that the proportion of our social care spend going through SDS has been increasing and is in line with the national average. Supporting choice and control remains a strategic priority for the HSCP.
20. We continue to see declining performance in our measure of satisfaction for **unpaid carers** during the period. This is reflecting the pressures that our unpaid carers are experiencing.
21. In the last 6 months, **reablement** performance has declined significantly with 45% of care needs reduced following period of Reablement – down from 63% significantly lower than target (60%). This has been a challenging period with significant demand pressures and staffing issues for the service.
22. Although the response rate for the iMatter staff survey had increased, the results of the survey show scores had reduced in relation to support for learning, involvement in decisions and support for **staff health and wellbeing** from managers.
23. In the last 6 months commencement and completion within court timescales of **Community Payback Orders** has dropped and remains challenging. However, of those surveyed 100% advised that their order helped them look at stopping offending.

24. Minimising hospital **discharges with delay** (and bed days lost to delays) continue to be an area of focused activity for the partnership and we have seen performance decline compared with the previous 6 months. We remain focused on supporting people to return home or into alternatives in the community.

RECOMMENDATION

25. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2024-25.

REPORT AUTHOR AND PERSON TO CONTACT

Steven Reid, Policy, Planning and Performance Manager
Steven.Reid@eastrenfrewshire.gov.uk

November 2024

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

Performance and Audit Committee, Performance Update – Quarter 1, 2024/25,
25 September 2024

[https://www.eastrenfrewshire.gov.uk/media/10741/PAC-Item-09-25-September-2024/pdf/PAC_Item_09 -
_25_September_2024.pdf?m=1726679529017](https://www.eastrenfrewshire.gov.uk/media/10741/PAC-Item-09-25-September-2024/pdf/PAC_Item_09_-_25_September_2024.pdf?m=1726679529017)

Performance and Audit Committee, HSCP Annual Performance Report 2023-24,
26 June 2024

[https://www.eastrenfrewshire.gov.uk/media/10455/PAC-Item-09-26-June-2024/pdf/PAC_Item_09 -
_26_June_2024.pdf?m=1718729971193](https://www.eastrenfrewshire.gov.uk/media/10455/PAC-Item-09-26-June-2024/pdf/PAC_Item_09_-_26_June_2024.pdf?m=1718729971193)

Appendix 1



HSCP Strategic Plan – 2024-25 Mid-Year

Report Author: Graeme Clark / Steven Reid

Generated on: 24 Oct 2024

Key:

Green	performance is at or better than the target
Amber	Performance is close (approx 5% variance) to target
Red	Performance is far from the target (over 5%)


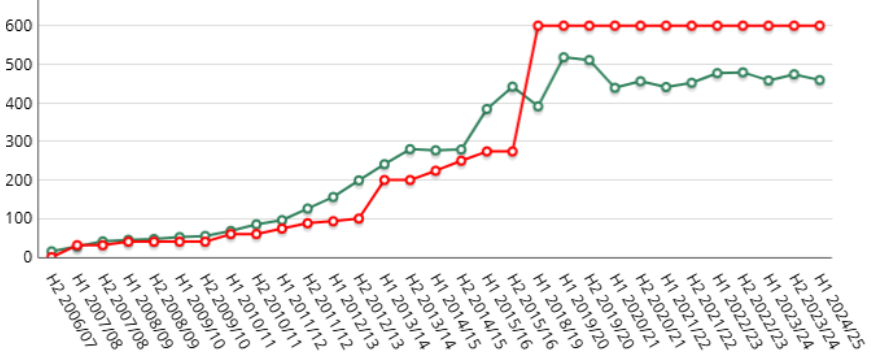

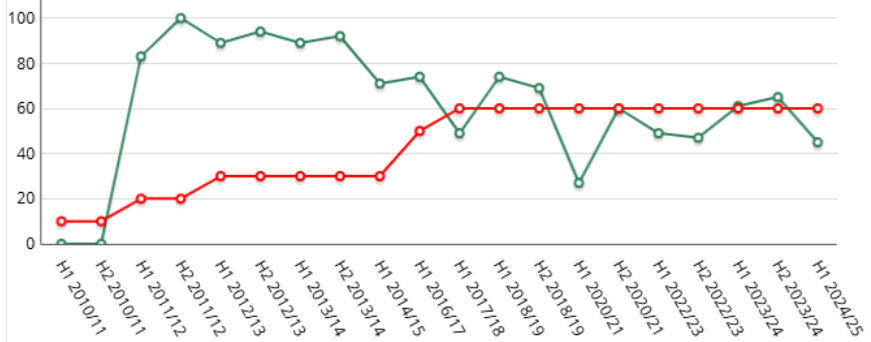
Trend arrows point upwards where there is improved performance (incl. where we aim to decrease the value).

* INCREASE/DECREASE in PI description gives the intended direction of travel for the indicator

