
To: Renfrewshire Integration Joint Board

On: 20 January 2017

Report by: Chief Officer

Subject: Performance Management Update - Exception Reports

1. Summary

1.1 It has been agreed that an update on performance will be presented at all IJB meetings. The full Scorecard updating all performance measures will be presented twice yearly, with the last one being reported at the 25 November 2016 meeting.

1.2 This report provides an update on four exception areas:

- Podiatry – 95% of patients presenting with diabetic active foot disease will be seen by a member of the Multi-Disciplinary Team within 48 working hours.
- Podiatry – 90% of new referrals to the service will be appointed within 4 weeks.
- Carers – 185 carers' assessments completed over a 12 month period.
- Occupational Therapy – the average number of clients on the Occupational Therapy waiting list is not to exceed 350.

2. Recommendation

It is recommended that the IJB:

2.1 Note the updates on performance in Podiatry, Carers and Occupational Therapy.

2.2 Note that the next full Scorecard updating all performance measures will be presented at the 23 June 2017 meeting.

3. Exception Reporting

Background

3.1 An exception report on two health measures and two social work measures are included in this report.

3.2 Detailed exception reports are included in Appendix 1.

3.3 **Red status indicators**

It has proved difficult to achieve the target number of carers' assessments over the last five years. Formal assessments are part of the Single Shared Assessment but often carers receive support and advice which meets their needs, and a formal assessment is refused. We aim to take account of carers' views and to support them in their role and will work with carers to agree a better measure to capture this progress.

In the meantime, we will continue to offer and promote carers' assessments. A new adult carer support worker will support this work.

For the first time since 2014/15, we have failed to meet target for the occupational therapy waiting list in Quarter 2 of 2016/17. This is primarily due to increasing demand. Remedial action is detailed in the attached exception report but the increased demand will need to be monitored.

3.4 **Green status indicators**

Good progress is noted in the two Podiatry exception reports. Podiatry for the whole NHS Greater Glasgow and Clyde area is hosted by Renfrewshire HSCP. In November 2016, 97.1% of patients presenting with diabetic foot ulcers were seen within 48 working hours – a steady improvement from 53% in April 2016. Also in November 2016, 96.2% of new referrals were appointed within 4 weeks. This 90% target has been exceeded every month since May 2016.

Implications of the Report

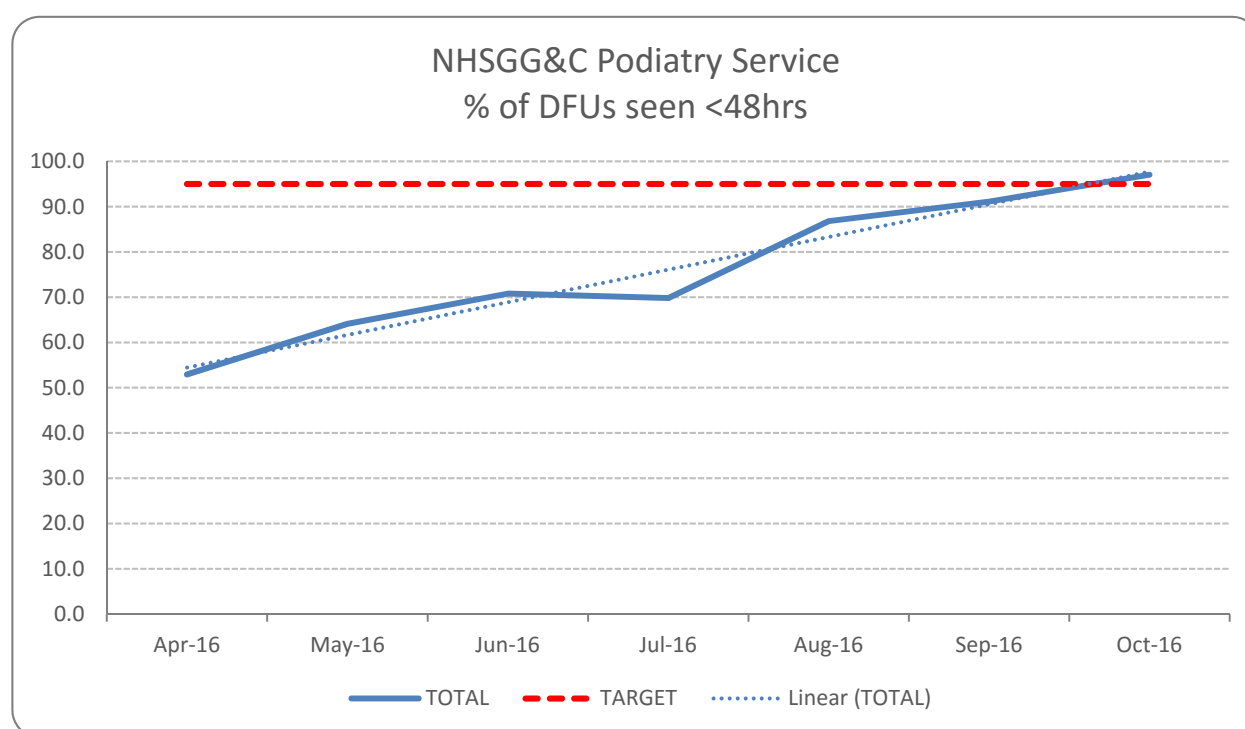
1. **Financial** – None
 2. **HR & Organisational Development** – None
 3. **Community Planning** – None
 4. **Legal** – Meets the obligations under clause 4/4 of the Integration Scheme.
 5. **Property/Assets** – None
 6. **Information Technology** – None
 7. **Equality & Human Rights** – The recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement have been identified arising from the recommendations contained in the report.
 8. **Health & Safety** – None
 9. **Procurement** – None
 10. **Risk** – None
 11. **Privacy Impact** – None
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Author:

- Clare Walker, Planning and Performance Manager
- Gayle Fitzpatrick, Service Planning and Policy Development Manager

Exception Report: **95% of patients presenting with diabetic active foot disease will be seen by a member of the Multi Disciplinary Team within 48 working hours**

Measure	95% of diabetic active foot disease seen by member of Multi Disciplinary Team within 48 working hours.
Current Performance	At 1 November 2016, 97.1% of patients presenting with active foot disease were seen by a member of the MDT within 48 working hours.
Lead	David Wylie, Podiatry Service Manager & Professional Lead



Commentary

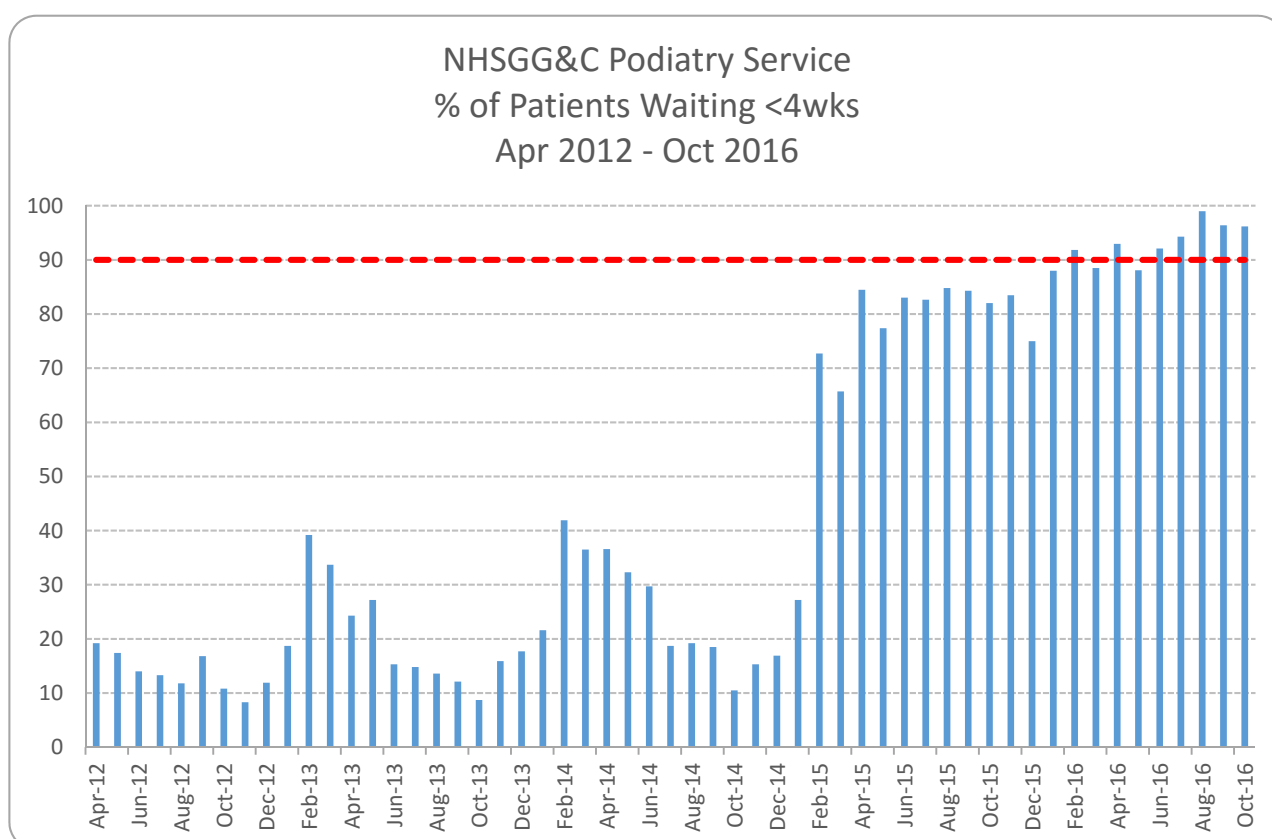
At 1 November 2016, 97.1% of patients presenting with diabetic foot ulceration were seen by a member of the MDT within 48 working hours. This represents a significant improvement in performance from 53% in April when accurate and verifiable audit data became available. This has been achieved by a combination of electronic referral processes and the redesign of foot protection services in community podiatry services, with the focus of community podiatry resource shifting from low risk screening to high risk early intervention.

