



Meeting of East Renfrewshire Health and Social Care Partnership	Performance and Audit Committee
Held on	16 March 2022
Agenda Item	7
Title	Performance Report 2021-22: Quarter 3

Summary

This report provides Performance and Audit Committee with an update on progress against our strategic performance measures for the period Quarter 3 2021/22. The performance measures were developed to monitor progress in the delivery of the priorities set out in the HSCP Interim Strategic Plan 2021-2022. Where data is available for Quarter 3 this is included (along with any previously unavailable updates for earlier periods). The report also includes proposals for review of strategic performance reporting to support the monitoring of the new HSCP Strategic Plan 2022-25.

Presented by	Steven	Reid,	Policy,	Planning	and	Performance
Fresented by	Manage	r				

Action Required

Performance and Audit Committee is asked to note and comment on the Quarter 3 2021-22 Performance Report and the proposed approach to reviewing performance reporting.



EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

16 March 2022

Report by Chief Officer

PERFORMANCE REPORT 2021-22: QUARTER 3

PURPOSE OF REPORT

1. This report provides Performance and Audit Committee with the performance measures developed to monitor progress in the delivery of the strategic priorities set out in the HSCP Interim Strategic Plan 2021-2022. Where data is available for Quarter 3 (October to December 2021) this is included (along with any previously unavailable updates for earlier periods). Indicators included in our strategic performance framework but without data updates for Quarter 3 are listed at the end of the report. The paper also sets out the planned approach for reviewing our strategic performance reporting to support the monitoring of the new HSCP Strategic Plan 2022-25

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the Quarter 3 2021-22 Performance Report and the proposed approach to reviewing performance reporting.

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. During the Covid-19 pandemic period, reporting shifted to six-monthly. This is the first quarterly report to be presented to the committee since March 2020.

REPORT

- 4. The report includes data for Quarter 3 (October to December 2021) and any earlier data for indicators from our Interim Strategic Plan that have not previously been reported to the Committee. The report provides charts for all measures. It presents each measure with a RAG status in relation to the target for the reporting period (where a target is set), along with long-term and short-term trend arrows and commentary on performance. Many of the data trends continue to reflect the unique circumstances faced by services over the course of the Covid-19 pandemic.
- 5. 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 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
- 6. The final section of the data report contains a number of organisational indicators relating to our staff and customers.
- 7. Appendix 1 contains a list of the performance measures that will be included in the end of year report for which Quarter 3 data is not available.

Headline performance summary

- 8. The data shows that despite the continuing pressures exacerbated by the pandemic, there has been strong performance across service areas. Staff continue to work tirelessly during particularly challenging circumstances.
- 9. Our children's services continue 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 higher demand for care and support and more children coming under child protection.
 - Despite growing demand, latest data (Q2) shows that more children and young people subject to child protection are being offered **advocacy** support (62% up frow 45% in previous quarter).
 - We continue to miss our **CAMHS** waiting times target. This reflects current demand pressures with a 25% increase in CAMHS referrals and a notable increase in urgent referrals to CAMHS (up from 15% to 30% of total caseloads). However, during Q3 we have seen improvement with reduced numbers waiting 18 weeks and reduced 'longest waiting times' during December 21.
- 10. During the reporting period we 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.
 - 88% of people reported that their 'living where you/as you want to live' needs were being met up slightly from the previous quarter
 - National reporting (Local Government Benchmarking Framework LGBF) shows steady improvement in the % of people aged 65+ with **intensive support needs** receiving care at home at 62%, up from 57%
- 11. Demand remains high across our mental health and addiction recovery services due to increases in complexity. Ongoing support and access to treatment been maintained throughout the pandemic period.
 - Although we are missing our target for waiting times to access **psychological therapies** we are seeing steady improvement increasing from 72% waiting less than 18 weeks in Q1 to 80% at Q3. As we work to meet target we will continue to implement our action plan including prioritising the longest waits, offering remote appointments via NHS Attend Anywhere and increasing our psychology staffing resource.

