



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	24 November 2021
Agenda Item	9
Title	Mid-Year Performance Update 2021-22

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 Interim Strategic Plan 2021-2022. Where mid-year data is available for strategic performance indicators this is included.

Presented by	Steven Reid Policy, Planning and Performance Manager
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Action Required

Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2021-22.

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

24 November 2021

Report by Chief Officer

MID-YEAR PERFORMANCE UPDATE 2021-22

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 Interim Strategic Plan 2021-2022. Where mid-year data is available for strategic performance indicators this is included.

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2021-22.

BACKGROUND

3. The Performance and Audit Committee 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.

REPORT

- 4. Due to the ongoing Covid-19 pandemic availability of mid-year data is more limited than normal although it is expected that we would have a smaller number of updates compared with end-year. In addition, for many performance indicators our normal reporting of data trends against our established targets is less meaningful due to the continuing impact of Covid-19 on provision.
- 5. 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. The report presents each measure with a RAG status in relation to the target for the reporting period (where a target is set), along with longterm and short-term trend arrows and commentary on performance. Many of the data trends reflect the unique circumstances faced by services over the course of the Covid-19 pandemic. Explanations of any notable shifts in performance are included in the commentary text.
- 6. The report contains data updates and commentary relating to the performance measures set out under the strategic priorities in the HSCP Interim Strategic Plan 2021-22:
 - 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 in relation to their caring activities
- Working together with our community planning partners on new 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

The final section of the data report contains a number of organisational indicators relating to our staff and customers.

7. The data shows that despite the pressures of the pandemic there has been strong performance across service areas. During the reporting period we have put a new senior management structure in place and our staff have continued to work tirelessly during challenging circumstances.

Supporting children and families

- 8. Our children's services are continuing to see increasing demand and complexity following the pandemic. In particular we are seeing more children with diagnosed neurodevelopmental disorders and a higher prevalence of families in crisis leading to more of these children coming under child protection and an associated increase in numbers coming into care. There has been a 29% increase in new allocations to our locality teams and 24.8% of CAMHS referrals in the six month period had a neurodevelopmental diagnosis. Over the past six months the number of children and young people subject to child protection who have been offered advocacy has increased.
- 9. Following the pandemic we have seen an increase in urgent referrals to CAMHS (up from 15% to 30% of total caseloads). Along with staffing challenges this has impacted on our ability to reduce waiting times for the service. The Children and Families service has continued to support the Healthier Minds service and the Family Wellbeing Service, offering 700 young people alternative support to CAMHS over the past year. The Enrichment Programme, a partnership between the HSPC and East Renfrewshire Culture and Leisure Trust has delivered 341 hours of activity to vulnerable young people

Supporting people to maintain their independence at home

10. Over the reporting period we have continued to support people to live independently and well at home, despite additional demand pressures on our services due to more people seeking support at home as well as increased levels of frailty and complexity. During the period our Care at Home service has maintained high levels of provision and the Care at Home improvement programme resulted in a positive inspection with grades moving to 4 (good) across all requirements. Our performance data shows 89% of people reporting that they are 'living where/as they want to live' and 69% of people have seen care needs reduced having received re-ablement / rehabilitation supports.

Supporting mental health and wellbeing and supporting recovery from addiction

- 11. During the first half of 2021-22 our teams have continued to deal with increased demand across mental health and addiction services due to increases in complexity. With the aid of technology teams have been able to offer people ongoing support throughout pandemic, and access to treatment has been maintained. As a result access to treatment waiting times for drugs and alcohol have continued to improve with 97% of people accessing treatment within 3 weeks for Apr-Sept 21 (target 90%). Our peer support programme continues to develop and we have been delivering a Buvidal clinic (a new, long-acting opiate substitution treatment and alternative to methadone and other substitutes).
- 12. We remain below target for access times to psychological therapies. To address this we are taking forward an action plan including prioritising the longest waits, offering remote appointments via NHS Attend Anywhere and securing increase in psychology staffing resource.

Meeting healthcare needs and reducing unplanned hospital care

- 13. Patterns of accident and emergency and unplanned hospital admissions were significantly altered by the pandemic; but for some measures have been moving towards pre-pandemic levels in the past 6 months. Despite increased activity we remain ahead of target for emergency admissions and A&E attendances.
- 14. During the reporting period we have seen an increase in delayed discharges. This is being driven by the pressure on care at home services which is restricting access. Our Hospital to Home team work to deliver timely and appropriate discharges from hospital. During the pandemic the team have experienced significant issues around supporting 'adults with incapacity' and establishing appropriate guardianship/Power of Attorney arrangements. However, our performance for standard delays remains among the best in Scotland.

Supporting unpaid carers

15. Working with East Renfrewshire Carers Centre, we have continued to ensure that carers have access to guidance and PPE throughout the first six months of the 2021-22. Check-in calls to carers are being delivered by ER Carers, and carers have been offered support to set up and manage a peer support Facebook Group. The Mental Health Carers group continues to run virtually. Despite the significant challenges being faced by carers 97% of those asked reported that their 'quality of life ' needs were being met.

Supporting people through criminal justice pathways

- 16. The provision of unpaid work has been significantly impacted by the pandemic with Community Payback Orders suspended on 23rd March 2020. At mid-year we are missing targets for commencement of unpaid work placements within seven days and completion of placements within court timescales. Completion timescales are currently at 70% (target 80%). We have increased our capacity to deliver by focusing on outdoor work activities (ensuring social distancing is maintained) and have increased the number of supervisors available to support service users.
- 17. We have continued to provide support for women and families affected by domestic abuse throughout the pandemic. The reporting of personal outcome measures shows continuing improvement over the period, now sitting at 86%.

Supporting staff resilience and wellbeing

18. Supporting staff wellbeing is a key focus of the partnership especially as a result of the pandemic which has placed significant pressure on our workforce. The way staff have been working has changed significantly with home working becoming the norm for large groups of employees. Despite the pandemic we were very pleased with a 61% response rate for our staff engagement survey (iMatter). Our composite 'Employee Engagement Index' improved from 75% to 78%; and 88% of staff agreed that 'My manager cares about my health and wellbeing', the best score to date for this question and a positive indication that managers are supporting staff through this challenging period. We continue to monitor and address staff absence which have seen recent increases particularly among NHS staff.