Actions to Maintain Performance

- The number of clinics running each week will be maintained.
- Appropriate resource allocation of foot protection workforce will be maintained through implementation of community hubs to expedite referrals.
- Referral management centre will continue to appoint using New Ways booking rules, offering the first available appointment within the service.

Exception Report: Podiatry - % of new referrals to the service appointed within 4 weeks

Measure	% of new referrals appointed within 4 weeks
Current Performance	At 1 November 2016, 96.2% of new referrals were appointed within the 4 week target
Lead	David Wylie, Podiatry Service Manager and Professional Lead



Commentary

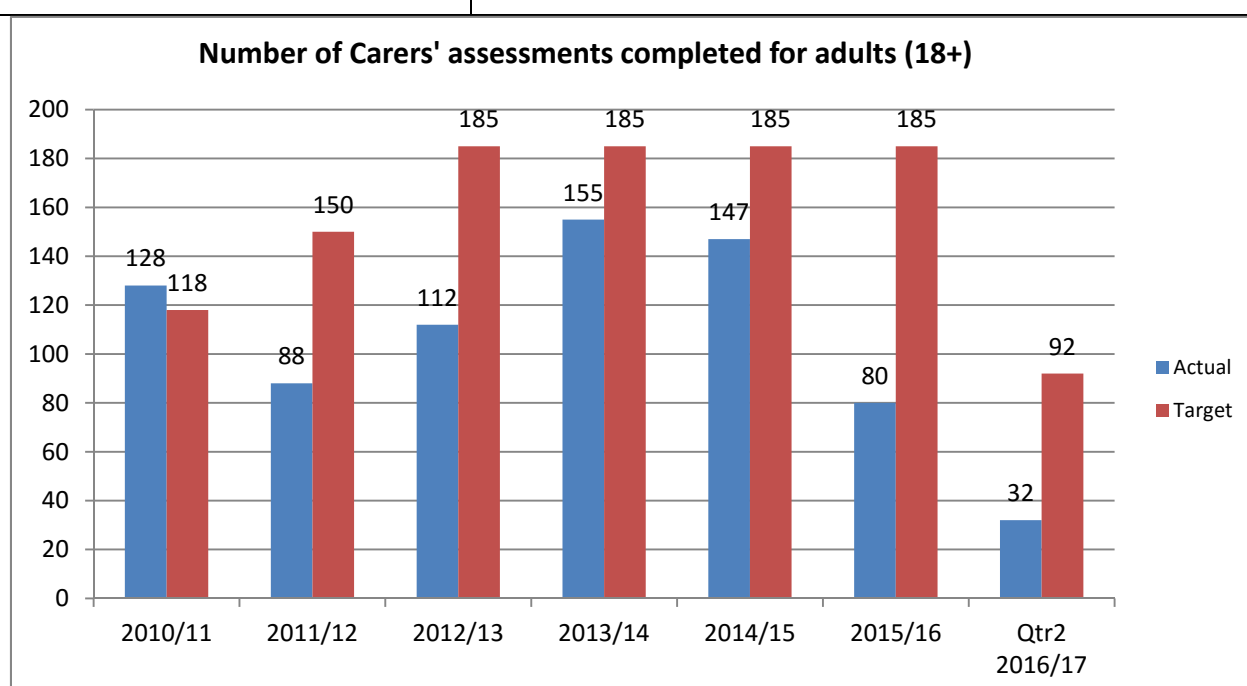
At 1 November 2016, 96.2% of new referrals to the podiatry service were appointed within the 4 week target. Encouragingly figures have consistently been above the 90% target since May 2016.