- We are ahead of target for the % of people with alcohol and/or drug problems accessing recovery-focused treatment within three weeks at 98% for Q3, up from 92% in the previous quarter.
- 12. Patterns of accident and emergency and unplanned hospital admissions were significantly altered by the pandemic. During 2021-22, for a number of measures we have seen performance moving back towards pre-pandemic levels, but we continue to perform ahead of our targets for unplanned hospital use.
 - For Q3, accident and emergency **attendances** and unplanned **admissions** both remain below target. Local (NHSGGC) and national (Ministerial Steering Group MSG) data showed moderate increase on the same quarter last year.
 - Emergency **attendances and admissions from care homes** also remained within target with similar performance to Q3 in the previous year.
 - Our weekly average for **delayed discharges** has improved since the previous quarter (6 down from 10). Delays remain a significant area of focus for the HSCP having seen access restricted by pressures on care at home services, and impacts from higher levels of 'adults with incapacity 'cases. The Hospital to Home team work to deliver timely and appropriate discharges from hospital.
 - Latest national data shows that our performance for **end-of-life care** continues to improve with the proportion of last 6 months of life spent at home or in the community at 90% (2020-21 up from 89% for the previous year).
- 13. During the reporting period we have continued to work with East Renfrewshire Carers Centre to ensure that carers have access to necessary support and guidance.
 - Although we remain ahead of target the % of people reporting that their **'quality of life for carers'** needs are being met fell from 97% to 83% from the previous quarter, although this may reflect the comparatively low number of people surveyed during Q3.
- 14. The provision of unpaid work has been significantly impacted by the pandemic with Community Payback Orders (CPOs) suspended on 23rd March 2020. As we commenced our recovery from the pandemic we have seen significant improvement in performance on completion of CPOs. This follows activity to increase the number of supervisors available to support service users as well as building our capacity to deliver by focusing on outdoor work activities during 2021-22.
 - The percentage of **unpaid work placement completions** within Court timescale is now at 90% rising steadily from 60% in Q1 and 79% in Q2 and now ahead of target.
- 15. The performance against our organisational outcomes during Quarter 3 continues to reflect the context of significant operational pressures during the pandemic period.
 - Staff **sickness absence** continued to miss target but for NHS staff improved in Q3 compared with the previous quarter. Q3 data is not yet available for ERC staff. Higher levels of absence at Q2 reflected the continuing impact of the Covid pandemic on the workforce.
 - In Q3 we missed our target for **complaints response timescales**. Performance was weakest in relation to NHS complaints, mainly due to the complex nature of the investigation stage complaints (where extensions were agreed with complainants in most cases)
 - We have also missed our target for the **payment of invoices** within 30 days, principally due to staff capacity.

Strategic Reporting Review – Strategic Plan 2022-25

16. As previously discussed with the Performance and Audit Committee we recognise that current performance report is at a fixed point and is retrospective and there is scope for improvement. Development work to improve our strategic performance reporting has

slowed as we concentrated on our response and recovery from the pandemic. The development of the new HSCP Strategic Plan for 2022-25 is an opportunity for refreshment to our performance framework and performance reporting to the committee and elsewhere. In the past year we have increased our Business Analyst capacity which will support us to strengthen performance management and ensure a high quality and consistent approach to reporting.

- 17. We intend for the review to be conducted in close collaboration with members of the Performance and Audit Committee to ensure reporting meets expectations. We propose the following steps for the review:
 - In line with the production of delivery plans for the new Strategy we will revise all strategic Performance Indicators and targets going forward. We would expect this to include streamlining of indicators in some areas including unscheduled care and addition of indicators relevant to our recovery from the pandemic. The suite of indicators and targets will be presented to the PAC for approval.
 - We will hold an initial session with PAC Chair to consider new reporting formats in line with best practice examples. We propose more 'forward looking' presentation of data including projected performance against target trajectories for future reporting periods. Commentaries will include a focus on indicators where we are missing/moving away from target and activity to improve performance.
 - We will present a draft of the new reporting format to PAC members for consideration at a future meeting of the committee, or a separate development sessions if considered appropriate.
 - Performance reporting is a shared responsibility across service areas. We will produce brief, HSCP-specific guidance to support the performance framework. This will reiterate expectations on updating of performance data (including clear presentation of figures) and best practice for provision of accompanying commentaries. The guidance will set out timescales for the annual reporting cycle, including deadlines for data/commentary updates and management sign-off.

RECOMMENDATIONS

18. Performance and Audit Committee is asked to note and comment on the Quarter 3 2021-22 Performance Report and the proposed approach to reviewing performance reporting.

REPORT AUTHOR AND PERSON TO CONTACT

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March 2022

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

HSCP Mid-Year Performance Update 2021-22, Performance and Audit Committee, 24 November 2021 <u>https://www.eastrenfrewshire.gov.uk/media/7168/PAC-Item-09-24-November-</u> 2021/pdf/PAC_Item_09_-_24_November_2021.pdf?m=637729133123170000

HSCP Annual Performance Report 2020/21, Performance and Audit Committee, 22 September 2021 <u>https://www.eastrenfrewshire.gov.uk/media/6841/PAC-item-06-22-September-</u> 2021/pdf/PAC_item_06_- 22_September_2021.pdf?m=637673822300770000

99 Strategic Plan Performance Report Quarter 3, 2021-22

Report Author: Ian Smith/Steven Reid, March 2022

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).