1. Working together with children and their families to improve mental well-being


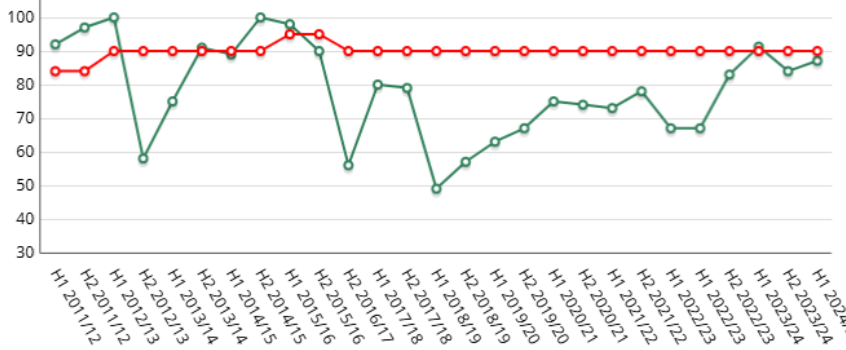
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note																																				
Percentage of children looked after away from home who experience 3 or more placement moves (AIM TO DECREASE)	2023/24	0%	11%	Green	No Change	<table><caption>Chart Data: Percentage of children looked after away from home who experience 3 or more placement moves</caption><thead><tr><th>Year</th><th>Percentage</th></tr></thead><tbody><tr><td>2007/08</td><td>19%</td></tr><tr><td>2008/09</td><td>15%</td></tr><tr><td>2009/10</td><td>15%</td></tr><tr><td>2010/11</td><td>15%</td></tr><tr><td>2011/12</td><td>13%</td></tr><tr><td>2012/13</td><td>13%</td></tr><tr><td>2013/14</td><td>13%</td></tr><tr><td>2014/15</td><td>12%</td></tr><tr><td>2015/16</td><td>11%</td></tr><tr><td>2016/17</td><td>11%</td></tr><tr><td>2017/18</td><td>11%</td></tr><tr><td>2018/19</td><td>11%</td></tr><tr><td>2019/20</td><td>11%</td></tr><tr><td>2020/21</td><td>11%</td></tr><tr><td>2021/22</td><td>11%</td></tr><tr><td>2022/23</td><td>11%</td></tr><tr><td>2023/24</td><td>11%</td></tr></tbody></table>	Year	Percentage	2007/08	19%	2008/09	15%	2009/10	15%	2010/11	15%	2011/12	13%	2012/13	13%	2013/14	13%	2014/15	12%	2015/16	11%	2016/17	11%	2017/18	11%	2018/19	11%	2019/20	11%	2020/21	11%	2021/22	11%	2022/23	11%	2023/24	11%	There were no children who experienced 3 or more placement moves in the reporting period (122 children looked after between 01/04/2023 - 31/03/2024).
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2. Working together with people to maintain their independence


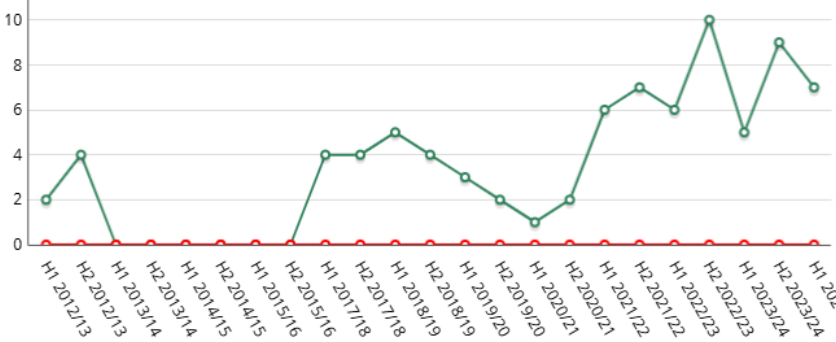
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Number of people self-directing their care through receiving direct payments and other forms of self-directed support. (AIM TO INCREASE)	H1 2024/25	459	600	Red	 No Change		Data calculated from the Social Care return. For first six months of 2024/25 459 people self directed their support through option 1 and option 2 against an annual target of 600. This is down slightly on the previous six months outturn of 474.
Percentage of those whose care need has reduced following re-ablement / rehabilitation (AIM TO INCREASE)	H1 2024/25	45%	60%	Red	 (declining)		In the first six months of 2024/25 a total of 23 clients of the 52 discharged were discharged with reduced needs. This is down from 61% in the previous half year period in 2023-24. Whilst the increase in complexity has impacted on reablement outcomes for individuals, long term unplanned absence within this area of service has significantly impacted on performance. The team has now returned to establishment level.

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Percentage of people aged 65+ who live in housing rather than a care home or hospital	2022/23	96.7%	97%	Green	 (improving)		Data to March 2023 released June 2023. (Source: Scottish Government MSG, June 2022). Target reviewed with no change being required (97%) as agreed by Head of Adult Services, Communities and Well-Being July 2023.
People reporting 'living where you/as you want to live' needs met (%) (AIM TO INCREASE)	H1 2024/25	94%	90%	Green	 (improving)		In the first six months of 2024/25 of the total 69 valid responses 65 reported their needs met.

