



To: Renfrewshire Integration Joint Board

On: 23 November 2018

Report by: Chief Officer

### **Subject:** Performance Management Mid-Year Report 2018/19

### 1. Summary

- Performance information is presented at all Renfrewshire IJB meetings. This is the mid year performance report for the financial year 2018/19 and covers the period April to September 2018. The performance Dashboard summarises progress (Appendix 1) along with the full Scorecard updating all performance measures (Appendix 2).
- The report provides an update on indicators from the Performance Scorecard 2018/19. There are 64 indicators of which 40 have targets set against them. Performance status is assessed as either red, more than 10% variance from target; amber, within 10% variance of target; or green, on or above target.
- 1.3 The Scorecard for 2018/19 has 64 indicators:
  - **24** data only
  - 7 red indicators (target not achieved)
  - 12 amber indicators (within 10% of target)
  - 21 green indicators (target achieved)

### 2. Recommendation

It is recommended the IJB:

 Approves the Performance Management Mid-Year Report 2018/19 for Renfrewshire HSCP.

### 3. Performance Reporting in 2018/19

- 3.1 The Scorecard is structured on the nine National Outcomes.

  Feedback from our performance reporting during 2016/17 and 2017/18 has been taken into account to ensure a balanced coverage in terms of services, outcomes and performance measures.
- 3.2 While this report is for the period April to September 2018, data is not yet available for all performance measures to September 2018. The

information provided in the report is the most up to date available at this point.

- 3.3 We have compiled a Dashboard (Appendix 1) to give an overview of key performance indicators for monitoring purposes. It shows five green indicators, five amber indicators and five red indicators. The purpose behind the Dashboard is to see at a glance the best and lowest performing indicators, along with those that have the potential to move from green to amber, amber to red or vice versa.
- There has been improved performance in 2018/19 for the following indicators:

At Quarter 1, the number of unscheduled bed days; acute specialties (Outcome 2) was 30,927, below the target of 30,955.

The percentage of children seen within 18 weeks for Paediatric Speech and Language Therapy assessment (Outcome 4) has increased from 73% at March 2018, to 99.4% at September 2018. The service has exceeded the target of 95% therefore the status for this indicator has changed from red to green.

Performance at June 2018 for emergency admissions from care homes (Outcome 4) was 117, just under the Quarter 1 target of 121. The indicator's status has changed from amber to green. There were 519 emergency admissions to hospital from care homes in 2017/18 against a target of 484. This is an area identified in our Unscheduled Care Commissioning Intentions, where we want to focus more to support care homes to reduce levels of bed days used as a result of an unscheduled care admission to hospital.

We have seen a reduction in the percentage of low birth weight babies (<2500g) (Outcome 4) from 7.0% at March 2018 to 6.2% at Quarter 1 2018/19 (target: 6%). This improvement takes the indicator's status from red to amber.

There has also been a further reduction in the rate of pregnancies for those under 16 years of age (Outcome 4). We achieved target in 2017/2018 with a rate of 3.1 per 1,000 population. This has now reduced further to 2.4 at Quarter 1 2018/19.

And finally, Quarter 1 has seen an improvement in smoking cessation. The number of non smokers at the 3-month follow up in the 40% most deprived areas is 62 against a target of 57, which sees the indicator's status improve from red to green.

### 3.5 Performance has deteriorated in 2018/19 for the following indicators:

The number of lost bed days to delayed discharge (Outcome 2) was 1,122 in Quarter 1, above the target of 800.

Performance in relation to delayed discharges was particularly strong in 2016/17 (3,205 bed days lost), but rose in 2017/18 to 4,680 due to various factors including: high levels of demand for Care at Home services and the reduced availability of care home places. This upward trend has continued in the first quarter of 2018/19, again due to the high demand on Care at Home services, and also because of lack of access to specialist AWI beds. However, additional investment has been made within the Care at Home service to address this issue, and the problem around access to AWI beds has been resolved. A comparison with the national picture shows that Renfrewshire HSCP continues to perform very well in terms of delayed discharges, and we can confirm that as at 12 November, there were just 7 delayed discharges waiting over 72 hours.

The percentage of paediatric Speech and Language Therapy wait times triaged within the 8 week target (Outcome 4) decreased from 100% at March 2018 to 97.6% at September 2018 (green to amber status).

The percentage of patients seen within the 18 weeks target by the Renfrewshire Child and Adolescent Mental Health Service (Outcome 3) has reduced from 100% to 94.7% (green to amber status).

Staff vacancies and sickness absence have impacted on the waiting times for Child and Adolescent Mental Health Service and the paediatric Speech and Language Therapy triage service. However, posts are being recruited to and the specialist teams are committed to reducing waiting times for both services.

