

North Lanarkshire Council Report

Adult Health and Social Care Committee

Agenda item ___ approval noting

Ref RMcG/MF Date 14/02/19

Adult Social Care Performance Report – Quarter 2 2018/19

From Interim Chief Officer, Health & Social Care

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Executive Summary

The purpose of the report is to provide an update to the Committee on the areas for improvement which have been identified as part of the Chief Executive Quarterly Performance Review for the period 1 July 2018 to 30 September 2018 (Quarter 1).

Recommendations

Committee members are asked to:

- i) Note the contents of the report
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Supporting Documents

Appendix 1 Social Work Dashboard

Appendix 2 Areas for Improvement (Quarter 2, July - September 2018)

1. Background

- 1.1 The Chief Officer has joint quarterly performance review meetings with the Chief Executive of NHS Lanarkshire and the Chief Executive of North Lanarkshire Council. These meetings are supported by a Chief Executive Performance Framework comprising a range of performance measures from across both health and social work systems, including relevant targets and trajectories.
 - 1.2 Based on a traffic-light system there are areas for improvement identified within the performance framework each quarter for those that are flagged as Red or Amber. The performance review meetings are used as a means for jointly agreeing corrective actions.
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2. Report

- 2.1 The purpose of the report is to provide an update to the Sub Committee on the areas for improvement which have been identified as part of the Chief Executive Quarterly Performance Review for the period 1 July 2018 to 30 September 2018 (Quarter 2).
 - 2.2 The performance data for Quarter 2 and associated trend information is included as Appendix 1.
 - 2.3 Areas for improvement and planned actions are agreed and developed on an exception basis (i.e. for those indicators which are amber or red, based on tolerance thresholds). These are detailed as Appendix 2 of this report.
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3. Equality and Diversity

3.1 Fairer Scotland

This report does not adversely impact the delivery of the Fairer Scotland Duty.

3.2 Equality Impact Assessment

There is no requirement to carry out an Equality Impact Assessment in relation to this report.

4. Implications

4.1 Financial Impact

There are no immediate financial implications of this report

4.2 HR/Policy/Legislative Impact

None

4.3 Environmental Impact

None

4.4 Risk Impact

None

4. Measures of success

- 4.1 Measures of success are contained within Appendix 1 of this report.
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Ross McGuffie
Interim Chief Officer
Health & Social Care North Lanarkshire

Appendix 1 – Social Work Dashboard

PLEASE NOTE FOR ALL INDICATORS UPWARDS ARROWS ↑ DENOTE POSITIVE PERFORMANCE

Outcome (National Health & Wellbeing)	Ref.	KPI	Target / Indicator 2018/19	2017/18 Q3	2017/18 Q4	2018/19 Q1	2018/19 Q2	Performance Compared to Previous Quarter	Performance Compared to Same Quarter Previous Year	Current Performance
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonable practicable, independently and at home or in a homely setting in their community	2.1	Assistive Technology - Number Of People With Technology (0-17 yrs)	1,452	48	48	50	53	↑	↑	GREEN
		Assistive Technology - Number Of People With Technology (18-64yrs)		589	591	597	597	↔	↑	
		Assistive Technology - Number Of People With Technology (65+)		773	760	799	823	↑	↑	
	2.2	Reablement - Number Of People Completing Reablement Process	2000	1332	1804	480	942	↓	↑	AMBER
	2.3	Reablement - % Of New or Increased Home Support Packages Which Are Reablement	70%	55.8%	53.8%	59.3%	60.2%	↑	↑	RED
	2.4	Reablement - % Of People With No Home Support Service Required At End Of Process	50%	45.7%	43.4%	44.0%	41.0%	↓	↑	RED
	2.5	Home Care - No. People 65+ Receiving 10+ hrs Per Week Per 1000 Popn	24.0	22.2	23.0	22.6	22.6	↔	↓	AMBER
	2.6	Balance Of Care - % Of People (Age 65+)	45%	46.7%	48.2%	47.8%	47.1%	↓	↑	GREEN
2.7	IEAS - % Deliveries Achieved Within 7 Working Days Quarterly	80%	77.6%	74.4%	77.0%	78.4%	↑	↓	AMBER	
4. Health and social care services are centred on helping to maintain or improve the quality of life of	4.1	Care Home Placements At End Of Quarter - Per 1000 Popn 65+	24	23.1	22.7	22.8	23.3	↓	↑	GREEN
	4.2	Care Home Placements At End Of Quarter - Per 1000 Popn 75+	50	47.9	46.8	47.0	48.1	↓	↑	GREEN