3. Working together to support mental health and well-being


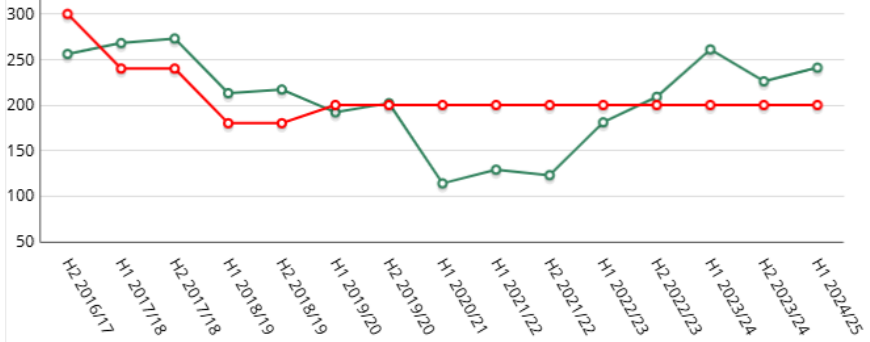


Description	Data Period	Current Value	Target	Traffic Light	Trend		Latest Note																																																								
Percentage of people waiting no longer than 18 weeks for access to psychological therapies (AIM TO INCREASE)	H1 2024/25	87.1%	90%	Amber	<div> (improving)</div>	<div><table><caption>Percentage of people waiting no longer than 18 weeks for access to psychological therapies</caption><thead><tr><th>Period</th><th>Percentage (%)</th></tr></thead><tbody><tr><td>H1 2011/12</td><td>92</td></tr><tr><td>H2 2011/12</td><td>84</td></tr><tr><td>H1 2012/13</td><td>98</td></tr><tr><td>H2 2012/13</td><td>58</td></tr><tr><td>H1 2013/14</td><td>75</td></tr><tr><td>H2 2013/14</td><td>90</td></tr><tr><td>H1 2014/15</td><td>89</td></tr><tr><td>H2 2014/15</td><td>98</td></tr><tr><td>H1 2015/16</td><td>95</td></tr><tr><td>H2 2015/16</td><td>90</td></tr><tr><td>H1 2016/17</td><td>55</td></tr><tr><td>H2 2016/17</td><td>80</td></tr><tr><td>H1 2017/18</td><td>79</td></tr><tr><td>H2 2017/18</td><td>48</td></tr><tr><td>H1 2018/19</td><td>57</td></tr><tr><td>H2 2018/19</td><td>63</td></tr><tr><td>H1 2019/20</td><td>68</td></tr><tr><td>H2 2019/20</td><td>75</td></tr><tr><td>H1 2020/21</td><td>74</td></tr><tr><td>H2 2020/21</td><td>72</td></tr><tr><td>H1 2021/22</td><td>78</td></tr><tr><td>H2 2021/22</td><td>67</td></tr><tr><td>H1 2022/23</td><td>67</td></tr><tr><td>H2 2022/23</td><td>83</td></tr><tr><td>H1 2023/24</td><td>90</td></tr><tr><td>H2 2023/24</td><td>84</td></tr><tr><td>H1 2024/25</td><td>87.1</td></tr></tbody></table></div>	Period	Percentage (%)	H1 2011/12	92	H2 2011/12	84	H1 2012/13	98	H2 2012/13	58	H1 2013/14	75	H2 2013/14	90	H1 2014/15	89	H2 2014/15	98	H1 2015/16	95	H2 2015/16	90	H1 2016/17	55	H2 2016/17	80	H1 2017/18	79	H2 2017/18	48	H1 2018/19	57	H2 2018/19	63	H1 2019/20	68	H2 2019/20	75	H1 2020/21	74	H2 2020/21	72	H1 2021/22	78	H2 2021/22	67	H1 2022/23	67	H2 2022/23	83	H1 2023/24	90	H2 2023/24	84	H1 2024/25	87.1	<p>During the period April to September 2024, on average, 80.7% of patients assessed as suitable for psychological therapy waited no longer than 18 weeks to start treatment. This is below the target of 90% although the last six months demonstrate improving performance, increasing from 80% in April to 87.1% as at 30 September 2024. This is due to success in securing additional psychology resources. Achieving required performance in this area has been difficult over the long term due to challenges in securing psychology resources. Psychology vacancies within teams remain and this is a nationwide workforce issue. Wait times are monitored on a weekly basis, highlighting long waits or patients about to breach target, to ensure all teams are aware of current waiting time for their service. Over this period 273 patients started treatment and at the quarter end (30 September) there are 132 patients waiting to start treatment with longest wait at that time being 42 weeks.</p>
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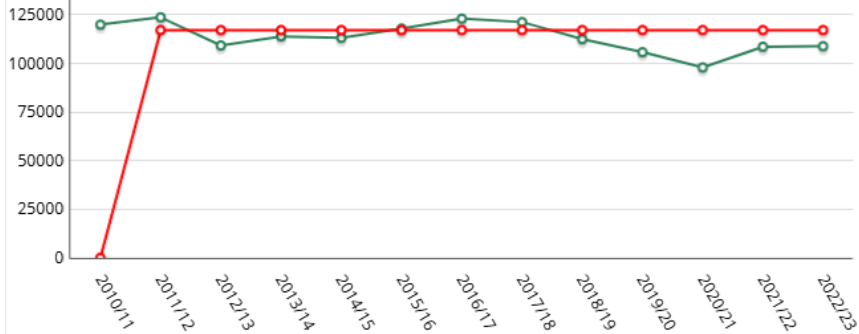

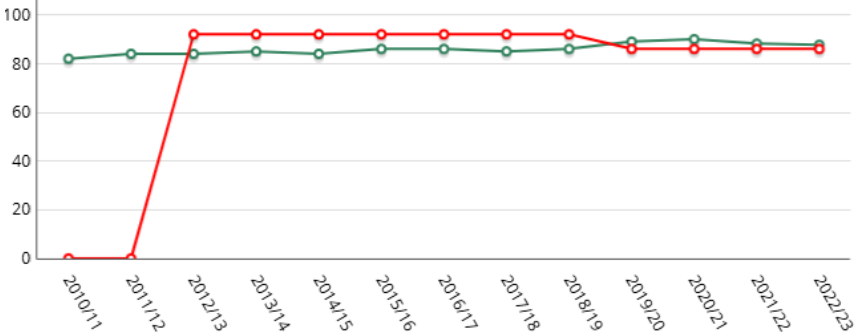
Description	Data Period	Current Value	Target	Traffic Light	Trend		Latest Note
<p>Percentage of people with alcohol and/or drug problems accessing recovery-focused treatment within three weeks.</p> <p>(AIM TO INCREASE)</p>	H1 2024/25	97.7%	90%	Green	 (improving)		<p>On average during the period April to September 2024, 97.7% of people waited no longer than three weeks from referral to appropriate alcohol and / or drugs (this is subject to verification pending Public Health Scotland report in 17 December 2024). This exceeds the 90% target and is higher than the performance achieved in the previous six months (89.9%). Action to fill vacancies and manage caseloads has returned service back to above average on target in recent quarters. 135 referrals started treatment during this the first half of 2024-25, with 91 still in treatment.</p>

4. Working together to meet people's healthcare needs							
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
<p>Delayed discharge: people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting. (Ave number delayed NHS GGC Acute & MH weekly data)</p> <p>(AIM TO DECREASE)</p>	H1 2024/25	7	0	Red	 (improving)		<p>Weekly average over the first six months of 2024/25. Compares to an average of nine in the previous six months (i.e. the last six months of 2023/24)</p>