RECOMMENDATION

19. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2021-22.

REPORT AUTHOR AND PERSON TO CONTACT

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November 2021

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

Performance and Audit Committee, 22 September 2021, HSCP Annual Performance Report 2020/21

HSCP Strategic Plan Report - Mid Year 21-22

Report Author: Steven Reid

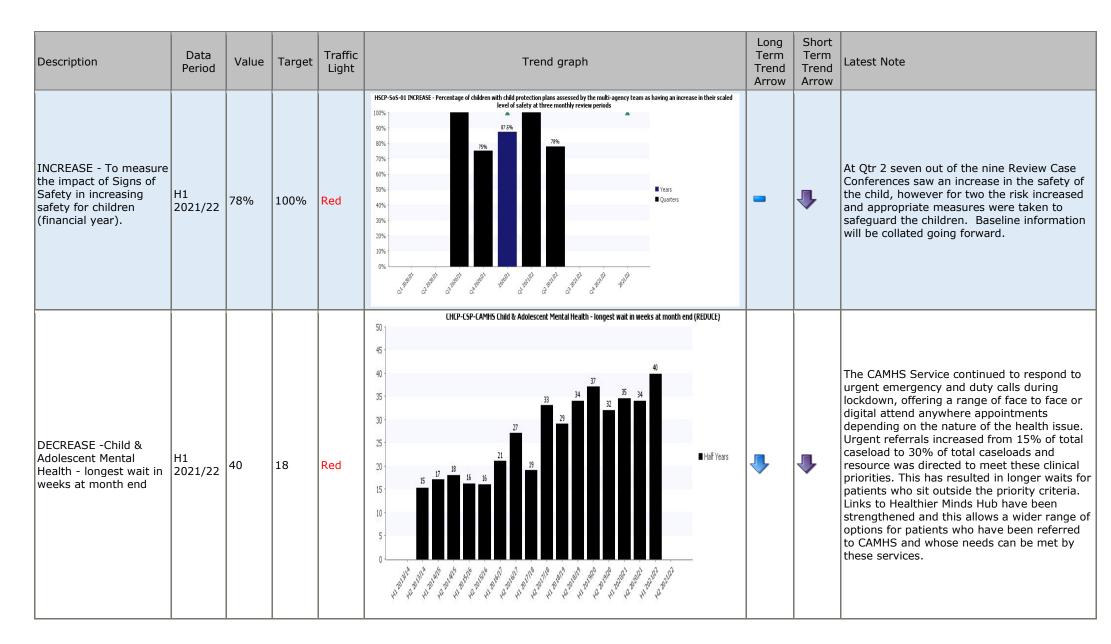


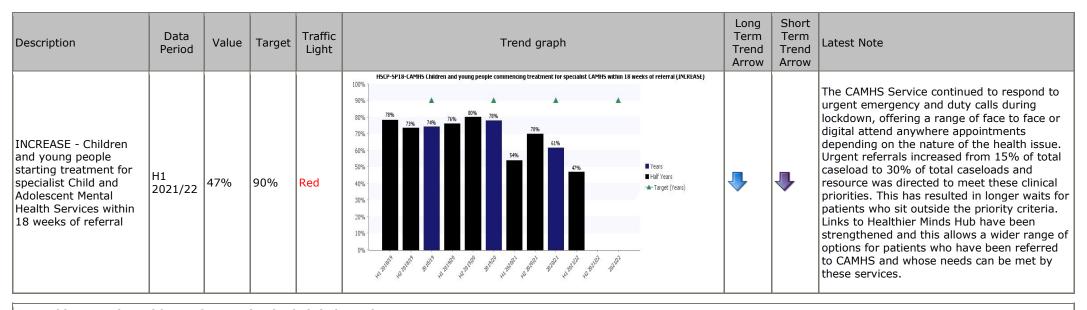
Key:	
Green	performance is at or better than the target
Amber	Performance is close (approx 5% variance) to target
Red	Performance is far from the target (over 5%)

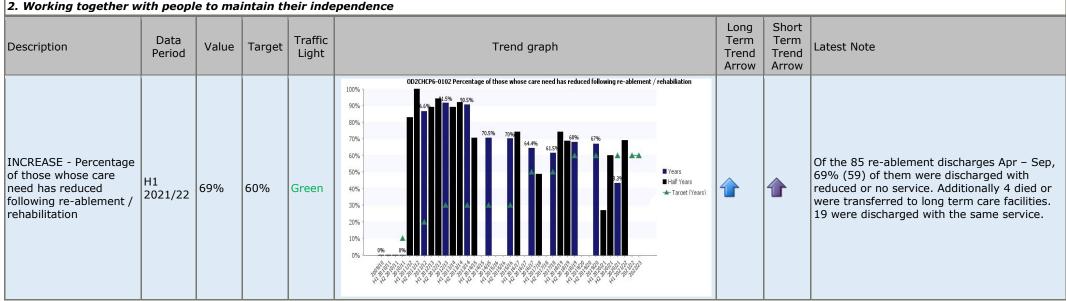
Trend arrows point upwards where there is <u>improved</u> performance (inc. where we aim to decrease the value).