The percentage of complaints the HSCP responded to within 20 days (Outcome 8) has decreased from 76% at March 2018 to 53% at September 2018. The decrease is due to the Partnership receiving a number of complaints which have been more complex in nature, thereby needing time extensions in order to provide a fuller response. To improve the process further, we have set parameters around the timescales for complaints which will see a more stringent approach in receiving investigation outcomes. With this process now in place, we can report that performance has increased to 64% as at 12 November and we expect to see levels improve further in the coming year.

Sickness absence remains a challenge for the HSCP. The absence rate for NHS staff has reduced from 5.5% at March 2018 to 5.1% at September 2018, but is still above the 4% target. Renfrewshire Council HSCP staff registered 4.64 days lost per full time equivalent (FTE), against a target of 1.79 days.

HSCP senior managers are working with NHS and Renfrewshire Council services to support staff and improve attendance. Recent and planned actions to improve performance include:

- Working closely with management teams to identify areas that require greater support, and employing strategies to support employees in those areas to return to work
- Continued rigorous monitoring of long term absence and proposed next steps
- Continued delivery of attendance management training
- Promotion of the Healthy Working Lives initiative, health improvement activities such as flu jabs, and development of a toolkit for managers to promote staff resilience and mental health and wellbeing.

### **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. The downward trend in teenage pregnancies is welcomed as teenage pregnancy is linked to deprivation. Rates of teenage pregnancy in deprived areas are more than treble those of the least deprived areas.
- 8. **Health & Safety** None
- 9. **Procurement** None
- 10. Risk None
- **11. Privacy Impact** None

### **List of Background Papers** – None.

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	Perf.	Target
Reduce pregnancies for those under 16 years of age (rate per 1,000 population)	2.4	3.1
Uptake rate of child health 30-month assessment	96%	80%
% of patients starting treatment within 18 weeks of referral to Psych. Therapies	100%	90%
Number of unscheduled hospital bed days; acute specialties	30,927	30,955
Reduction in alcohol related hospital admissions (rate per 1,000 population)	8.9	8.9
% of Paediatric Speech & Language Therapy wait times triaged within 8 weeks	97.6%	100%
Number of emergency admissions	4,615	4,500
Reduce % of babies with a low birth weight (<2500g)	6.2%	6%
% of staff who have passed the Fire Safety LearnPro module	81.9%	90%
Alcohol and drugs waiting times for referral to treatment. % seen within 3 weeks	82.3%	91.5%
% of PCMHT patients referred to first appointment offered within 4 weeks	84.6%	100%
% of complaints within HSCP responded to within 20 days	53%	70%
% Sickness absence rate for HSCP NHS staff	5.1%	4%
Number of delayed discharge bed days	1,122	800
Sickness absence rate for HSCP Adult Social Work staff (days lost per FTE)	4.64	1.79

Perfor	mance Indicator Status		Direction of Travel			
	Target achieved	1	Improvement			
	Warning	Deterioration				
	Alert		Same as previous reporting period			
	Data only					

National Outcome 1	People are able to look after and improve their own health and wellbeing and live in good health for longer						
Performance Indicator	16/17	17/18	18/19	Target	Direction	Status	
Performance malcator	Value	Value	Value	rarget	of Travel	Status	
Exclusive breastfeeding		Sep 17:	Data				
at 6-8 weeks.	23.1%	21.7%	recording	21.4%	•		
(See note 1)		21.7%	issue				
Alcohol brief	779	549	Qtr.1				
interventions	//9	549	70	-			

National Outcome 2	_		as far as reaso nely setting in			dently
	16/17	17/18	18/19		Direction	
Performance Indicator	Value	Value	Value	Target	of Travel	Status
Percentage of clients accessing out of hours home care services (65+)	89%	89%	Qtr. 2 89%	85%	-	<b>Ø</b>
Average number of clients on the Occupational Therapy waiting list	340	302	Qtr. 2 310	350	•	<b>②</b>
People newly diagnosed with dementia have a minimum of 1 year's post-diagnostic support	100%	100%	Qtr. 2 100%	100%	-	<b>Ø</b>
Number of unscheduled hospital bed days; acute specialties	128,961	125,084	Qtr. 1 30,927	30,955	•	<b>②</b>
Number of emergency admissions	22,448	18,552	Qtr. 1 4,615	4,500	•	
Percentage of long term care clients receiving intensive home care (national target: 30%)	27%	28%	Qtr. 2 28%	30%	-	_
Number of delayed discharge bed days	3,205	4,680	Qtr. 1 1,122	800	•	

Performance Indicator	16/17	17/18	18/19	Target	Direction	Status
Performance mulcator	Value	Value	Value	raiget	of Travel	Status
Homecare hours provided - rate per 1,000 population aged 65+	460	459	Annual Indicator due June 2019	-	-	
Percentage of homecare clients aged 65+ receiving personal care	99%	99%	Qtr. 2 99%	-	-	
Population of clients receiving telecare (75+) - Rate per 1,000	29.13	39.47	Annual Indicator due June 2019	-	-	
Percentage of routine OT referrals allocated within 9 weeks	-	-	Establishing baseline in 2018/19	-	-	
Number of adults with a new Anticipatory Care Plan	1,847	257	Qtr. 2 128	-	-	