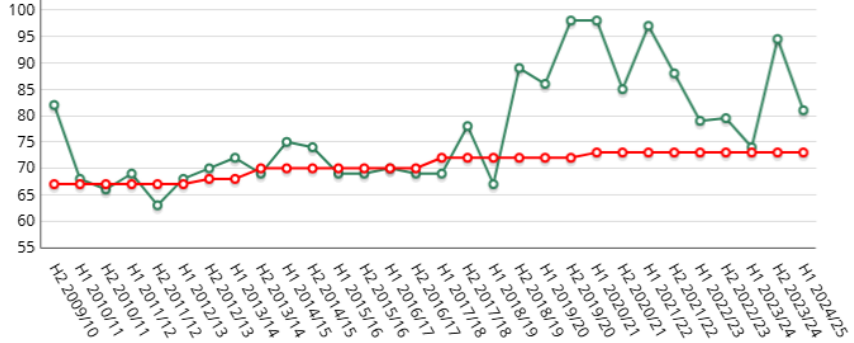
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Delayed discharges bed days lost to delayed discharge (PHS) (AIM TO DECREASE)	H2 2023/24	3,068	946	Red	 (declining)		Latest data to August 2024. Increased from 2,064 bed days in the previous six months. (Source: PHS, August 2024)
people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting including AWI (PHS data) (AIM TO DECREASE)	H2 2023/24	16	0	Red	 (declining))		Figure relates to the annual monthly average in last six months of 2023/24. This has increased from 10 in the previous six months. (Source: PHS August 2024)
Number of Emergency Admissions: Adults (NHS GGC data) (AIM TO DECREASE)	H1 2024/25	3,370	3,564	Green	 (declining)		Admissions in the first six months of 2024/25 have increased on the previous period (3,274) though still remain below target.

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
No. of A&E Attendances (excl MIU) (NHS GGC data) (AIM TO DECREASE)	H1 2024/25	6,086	9,166	Green	No Change		Data from the first six months of 2024/25 has increased slightly (6,040) in the previous period and is significantly down on the corresponding period last year (11,366)
Occupied Bed Days (Adult – non-elective) (NHS GGC data) (AIM TO DECREASE)	H1 2024/25	34,893	29,110	Red	(improving)		The figure for the first six months of 2024/25 has decreased on the same period last year (35,320) Source: NHS GGC, Sep 2024. Target reviewed for 2023/24 with no change required (58,220) as agreed by Head of Adult Services, Communities and Well-Being July 2023.
Emergency Admissions from Care Homes (NHS GGC data) (AIM TO DECREASE)	H1 2024/25	128	120	Amber	(declining)		Hospital admissions from Care Homes have increased on the previous six months from 118 to 128. This has rose above target for the first time since the last six months of 2019/20.



Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
A & E Attendances from Care Homes (NHSGGC data) (AIM TO DECREASE)	H1 2024/25	241	200	Red	 (declining)		In the first six months of 2024/25 there were 241 attendances at A&E from Care Homes, this is up from 226 in the previous six months and is above target. This is also 20 less than the same period 2023/24.
Health and Social Care Integration - Core Suite of Indicators NI-12: Emergency admission rate (per 100,000 population) for adults (AIM TO DECREASE)	2022/23	2,161		Data Only	 (improving)		Latest available data May 2023. Down from 9,414 in 2021/22. Annual outturn calculated with interim data for Qtr 3 and 4. (Source: Public Health Scotland)


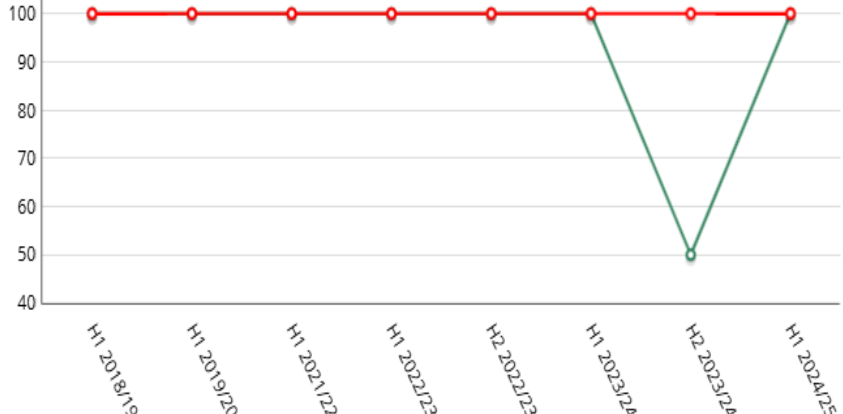
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Health and Social Care Integration - Core Suite of Indicators NI-13: Emergency bed day rate (per 100,000) for adults (AIM TO DECREASE)	2022/23	108,721	117,000	Green	 (improving)		Latest available data at May 2024. (Source: Public Health Scotland)
Health and Social Care Integration - Core Suite of Indicators NI-15: Proportion of last 6 months of life spent at home or in a community setting (AIM TO INCREASE)	2022/23	87.7%	86%	Green	 (declining)		Latest data at May 2024, annual outturn calculated on interim data for Qtr 3 and 4. Down from 89.5% in 2021/22. (Source: Public Health Scotland)

5. Working together with carers to be able to exercise choice and control


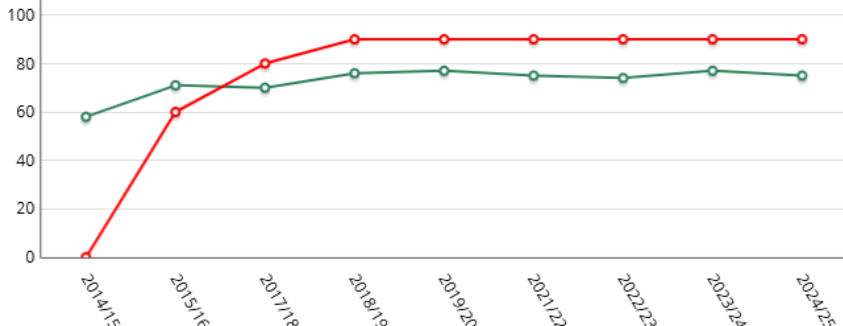
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
People reporting 'quality of life for carers' needs fully met (%) (AIM TO INCREASE)	H1 2024/25	81%	73%	Green	 (declining)		In the first six months of 2024/25 of the total 68 valid responses 55 reported their needs met. Down from 94.5% in the previous six months.