East Renfrewshire Outcome Delivery Plan indicators highlighted in blue

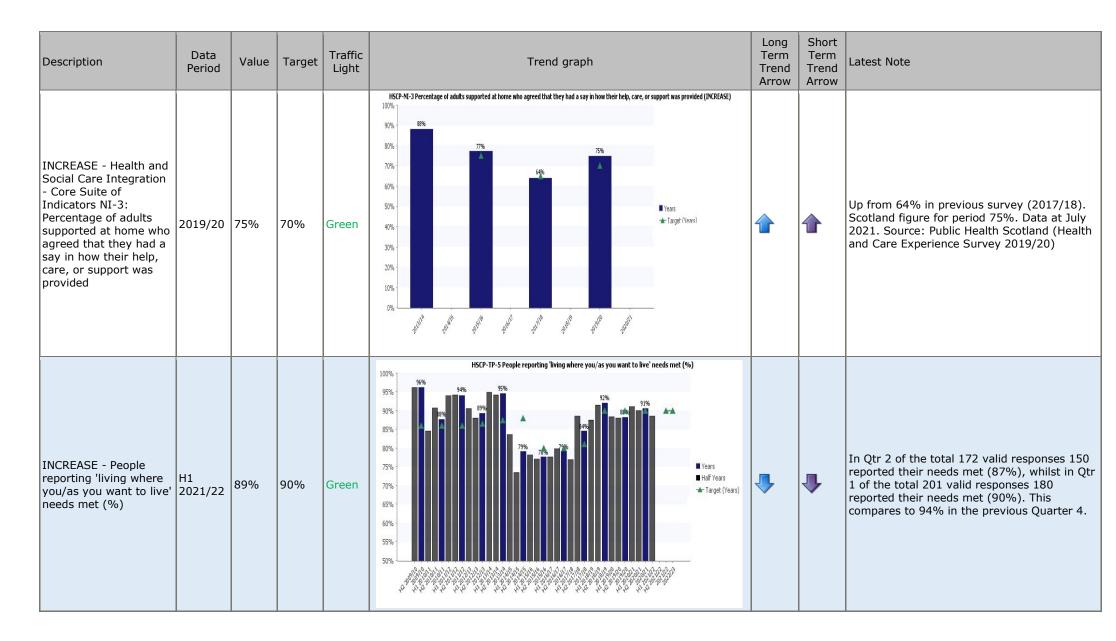
1. Working together w	vith childr	en and	their fa	milies to	o improve mental well-being			
Description	Data Period	Value	Target	Traffic Light	Trend graph	Long Term Trend Arrow	Short Term Trend Arrow	Latest Note
INCREASE - To measure the proportion of children and young people subject to child protection who have been offered advocacy.	H1 2021/22	62%	100%	Red	HSCP-ADV-01 INCREASE - Percentage of children subject to child protection who have been offered advocacy			Baseline is 74% for Q4 of 2019/20 (baseline is Academic Year). We have regular liaison meetings with Partners in Advocacy to ensure robust partnership working and support so that children and young people are offered access to and information for advocacy services at the earliest opportunity. This has resulted in an increase in offers of advocacy to children and young people.