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

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



EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP







2. Working together with people to maintain their independence



Description	Last Update		Current Target		Trend Graph	Term Trend	Short Term Trend Arrow	Latest Note
INCREASE - Self Directed Support spend on adults 18+ as a % of total social work spend on adults 18+	2020/21	8.69%		Data Only	Sw02 Self Directed Support spend on adults 18 + as a % of total social work spend on adults 18 + (INCREASE)			This is the latest available data for this indicator. We continue to perform well on this measure, % spend on SDS continued to improve (up from 8.44% for 2019/20) This compares to a national average of 8% (Source: Improvement Service March 2022)
INCREASE - Percentage of people aged 65+ with intensive needs (plus 10 hours) receiving care at home.	2020/21	62.2%	62.0%	Green	SW03a % of people aged 65 or over with long term care needs receiving personal care at home (LGBF)			The LGBF data shows that our performance has improved slightly compared with the previous year (57.6%). This compares to a national average of 61.7% The provision of quality care at home to support people to live independently and well in their own homes remains a key priority for the partnership and ongoing improvement of our care at home services continues. (Source: Improvement Service March 2022)





4. Working together to meet people's healthcare needs



























9. Organisational outcomes

9.1 Our customers







9.2 Efficiency									
Description	Last Update	Current Value	Current Target	Traffic Light	Trend Graph	Long Term Trend Arrow	Short Term Trend Arrow	Latest Note	
INCREASE - Payment of invoices: Percentage invoices paid within agreed period (30 days)	Q3 2021/22	75.7%	90%	Red	CHCP-IN02 Payment of invoices: Percentage invoices paid within agreed period (30 days) (INCREASE)	♣		Data at end of December 2021. Although our invoice processing performance shows an improvement compared to 2020/21, we continue to miss target. Staff absence has impacted the team both in terms of new ways of working, but more so in terms of staff capacity.	
Older Persons (Over65) Home Care Costs per Hour	2020/21	£37		Data Only	SW01 Home care costs for people aged 65 or over per hour £ (REDUCE)	♣	₽	Latest available data at March 2022 shows East Renfrewshire's figure (£37) was above the national average of £28 in 2012/21 and we had the highest hourly costs in our LGBF family group with the exception of the Orkney and Shetlands Islands (Source: Improvement Service 2022)	









Appendix 1

Indicators with no update at Quarter 3, 2021-22

Children and Families

Percentage of children looked after away from home who experience 3 or more placement moves Balance of Care for looked after children: % of children being looked after in the Community (LGBF) % Child Protection Re-Registrations within 18 months (LGBF)

% Looked After Children with more than one placement within the last year (Aug-Jul). (LGBF)

Supporting independence

Percentage of those whose care need has reduced following re-ablement / rehabilitation Number of people self directing their care through receiving direct payments and other forms of self-directed support.

Percentage of people aged 65+ who live in housing rather than a care home or hospital Percentage of adults supported at home who agreed that they are supported to live as independently as possible (NI-2)

Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided (NI-3)

Recovery / Mental health and wellbeing

Mental health hospital admissions (age standardised rate per 1,000 population) % of service users moving from treatment to recovery service.

Achieve agreed number of screenings using the setting-appropriate screening tool and appropriate alcohol brief intervention, in line with SIGN 74 guidelines.

Supporting carers

Total combined % carers who feel supported to continue in their caring role (NI-8)

Community Justice

Criminal Justice Feedback Survey - Did your Order help you look at how to stop offending? Community Payback Orders - Percentage of unpaid work placements commencing within 7 days % Change in women's domestic abuse outcomes

% Positive employability and volunteering outcomes for people with convictions.

Supporting staff wellbeing

% Staff who report 'I am given the time and resources to support my learning growth' in iMatter staff survey.

% Staff who report "I feel involved in decisions in relation to my job" in iMatter staff survey. % Staff who report "their manager cares about my health and well-being" in iMatter survey Number of people participating in community based health improvement programmes

Organisational outcomes

iMatter Response Rate - HSCPiMatter Employee Engagement Index (EEI) score - HSCP% of teams with an iMatter Action Plan in place - HSCP