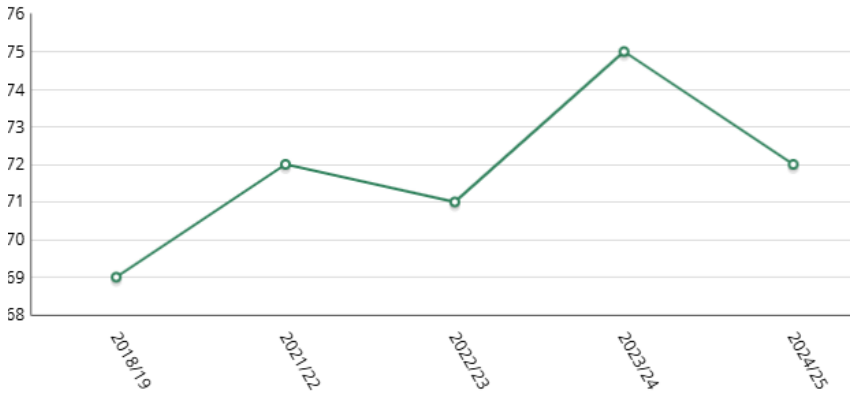

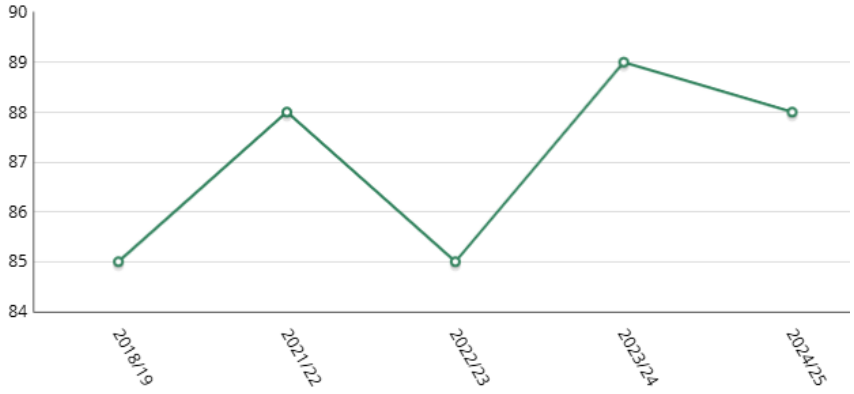
6. Working together with our partners to support people to stop offending

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Community Payback Orders - Percentage of unpaid work placement completions within Court timescale. (AIM TO INCREASE)	H1 2024/25	86%	80%	Green	 (improving)		In the first six months of 2024/25 19 out of 22 (86%) work placements were completed within court timescales. This remains above target but is down slightly for the same 6 month period in the previous year.


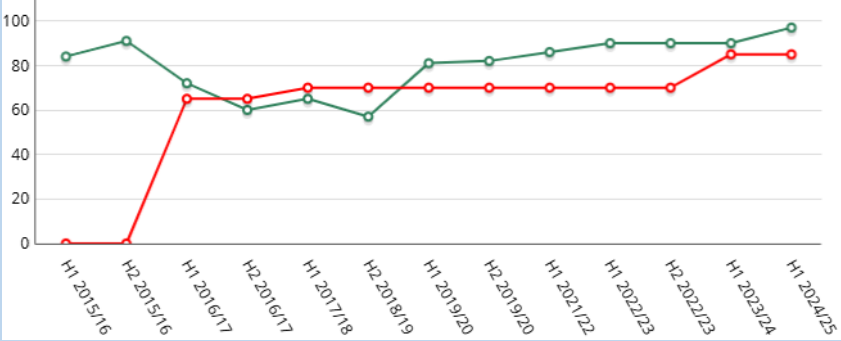

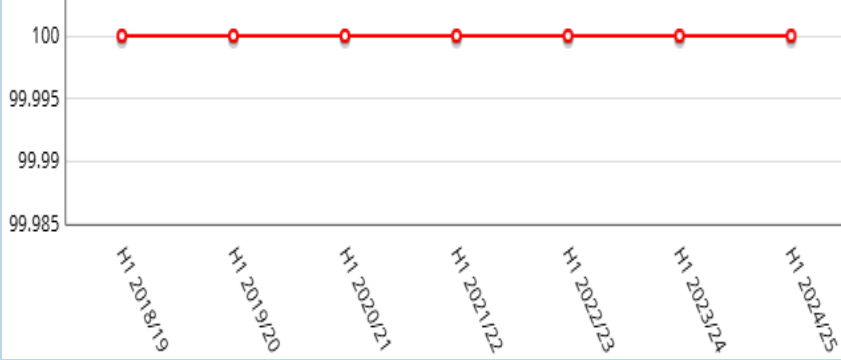
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Criminal Justice Feedback Survey - Did your Order help you look at how to stop offending? (AIM TO INCREASE)	H1 2024/25	100%	100%	Green	 (improving)		In the first six months of 2023/24 of the four Survey forms returned all said their Orders had helped them to look at how to stop offending

8. Working together with staff across the partnership to support resilience and well-being

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
% Staff who report 'I am given the time and resources to support my learning growth' in iMatter staff survey. (AIM TO INCREASE)	2024	75%	90%	Red	 (Declining)		Average score based on 675 responses, iMatter Survey Report 2024. Although we are missing target for this measure, performance was consistent with the previous surveys.