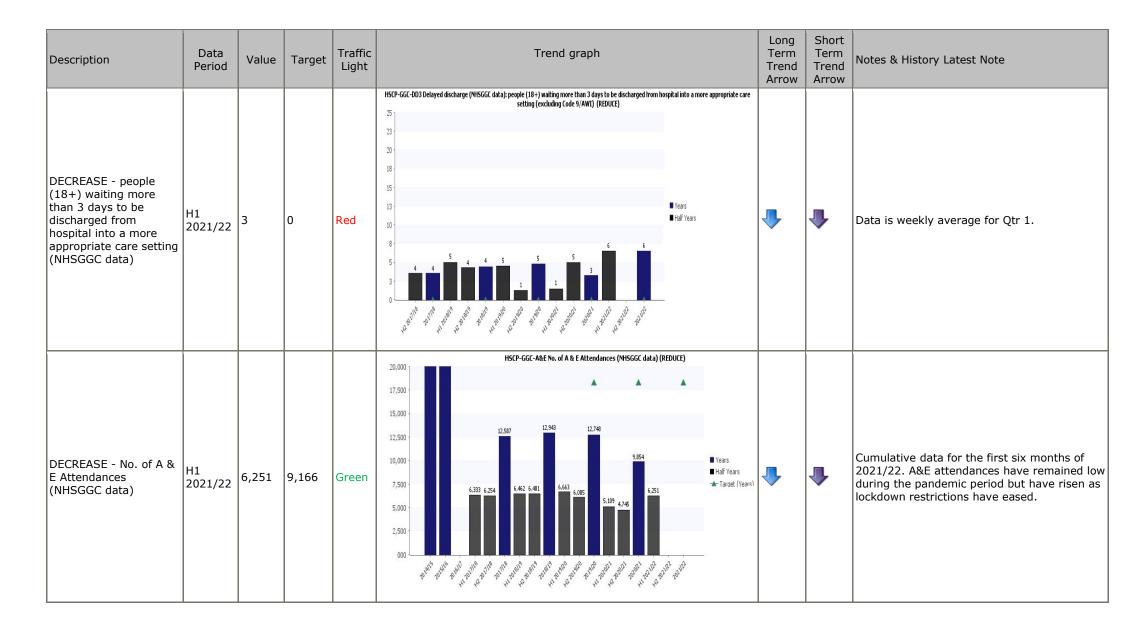


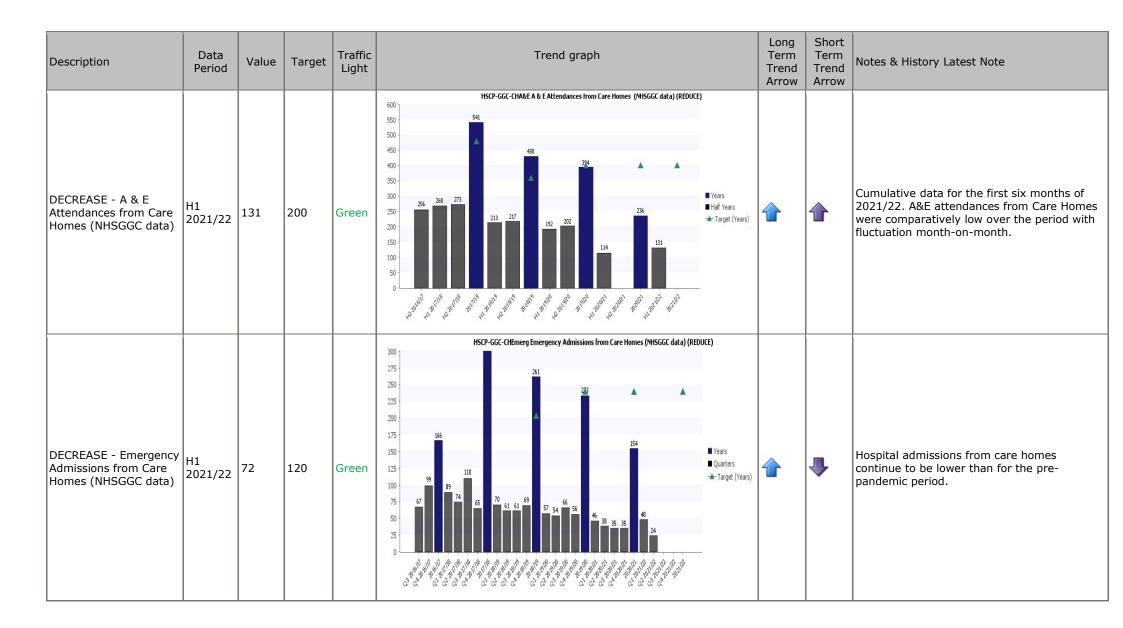


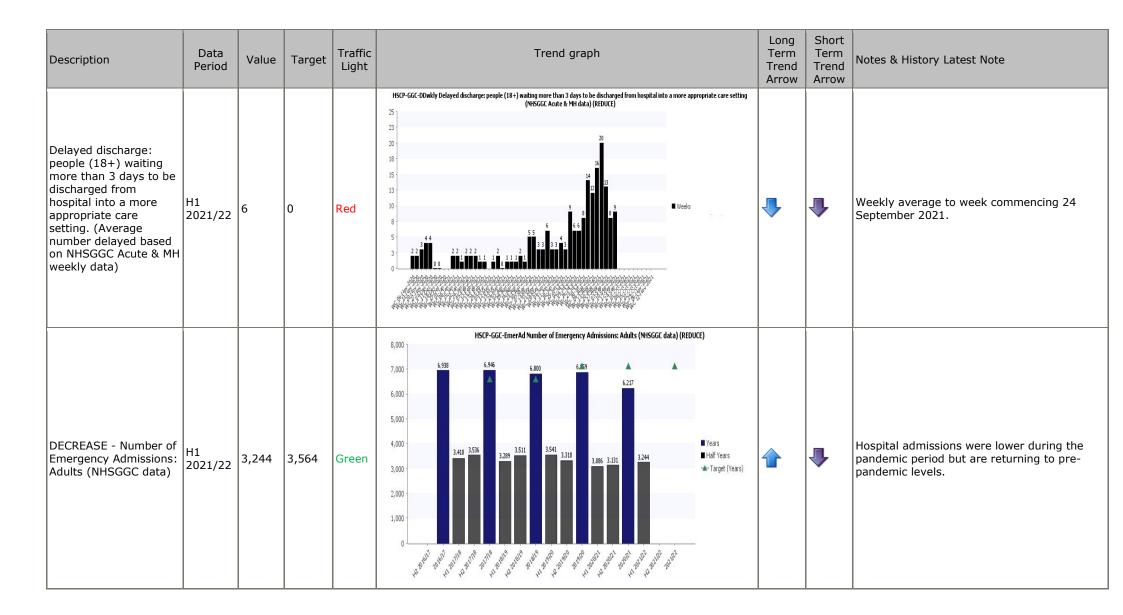


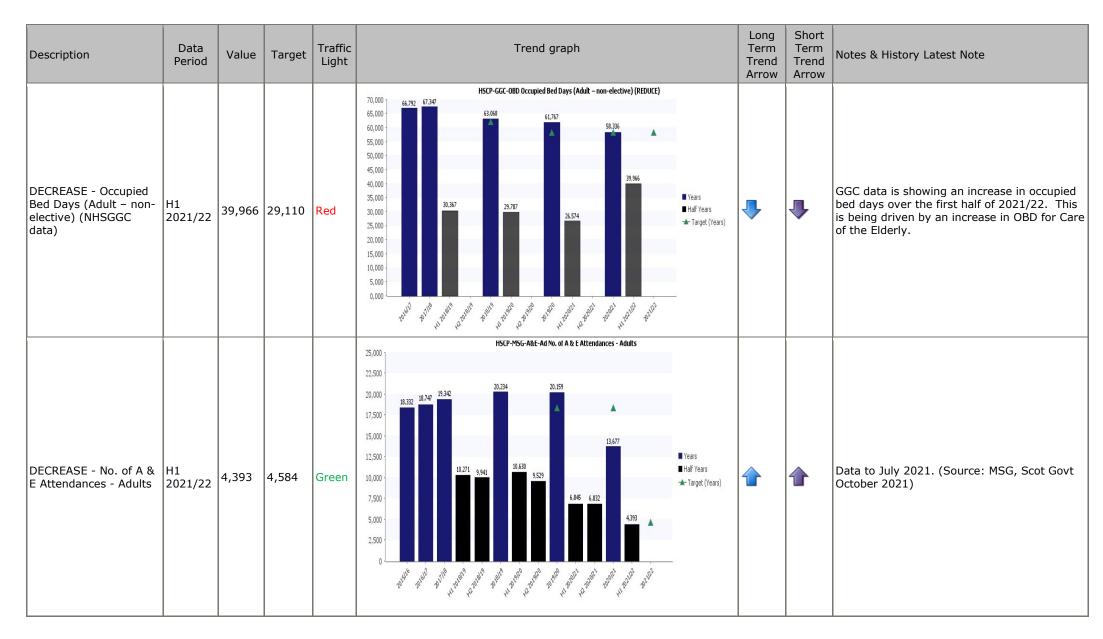
3. Working together to	support	mental	health a	and well	-being			
Description	Data Period	Value	Target	Traffic Light	Trend graph	Long Term Trend Arrow	Short Term Trend Arrow	Latest Note
INCREASE - Percentage of people waiting no longer than 18 weeks for access to psychological therapies	H1 2021/22	73%	90%	Red	HSCP-LDP1718 Psychological therapies - Percentage of people waiting no longer than 18 weeks for access (INCREASE) 100% 90% 60% 60% 50% 40% 50% 10% 20% 10% 10% 10% 10% 10% 10% 10% 1		•	Quarter 2 performance shows 74% of individuals waiting for psychological therapies are receiving treatment within the 18 week target. Waiting times are being closely monitored on a weekly basis and showing early signs of improvement on the 2020-21 annual figure (74%). An action plan is being progressed including identifying and prioritising the longest waits, offering remote appointments via NHS Attend Anywhere and securing increase in psychology staffing resource.
Percentage of people with alcohol and/or drug problems accessing recovery-focused treatment within three weeks.	H1 2021/22	97.0%	90.0%	Green	HSCP-ADP-05 Clients will wait no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery.		1	July - September 2021 shows 97% clients had less than 3 weeks wait time to treatment showing a strong performance from the team and continuing the improvements achieved in 2020-21. Note this is based on management information at the current as we await formal reporting function to be launched from the new national DAISy (Drug and Alcohol Information System) database.