people who use those services	4.3	Care Home - Average Length of Stay	865	900.7	995.7	846.5	960.4	↓	↓	RED
	4.4	Number Of People With Self Directed Support	1000	954	969	980	1011	↑	↑	GREEN
	4.5	Number Of People With A Direct Payment	240	224	226	232	231	↓	↑	AMBER
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact on their caring role on their own health and wellbeing	6.1	Community Alarm Service Users 75 Years And Over Per 1000 Population	Under Review	262.8	269.3	263.2	254.3	262.8	269.3	
7. People who use health and social care services are safe from harm	7.1	% Of Adult Protection Referrals Passed To Care Team For Investigation	20%	18.1%	15.7%	22.5%	21.9%	↓	↑	GREEN
	7.2	% Of Adult Protection Investigations Going To Initial Case Conference	20%	16.5%	14.5%	15.3%	16.4%	↑	↓	AMBER
	7.3	Adult Protection - % Of Referrals With Decision Within 5 Days	60%	65.0%	56.7%	71.7%	70.4%	↓	↑	GREEN
	7.4	% of Adult Protection Referrals Which Did Not Go On To Investigation Or Other Service	50%	53.1%	53.3%	51.8%	45.2%	↑	↑	GREEN
9. Resources are used effectively and efficiently in the provision of health and social care services	9.1	Breakeven Position - YTD Variance (NLC)	>=0	1.308m	4.417m	0.072m	0.114m	↑	↑	GREEN
	9.2	Sickness Absence (NLC) - days lost per person	9.67	8.92	12.26	3.29	6.41	↑	↓	RED

Appendix 2 – Areas for Improvement (Quarter 2, July – September 2018)

1.	Reablement / Home Support (Ref 2.2 – 2.5) <p>The number of people supported and completing the reablement process by the end of quarter was slightly below our anticipated trajectory of 1,000 people with 942 people supported. This figure is higher than the same period of last year and reflects the additional reablement capacity within local teams, while we recognise there is more to do in increasing this capacity.</p> <p>We have an ambitious target of ensuring 70% of new service users or those with an increased package of care are directed through our reablement teams. Performance for Q2 stood at 60.2% which is the third quarter in a row where the proportion has increased. Again, we recognise there is more to do and efforts are focused on ensuring we reach 70% by the end of the financial year.</p> <p>The percentage of people requiring no home support at the end of reablement dropped slightly in the most recent quarter, with a small increase in the percentage of people requiring a reduced level of support. Overall, 70% of people supported through reablement required a reduced level of support or no further support at all.</p>
2.	Care Homes Length of Stay (Ref 4.3) <p>The average length of stay for care home discharges increased from Q1 to Q2, however, the cumulative total average length of stay for the year-to-date, remains below 900 days. Length of stay figures can be subject to fluctuation from quarter to quarter, however, over an annual period we would expect a slight decrease in the average length of stay and there is scope for this to be realised by year end.</p>
3.	Sickness Absence (Ref 9.2) <p>Health and Social Work Managers for each of the 6 localities continue to have monthly meetings to monitor and overview absence levels and management action to address issues across both Health and Social Work.</p> <p>In NLC, we are working with the Employee Service Centre to ensure timely reports on levels and reasons for absence and also on the level of management action are developed. We are also working with the Employee Relations team to ensure any learning on attendance management can be gained across the organisation. It is anticipated that improvements in absence levels will be realised in Q4 of 2018/19 and into the next financial year.</p>