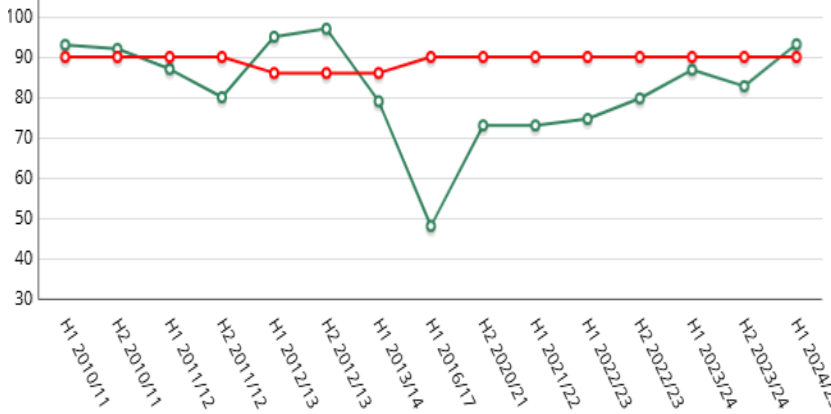
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
% Staff who report "I feel involved in decisions in relation to my job" in iMatter staff survey. (AIM TO INCREASE)	2024	72%		Data Only	 (Declining)		Based on 675 responses, iMatter Survey Report 2024. This is consistent with performance in 2022 and 2023 (72%)
% Staff who report "their manager cares about my health and well-being" in iMatter survey (AIM TO INCREASE)	2024	88%		Data Only	 (Declining)		Based on 675 responses, iMatter Survey Report 2024. This continues to be a very positive score and is the same as pre-pandemic levels. Health & Wellbeing continues to be a focussed priority.

9. Protecting people from harm


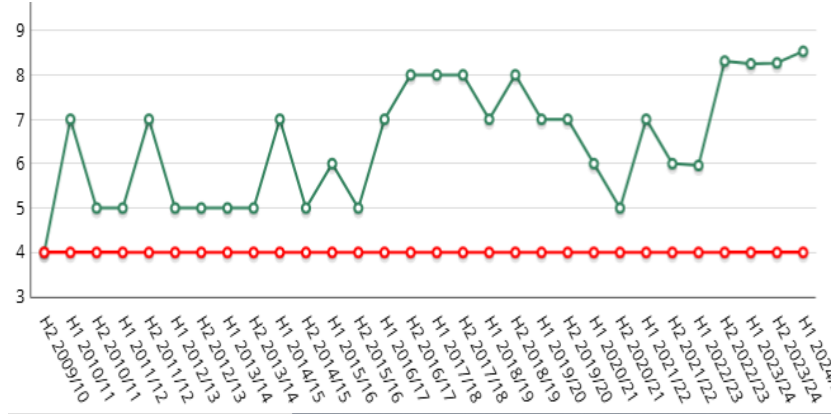
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Domestic abuse - % change / improvement in women's safety and wellbeing outcomes (AIM TO INCREASE)	H1 2024/25	97%	85%	Green	 (improving)		From April 2023– March 2024, East Renfrewshire Women's Aid service reported significant change and improvement for women across all reported outcomes. 49 reviews were completed with 97% of women assessed noting improvement in progress in their outcomes overall (above target 85%) indicating positive impact of support. Women's Aid continue to provide emotional and practical support to women, children and young people. In total, 575 women and children were supported across the three core services, helpline and drop in enquiries compared to 553 during the same period last year - a 4% increase.
People agreed to be at risk of harm and requiring a protection plan have one in place (AIM TO INCREASE)	H1 2024/25	100%	100%	Green	 (no change)		All people who are identified as being at risk of harm have a protection plan in place where required. This has been the historically consistent position.