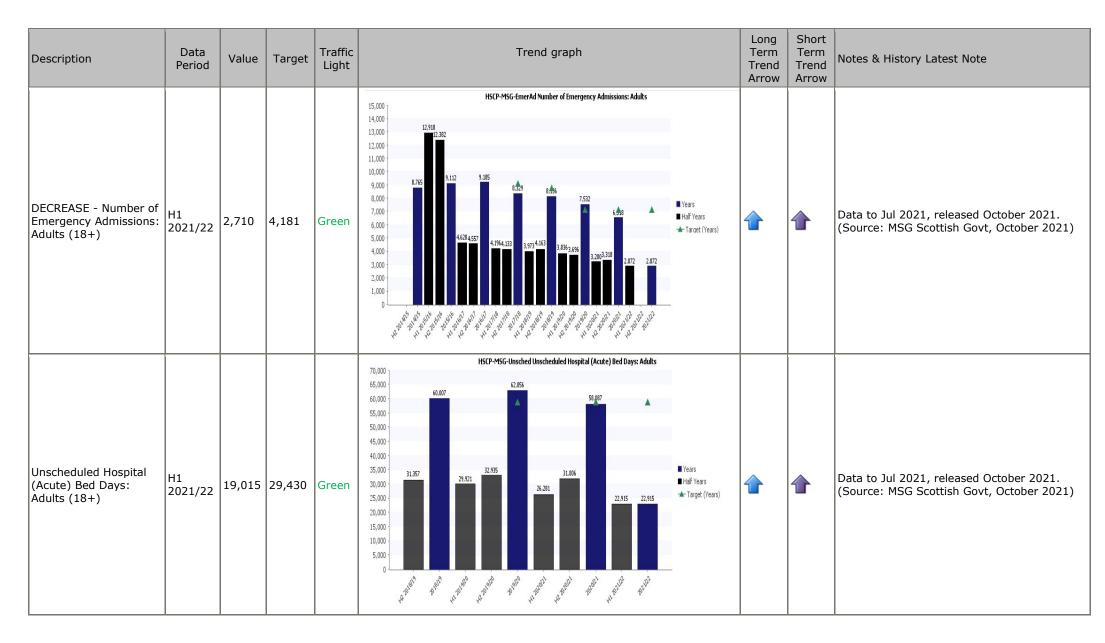
4. Working together to	o meet pe	ople's h	ealthca	re need	S			
Description	Data Period	Value	Target	Traffic Light	Trend graph	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
DECREASE - people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting including AWI (ISD data)	H1 2021/22	12	0	Red	HSCP-HWB0-DD3 Delayed discharges (ISD data): Adults waiting more than 3 days to be discharged from hospital into a more appropriate care setting (REDUCE)	•	•	Data to September 2021, average monthly figure compared to 5 at mid year 2020/21. (Source: Public Health Scotland Sep 2021). We have seen recent increases in delayed discharges driven by the pressure on care at home services which is restricting access. A majority of care at home provision in East Renfrewshire is delivered by partner providers and we are seeing limited capacity among providers. We have also experienced significant issues around supporting 'adults with incapacity' and establishing appropriate guardianship/Power of Attorney arrangements.
DECREASE - Delayed discharges (ISD) bed days lost to delayed discharge (REDUCE)	H1 2021/22	2,256	946	Red	HSCP-HWB0-DD-ALL Delayed discharges (15D) bed days lost to delayed discharge for adults (incl AWI's) (REDUCE)	•	•	Data to September 2021. (Source: Public Health Scotland Sep 2021)