Actions to Maintain Performance

- The number of new patient clinic slots will be maintained at their current level.
- The referral management centre will continue to deliver access to patients self referring from 0800-1800 Mondays-Fridays and 0900-1300 on Saturdays.
- Patients will continue to be offered appointments in line with the New Ways booking rules enabling the service to offer the first available slot within the wider system if a referral is close to breaching.

Exceptions Report: Carers' Assessments

Measure	Number of carers' assessments completed for adults (18+)
Current Performance	This performance indicator is measured on an annual basis. As at 13 April 2016, the preliminary end of year figure for 2015/2016 indicated that 80 carers' assessments were completed for adults 18+. This is lower than the target of 185 and so is currently a red performance rating.
Lead	Alan Mair/Louise McKenzie/Elaine Borland



Commentary

As shown in the graph above, performance has fluctuated over the last five years and the target has not been met. Unfortunately this downward trend has continued in 2016/17.

This indicator is an output measure and is not a full reflection of the support carers receive. The views and needs of carers tend to be recorded within the Standardised Shareable Assessment (SSA) and the care plan that emerges to support the cared for person. Whilst assessors do offer carers an assessment, the carers often decline the offer as they believe their concerns have already been attended to. The Resource Indicator Tool (RIT), which supports the Self-Directed Support (SDS) process, records detailed information about the carers' input and factors this into the budget that is allocated.

We are now looking at gathering the reasons why carers do not feel the need to complete an assessment.

Actions to Address Performance

Renfrewshire Health and Social Care Partnership has worked with the Carers' Centre to introduce a new Adult Carer Support Worker service based at the Carers' Centre. The service provides a much more focused first contact for carers and ensures they have information on what services they can access, including a carers' assessment. As part of the upcoming Carers' legislation we are also working on refreshing and publicising the Carers' Self Assessment, which will be re-launched during Carers' Week in June.

Due to the narrow nature of this indicator, we will work with carers and The Carers' Centre to develop a better performance indicator to reflect how we perform in relation to supporting carers in their caring role.

In early 2017, we will be consulting with carers and Renfrewshire Carers' Centre to obtain views on what performance measures would be more meaningful to evidence support to carers. We will also use the 2015/16 Health and Social Care Experience Survey indicators to monitor whether carers feel supported to continue caring; have a say in the services provided for the person they look after; and have a good balance between caring and other things in life. This survey is carried out every two years.

Timeline For Improvement

The importance of taking account of carers' views and supporting them in their role will continue throughout 2016/17. How we support carers is about to change, with the introduction of The Carers' Act (Scotland) 2016.

This Act received Royal Assent on 9 March 2016. The Act makes provision for carers, including the identification of carers' needs for support through adult carer support plans and young carer statements; the provision of support to carers; the enabling of carer involvement in certain services; the preparation of local carers' strategies; the establishment of information and advice services for carers; and for connected purposes.