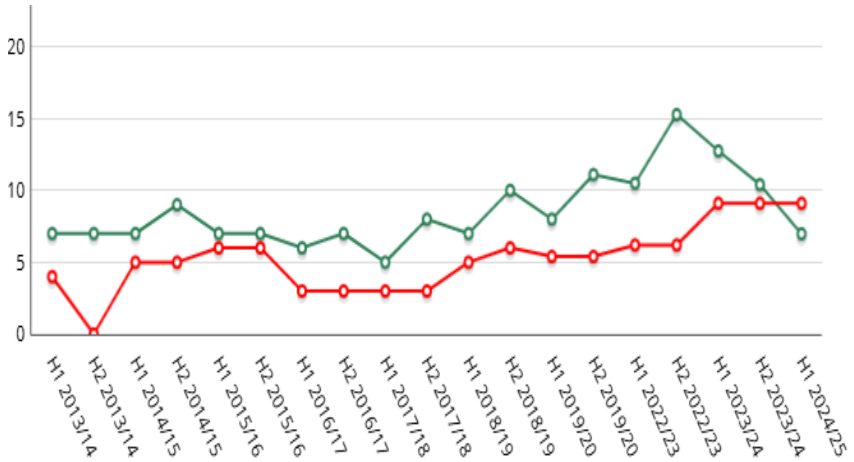

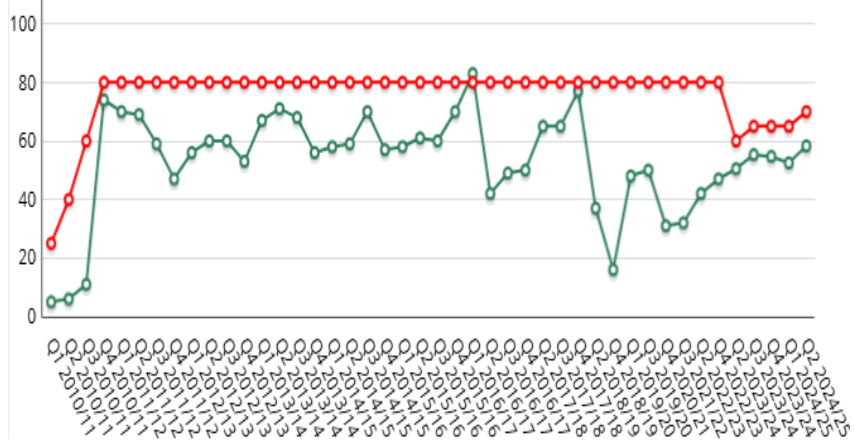
10. Organisational outcomes


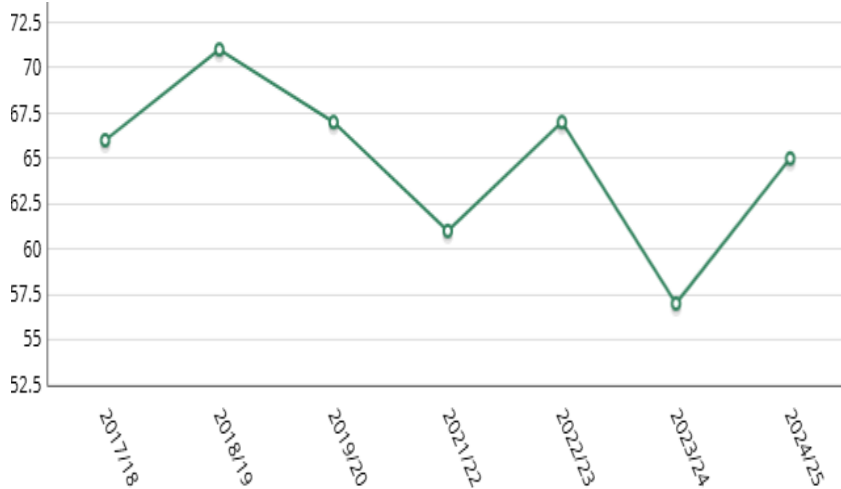
10.2 Efficiency

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Payment of invoices: Percentage invoices paid within agreed period (30 days) (AIM TO INCREASE)	H1 2024/25	93.2%	90%	Green	 (improving)		The first six months of 2024/25 performance has seen this measure come above target. The processing team has been back at full complement since January 2024. Previously long-term absence has affected this. In addition, better dashboards for the team to use, and the manager has been instrumental in ensuring these are used daily and invoices are properly targeted. Finally, due to the additional layer of authorisation needed for CareFirst invoices, we amended some of the parameters on our dashboard to help ensure they didn't tip over the payment period.

10.3 Our people

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Percentage of days lost to sickness absence for HSCP NHS staff (AIM TO DECREASE)	H1 2024/25	8.53%	4.0%	Red	 (Declining)		Average of available data for the first six months of 2024/25. This represents an increase on the previous six months (8.27%)

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
Sickness absence days per employee - HSCP (LA staff) (AIM TO DECREASE)	H1 2024/25	6.98	9.1	Green	 (improving)		In the first six months of 2024/25 absence was 6.98 days lost per employee this is down from 10.4 in the previous six months.
Percentage of NHS staff with an electronic Knowledge and Skills Framework review recorded on TURAS Appraisal System (AIM TO INCREASE)	Q2 2024/25	58.29 %	70%	Red	 (improving)		Due to the pressures of the pandemic KSF became lower priority over the past 3 years. The KSF Lead sends out monthly communications to managers to increase compliance. Additional training has also been made available as refresher courses for reviewers. Increasing steadily over previous 4 months.

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note																
iMatter Response Rate - HSCP (AIM TO INCREASE)	July 2024	65%			<div> (improving)</div>	 <table><caption>iMatter Response Rate Data</caption><thead><tr><th>Fiscal Year</th><th>Response Rate (%)</th></tr></thead><tbody><tr><td>2017/18</td><td>66.5</td></tr><tr><td>2018/19</td><td>71</td></tr><tr><td>2019/20</td><td>67</td></tr><tr><td>2021/22</td><td>61</td></tr><tr><td>2022/23</td><td>67</td></tr><tr><td>2023/24</td><td>57</td></tr><tr><td>2024/25</td><td>65</td></tr></tbody></table>	Fiscal Year	Response Rate (%)	2017/18	66.5	2018/19	71	2019/20	67	2021/22	61	2022/23	67	2023/24	57	2024/25	65	iMatter response rate at July 2024, of the 1037 recipients 675 responded (65%) up from 57% in 2023/24.
Fiscal Year	Response Rate (%)																						
2017/18	66.5																						
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2023/24	57																						
2024/25	65																						

Appendix Two – Exception Reports

Purpose of the indicator

A&E attendances/ admissions from care homes in East Renfrewshire HSCP

What does good look like?

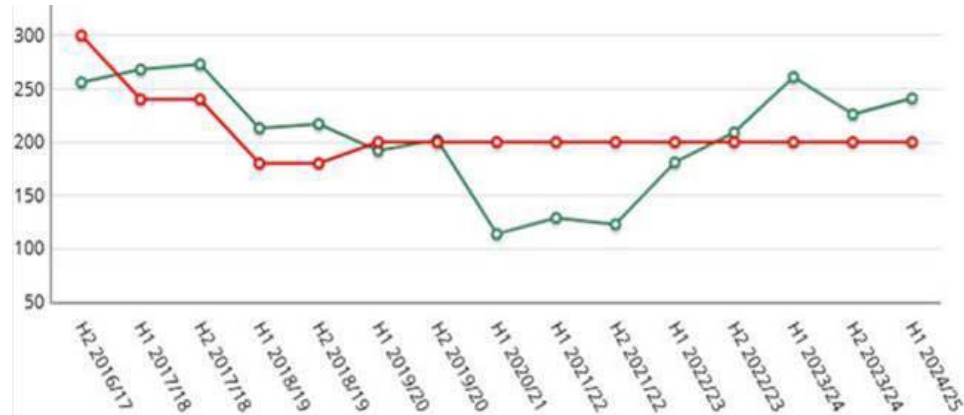
Unscheduled care activity/ conveyance to A&E for Care Home residents only occurs when clinically necessary. All opportunities, supports and pathways are considered to avoid unnecessary conveyance and admissions to hospital where possible.