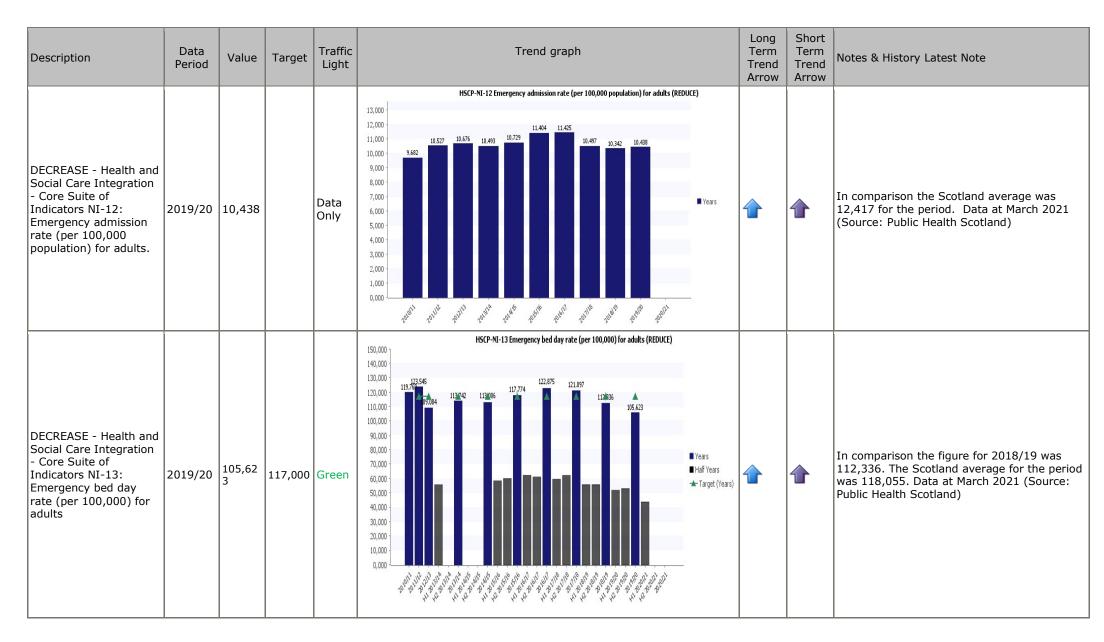


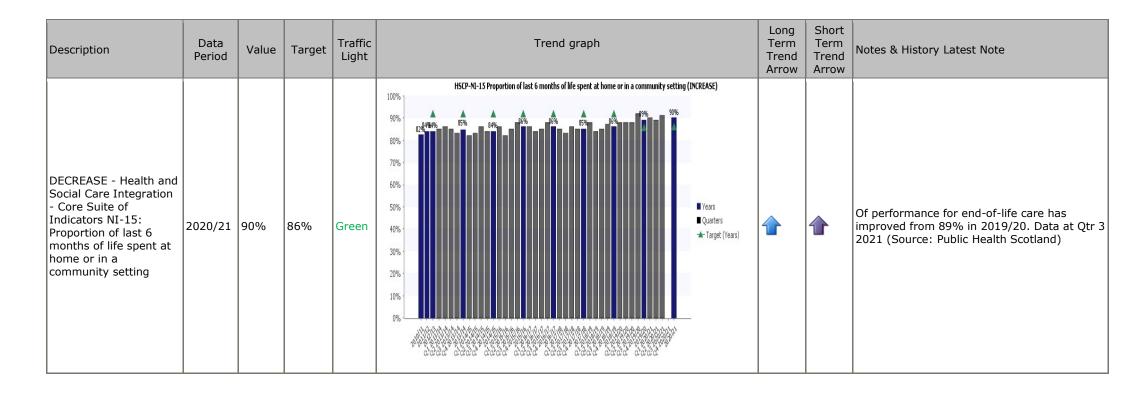






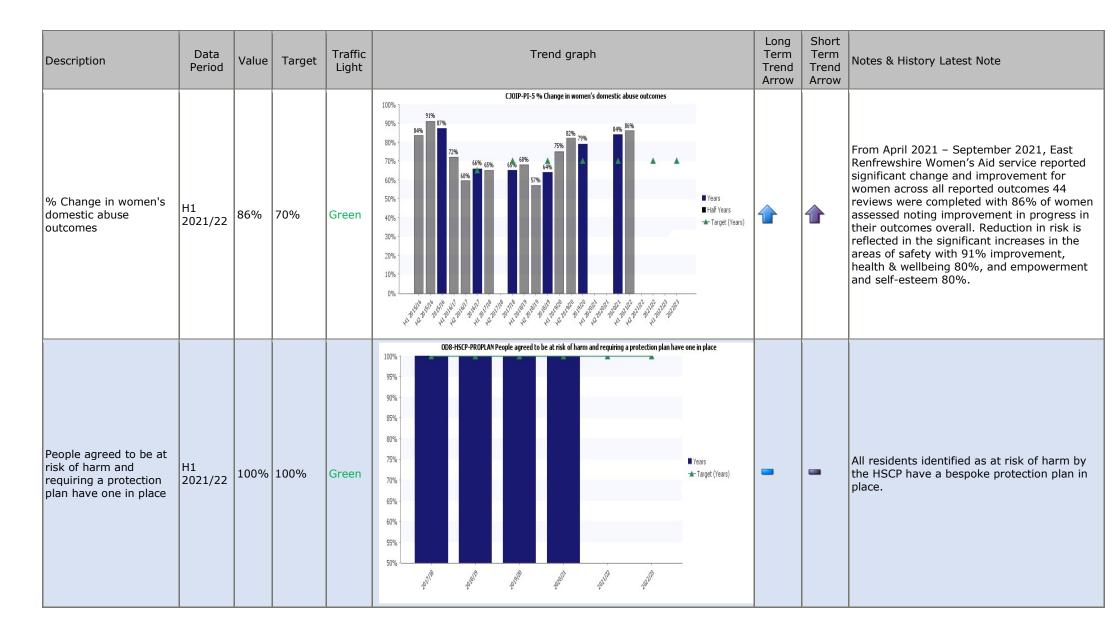


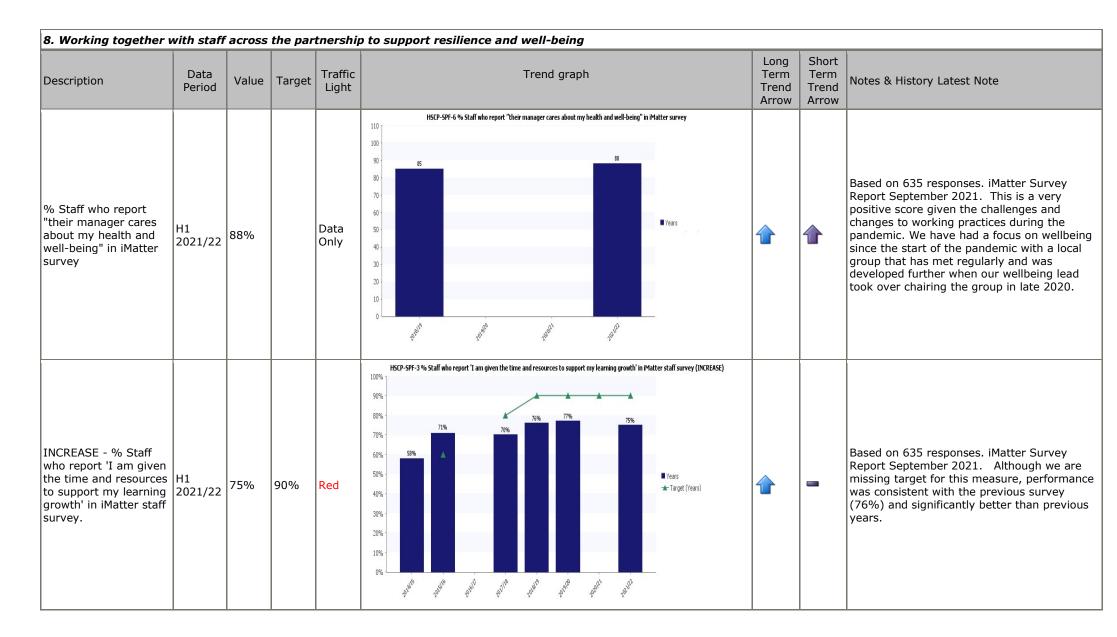


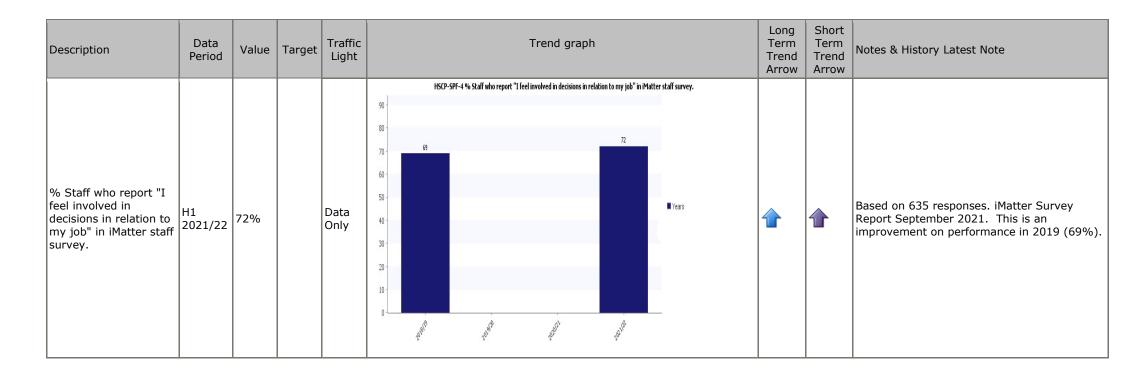


5. Working together w	vith carers	s to be a	able to e	exercise	choice and control			
Description	Data Period	Value	Target	Traffic Light	Trend graph	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
INCREASE - Health and Social Care Integration - Core Suite of Indicators NI-8: Total combined % carers who feel supported to continue in their caring role.	2019/20	35%		Data Only	HSCP-NI-8 Total combined % carers who feel supported to continue in their caring role (INCREASE)	•		Although our performance declined slightly from 37% (2017/18) we perform better than the Scotland figure for the period which was 34%. Both East Renfrewshire and national figures have fallen on the previous Survey figures. Latest data at October 2021. Source : Public Health Scotland (Health and Care Experience Survey 2019/20)
	H1 2021/22	97%	73%	Green	HSCP-TP-7 People reporting 'quality of life for carers' needs fully met (%) (INCREASE)			In the first two quarters of 2021/22 the performance figure was 97%. This is comparable to the previous Quarter 4 (98%) figure.

6. Working together w	ith our pa	artners	s to supp	ort peop	le to stop offending			
Description	Data Period	Value	Target	Traffic Light	Trend graph	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
INCREASE - Community Payback Orders - Percentage of unpaid work placements commencing within 7 days	H1 2021/22	42%	80%	Red	CJOIP-PI-6b Community Payback Orders - Percentage of unpaid work placements commencing within 7 days 100% 90% 90% 90% 90% 90% 90% 90%	•		Average of first two quarters 2021/22. There was significant disruption to CPO activity as a result of Covid-19.