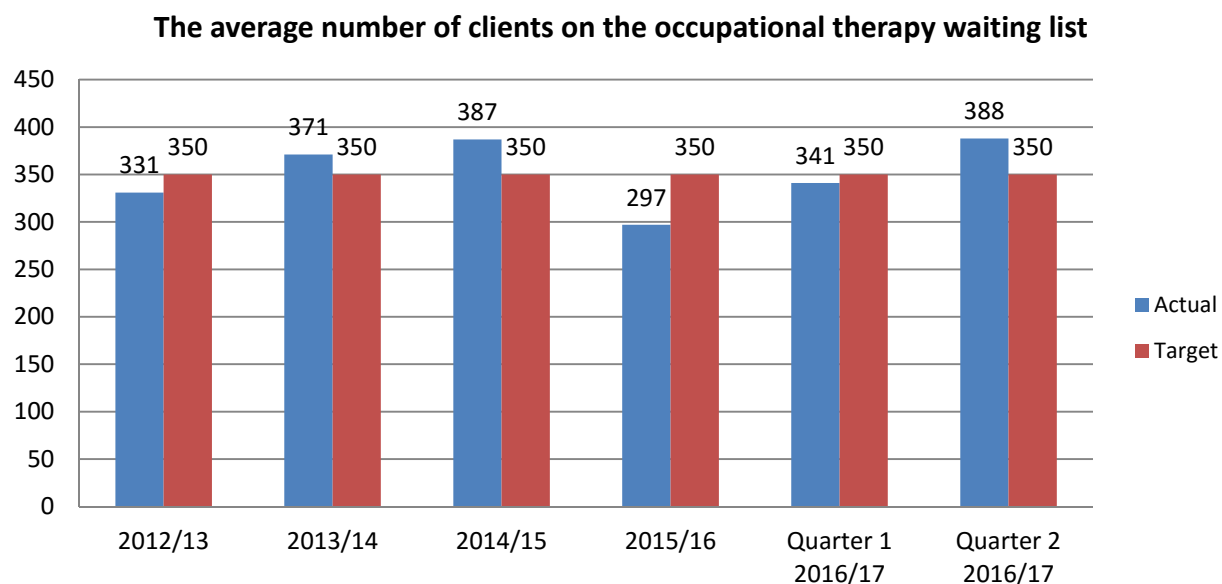
- The Carers' Act will come into effect in 2017-18;
- The package of provisions in the Act is designed to support carers' health and wellbeing. These include, amongst other things:
 - a duty on local authorities to provide support to carers, based on the carer's identified needs which meet the local eligibility criteria. National matters which local authorities must have regard to when setting their local eligibility criteria will be set out in regulations;
 - a specific Adult Carer Support Plan and Young Carer Statement to identify carers' needs and personal outcomes; and
 - a requirement for each local authority to have its own information and advice service for carers, which must provide information and advice on, amongst other things, emergency and future care planning, advocacy, income maximisation and carers' rights.

In order to prepare for the implementation of the new bill the HSOP in conjunction with

Renfrewshire Council's Children's Services, is carrying out a series of consultations with both carers and young carers, which will feed into the new strategy for supporting carers. The Scottish Government has already indicated that the new indicators relating to carers will be put into place to monitor the effectiveness of the support offered and will replace or augment the carers' assessments output measure.

Exceptions Report: Occupational Therapy Waiting List

Measure	<p>The average number of clients on the occupational therapy waiting list.</p> <p>This target applies to the social work occupational therapy service only and not the health occupational therapy service.</p>
Current Performance	In Quarter 2 of 2016/17, this indicator failed to meet the target of an average of 350 clients on the occupational therapy waiting list. This is the first time since 2014/15 that the target has not been met.
Lead	Ian Beattie, Head of Health & Social Care Services, Paisley and Mandy Ferguson, Head of Health & Social Care Services, West Renfrewshire.



Commentary

During Quarter 2 of 2016/17, performance has slipped behind target. The average number of people on the waiting list was 388, which was 11% above the target level of 350 clients on average. This was a rise of 14% on the Quarter 1 figure of 341 clients on average.

There has been a significant increase of around 50% in referrals to Adult Services over the past three years. Requests for OT assessments constitute a substantial element of these referrals. This has resulted in considerable additional demand on OT services. For example, at Quarter 4 in 2015/16, Adult Services received 7,335 contacts compared with 5,531 in the first quarter of 2012/13.

Over this period the OT service has been reorganised and redesigned, resulting in improved working practice. Despite this, the upwards trend in referral rates has continued, whilst the resource to respond has remained static.

Actions to Address Performance

- To address high levels of demand in particular areas, managers are now allocating OT work across the whole Renfrewshire area to ensure a more even distribution;
- OT duty systems are ensuring non complex cases are dealt with quickly and not added to the waiting list;
- Urgent cases will be seen more quickly and lower priority may wait longer; and
- Work to be undertaken to increase collaboration and pathways between community based social care and health OTs. It is hoped that this may produce a benefit in the short term, although the impact of this change of practice on both services will require to be evaluated.

Timeline For Improvement

- Overall performance and waiting times will be closely monitored over the next 12 months.