Current status of measure

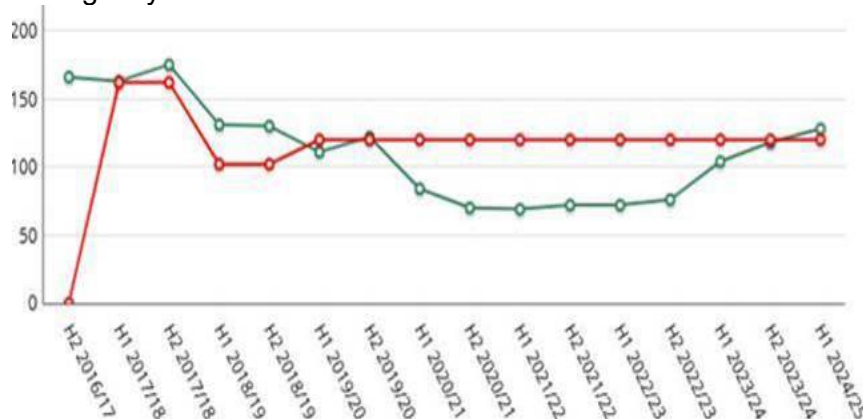
In the first six months of 2024/25 there were 241 attendances at A&E from East Renfrewshire Care Homes, which is increased from 226 in the previous six months and is above target. This was, however, 20 less attendances than in the same period in 2023/24. As noted in the previous report to PAC, this increase is similar to the picture across Scotland and seen in partnerships across NHS GG&C Health Board Area. It should also be noted that these are numbers of individuals presenting at A&E from a Care Home but this does not account for the corresponding total number of residents within Care Homes in East Renfrewshire during any given period.

Hospital admissions from East Renfrewshire Care Homes have increased on the previous six months from 118 to 128. This has risen above target for the first time since the last six months of 2019/20. This is again a picture which is being seen across the health board area. With a small increase in attendances at A&E, then it is not unexpected that the HSCP has also seen an increase in admissions to hospital.

A&E Attendances from care homes



Emergency admissions from care homes



Reason/explanation for current performance

Prevention of avoidable conveyance to A&E is multifaceted and there are challenges across the system to ensure alternative pathways are available and considered both in hours and out of hours. People living in care homes should have timely access to members of the multidisciplinary team 24/7 when urgent or unscheduled care is required. Consideration should also be given to the increasing complexity of health and care needs being managed within care home environment, challenges of provision of consistent permanent staffing within care homes.

Mitigating action

There is significant work ongoing across the HSCP to support avoidable conveyance to A&E for Care Home residents.

As per previous update, main focus going forward is development of the current Care Home Liaison Nursing (CHLN) Single Point of Access pathway to provide a proactive 7 day planned approach. Vacant posts (permanent and fixed term) both filled and 7 day working model will go live this month. All opportunities to encourage the Care Homes in East Renfrewshire to follow the Care Homes Falls Pathway continue to be taken and the SAS:FNC Call Before You Convey pathway remains a focus. This pathway is for SAS crews to use when a call has been made to 111/999 and the crew attending a resident in the home can call FNC for advice/decision support regarding conveyance.

Investment

Funding re-directed from the Care Home Collaborative to HSCPs to support Winter Planning assistance to Care Homes totalling £500k was allocated across all 6 HSCPs to mobilise this. The allocation to East Renfrewshire based on care home bed numbers for 23/24 (£31,651) and 24/25 (circa £35,000) has supported provision of additional Care Home Liaison Nurse hours- recruitment to a 0.6WTE fixed term post completed which will increase existing capacity. This will allow testing of the implementation of a 7 day service and consider impact of this change on rates of weekend conveyance.

Context and benchmarking

A comparative was sought with East Dunbartonshire HSCP and across the other HSCPs within GG&C who are currently all experiencing similar challenges with increasing numbers of attendances and admissions from care homes. There is ongoing multiagency work across GG&C in relation to this with East Renfrewshire representation on all appropriate working groups.

Purpose of the indicator

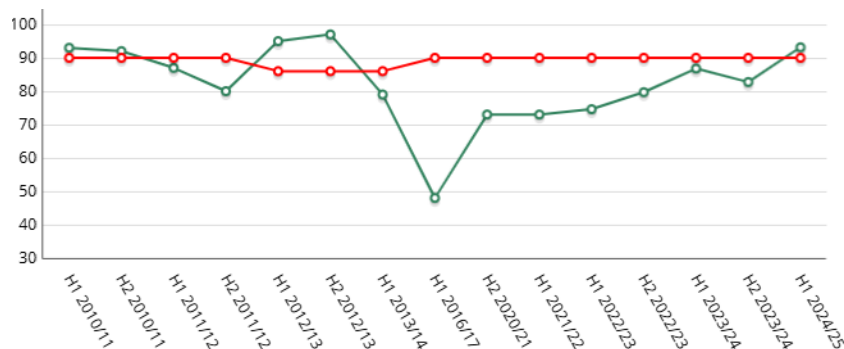
Payment of invoices: Percentage invoices paid within agreed period (30 days)

What does good look like?

The measure sets a standard of 90% of all invoices will be processed and paid within the agreed 30 days period from receipt. This is crucial in the financial process to assist with budgetary control and forecasting.

Current status of measure

The first six months of 2024/25 performance has seen this measure come above target for the first time in 10 years with 93.2% of all invoices paid within the 30 days. The performance has been gradually increasing over the last couple of years with gradual progress made.

**Reason/explanation for current performance**

The processing team has been back at full complement since January 2024, as previously long-term absence has affected this. In addition, better dashboards for the team to use, and the manager has been instrumental in ensuring these are used daily and invoices are properly targeted. Finally, due to the additional layer of authorisation needed for CareFirst invoices, we amended some of the parameters on our dashboard to help ensure they didn't tip over the payment period.

Mitigating action

The expectation is that with the current dashboard and full complement of staff that invoices would continue to be paid in the timely manner and within the agreed period going forward.

Due to a member of staff being redeployed to another team on a temporary basis from October on a 12-month temporary term and a new Scotland Excel procurement framework being introduced, the complexity of processing will increase as staff manoeuvre working with two concurrent financial frameworks and this impact the degree of how progressed performance is.

Investment

Staff absence has reduced significantly allowing a full complement of processors and management taking a more focused approach towards workloads. A traffic light dashboard was implemented to signal staff to invoices that may be about to fall out with the payment period. Alongside this, changes were made to the timings around the dashboard to alert staff sooner and allow focus to be on processing these and assisting the processors in the management of the workload.

Context and benchmarking

Currently we have no information to compare this performance with other partnerships or nationally as this is a local target.