INCREASE - Community Payback Orders - Percentage of unpaid work placement completions within Court timescale.	H1 2021/22	70%	80%	Red	LUP-PI-ba Lommunity Payback Urders - Percentage of unpaid work placement completions within Lour timescales (IPLREASE)	•	₽	Average of first two quarters 2021/22. There was significant disruption to CPO activity as a result of Covid-19, with a much lower completed within the year. We have increased our capacity to deliver Unpaid Work (UPW) by focusing on outdoor work activities as this allows us to ensure social distancing is maintained. We have increased the number of supervisors available to support service users.







9. Organisational outcomes 9.1 Our customers Short Long Trend graph Traffic Light Data Term Term Target Notes & History Latest Note Value Description Period Trend Trend Arrow Arrow HSCP-NI-4 Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated (INCREASE) 100% 90% INCREASE - Health 80% and Social Care 70% Integration - Core 60% Suite of Indicators NI-60% Up from 60% in previous survey (2017/18). 4: Percentage of 50% Scotland figure for period 74%. Data at July Years Data adults supported at 2019/20 61% 📥 Target (Years) 40% 2021. Source: Public Health Scotland (Health Only home who agreed that and Care Experience Survey 2019/20) 30% their health and social 20% care services seemed to be well co-10% ordinated 0% 013/14 and area area and a sure and a sure 9.2 Efficiency

Description	Data Period	Value	Target	Traffic Light	Trend graph	Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
INCREASE - Payment of invoices: Percentage invoices paid within agreed period (30 days)	H1 2021/22	72.8%	90%	Red	CHCP-IN02 Payment of invoices: Percentage invoices paid within agreed period (30 days) (INCREASE)	♣	1	Although our invoice processing performance shows an improvement compared to 2020/21, we continue to miss target. COVID has impacted the team both in terms of new ways of working, but more recently in terms of staff capacity.

9.3 Our people								
Description	Data Period	Value	Target	Traffic Light		Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
DECREASE - Percentage of days lost to sickness absence for HSCP NHS staff	H1 2021/22	7.2%	4.0%	Red	HSCP-AB05d Sickness absence (%) NH5 (REDUCE)	♣	₽	We have seen a significant increase in NHS sickness absence from June 2021 onwards with a significant amount of long term absence (5.94% at September 2021). In East Ren the actual numbers are low with 20 LT cases in September. The reasons for this are complex. Within our LD hosted service there are 3 cases that involve critical ill health. Absences are monitored at DMT on a monthly basis and the HR Advice and Support unit are providing additional support. Within LD hosted service monthly absence panels take place and the HR Advice and Support Unit have a dedicated advisor to support. During October, seven of the staff members have returned to work and two are no longer employed therefore we anticipate absence levels to improve in October and November.
DECREASE - Sickness absence days per employee - HSCP (LA staff)	Q1 2021/22	3.6	3.1	Red	HSCP-LA-Abs Absence - HSCP (ERC Staff) (REDUCE)	•	•	Q1 absence is below both 2020 and 2019 levels. (n.b. Q2 data not available at end Oct 21). From our own monthly monitoring at DMT we anticipate the corporate PI to rise given: More short term absence due to lack social distancing and viruses within community; Stress Anxiety levels due to burn out of employees from the pandemic. National research from workforce planning estimated PTSD to be around 18 months post pandemic; Delay in treatment for long term conditions and surgery as a result of the pandemic. These issues have been evident within our Care at Home workforce - the largest workforce within HSCP. Absence levels were high in June July and August mixture of LT absence and short term due to viruses etc. with lifting of restrictions and more mixing of people. Care at Home has a focus from the Councils Case Management Team. The Service are working with HR to develop an

Description	Data Period	Value	Target	Traffic Light								Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
														action plan to improve performance.
INCREASE - iMatter Response Rate - HSCP	H1 2021/22	61%		Data Only	100% - 90% - 80% - 60% - 50% - 40% - 30% - 20% - 10% -	66%	71%	67%	er Response Rate - H5Cl	61%	■ Years ★ Target (Years)	•		Decline in response (from 67% in 2019) was to be expected due to the pressures on staff in responding to the Covid pandemic.

Description	Data Period	Value	Target	Traffic Light							Long Term Trend Arrow	Short Term Trend Arrow	Notes & History Latest Note
INCREASE - iMatter Employee Engagement Index (EEI) score - HSCP	H1 2021/22	78%		Data Only	100% 90% 70% 60% 50% 40% 30% 20% 10% 72 ³ 1 [®]	71%	67%	Response Rate - HSCP	(INCREASE)	■ Years ★ Target (Years)			Our EEI score increased from 75 in 2019 to 78 in 2021. This was a very positive result in the context of continuing pressure on staff during the pandemic.
INCREASE - Percentage of staff with an electronic Knowledge and Skills Framework review recorded on TURAS Appraisal System	H1 2021/22	33%	80%	Red	100% 90% - 80% - 70% - 66% - 66% - 66% - 66% - 40% - 20% - 10% - 20% - 20% - 20% -	71%	CP-SP18-8.1.1 iMatter	Response Rate - HSCP	(INCREASE)	■ Years ★ Target (Years)	•		The compliance is low however anecdotally we know that managers have been having wellbeing conversations within their KSF and Quality Conversation discussions. There has been capacity issues with staffing pressures over the last few months and managers have been asked to ensure record of KSF conversation is updated. We have a new work plan to improve KSF compliance across services.

Indicators with no update at Mid-Year 2021-22

Children and Families

Percentage of children looked after away from home who experience 3 or more placement moves Accommodated children will wait no longer than 6 months for a Looked After Review meeting to make a permanence recommendation Balance of Care for looked after children: % of children being looked after in the Community (LBGF) % Child Protection Re-Registrations within 18 months % Looked After Children with more than one placement within the last year (Aug-Jul). (LGBF)

Supporting independence

Number of people self-directing their care through receiving direct payments and other forms of self-directed support. NI-18: The number of adults (18+) receiving personal care at home or direct payments for personal care, as a percentage of the total number of adults needing care. Direct payments spend on adults 18+ as a % of total social work spend on adults 18+ (LGBF) Percentage of people aged 65+ with intensive needs (plus 10 hours) receiving care at home. (LGBF)

Mental health and wellbeing

% of service users moving from treatment to recovery service. Mental health hospital admissions (age standardised rate per 1,000 population) Achieve agreed number of screenings using the setting-appropriate screening tool and appropriate alcohol brief intervention, in line with SIGN 74 guidelines.

Meeting people's healthcare needs

Health and Social Care Integration - Core Suite of Indicators NI-21: Percentage of people admitted to hospital from home during the year, who are discharged to a care home

Criminal justice

Criminal Justice Feedback Survey - Did your Order help you look at how to stop offending? % Positive employability and volunteering outcomes for people with convictions.

Tackling health inequalities

Male life expectancy at birth Female life expectancy at birth Male life expectancy at birth in 15 per cent most deprived communities Female life expectancy at birth in 15 per cent most deprived communities Breastfeeding at 6-8 weeks in 15% most deprived SIMD data zones. Health and Social Care Integration - Core Suite of Indicators NI-11: Premature mortality rate per 100,000 persons aged under 75. (European age-standardised mortality rate)

Organisational measures

Average time in working days to respond to complaints at stage one (HSCP) Average time in working days to respond to complaints at investigation (stage 2 and esc combined) (HSCP) Percentage of HSCP (NHS) complaints received and responded to within timescale (5 working days Frontline, 20 days Investigation) Percentage of HSCP (local authority) complaints received and responded to within timescale (5 working days Frontline; 20 days Investigation) The total number of complaints received - HSCP NI-17: Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections NI-5: Total % of adults receiving any care or support who rated it as excellent or good. NI-6: Percentage of people with positive experience of the care provided by their GP Practice. NI-7: Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their guality of life NI-9: Percentage of adults supported at home who agreed they felt safe. NI-20: Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency Expenditure on end of life care, cost in last 6 months per death The gross cost of "children looked after" in residential based services per child per week £ (LGBF) The gross cost of "children looked after" in a community setting per child per week £ (LGBF) Older Persons (Over65) Home Care Costs per Hour (LGBF) The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF) Health and Social Care Integration - Core Suite of Indicators NI-10: Percentage of staff who say they would recommend their workplace as a good place to work

% of teams with an iMatter Action Plan in place - HS