National Outcome 3	T	People who use health and social care services have positive experiences of those services, and have their dignity respected					
Performance Indicator	16/17 Value	17/18 Value	18/19 Value	Target	Direction of Travel	Status	
Percentage of deaths in acute hospitals (65+)	40.3%	41.9%	41.7%	42%	•		
Percentage of deaths in acute hospitals (75+)	39.2%	40.7%	40.5%	42%	•	<b>&gt;</b>	
Percentage of patients who started treatment within 18 weeks of referral to Psychological Therapies	100%	100%	Qtr. 2 100%	90%	-	<b>&gt;</b>	
Child and Adolescents Mental Health (CAMHS) - % of patients seen within 18 weeks	100%	100%	Aug 18 94.7%	100%	•	<u> </u>	
A&E waits less than 4 hours	89.5%	84.9%	Qtr 2. 86.8%	95%	•		
Percentage of staff who have passed the Fire Safety LearnPro module	-	67%	81.9%	90%	•		

Performance Indicator	16/17	17/18	18/19	Target	Direction	Status
renormance mulcator	Value	Value	Value	raiget	of Travel	Status
Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks. (See note 2)	95%	79%	Qtr. 2 84.6%	100%	•	
Number of routine sensitive inquiries carried out	319	178	Qtr. 2 109 (68% of 160 records, 53/100 children's services & 56/60 Mental Health)	-	-	<b>-</b>
Number of referrals made as a result of the routine sensitive inquiry being carried out	16	8	Qtr. 2 1	-	-	

National Outcome 4	Health and social care services are centred on helping to maintain or improve the quality of life of service users						
Performance Indicator	16/17 Value	17/18 Value	18/19 Value	Target	Direction of Travel	Status	
Reduce the rate of pregnancies for those under 16 years of age (rate per 1,000 population)	3.9	3.1	2.4	3.1	1	•	
At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation (See note 3)	89.6%	85.1%	Data recording issue	80%	•	<b>②</b>	
Uptake rate of child health 30-month assessment	82%	89%	96%	80%	•		
Percentage of children vaccinated against MMR at 5 years	96.4%	97.0%	Qtr. 1 97.7%	95%	•	<b>Ø</b>	
Percentage of children vaccinated against MMR	96.2%	95.5%	Qtr. 1 97.1%	95%	•	<b>②</b>	

at 24 months						
Performance Indicator	16/17 Value	17/18 Value	18/19 Value	Target	Direction of Travel	Status
Reduction in the rate of alcohol related hospital admissions per 1,000 population	9.9	9.0	Qtr. 1 8.9%	8.9	•	<b>&gt;</b>
Emergency admissions from care homes	538	519	Qtr. 1 117	121	•	
Percentage of paediatric Speech & Language Therapy wait times triaged within 8 weeks	100%	100%	Qtr. 2 97.6%	100%	•	
Alcohol and Drugs waiting times for referral to treatment. % seen within 3 weeks	94.1%	84.9%	Qtr. 2 87.0% (Provisional)	91.5%	•	
Reduce drug related hospital stays - rate per 100,000 population. (See note 4)	180.8	2017/18 data not yet available	2018/19 data not yet available	170		
Reduce the percentage of babies with a low birth weight (<2500g)	5.9%	7.0%	Qtr. 1 6.2%	6%	<b>a</b>	
Percentage of children seen within 18 weeks for paediatric Speech & Language Therapy assessment to appointment	47%	73%	Qtr. 2 99.4%	95%	•	<b>S</b>
Emergency bed days rate 65+	297	263	Aug 18 109	-	-	
Number of readmissions to hospital 65+	2,032	1,337	Aug 18 585	-	-	

National Outcome 5	Health and so inequalities	Health and social care services contribute to reducing health inequalities						
Performance Indicator	16/17	17/18	18/19	Target	Direction	Status		
Terrormance maleator	Value	Value	Value	laiget	of Travel	Status		
Smoking cessation - non smokers at the 3 month follow up in the 40% most deprived areas	197	201	62	57	•	<b>S</b>		
Exclusive breastfeeding at 6-8 weeks in the most deprived areas	13.6%	14.5%	Data recording issue	19.9%	•			

Performance Indicator	16/17	17/18	18/19	Target	Direction	Status
	Value	Value	Value	J	of Travel	
Number of staff trained in sensitive routine enquiry	-	-	88	-	-	
Number of staff trained in Risk Identification Checklist and referral to MARAC.	-	-	127	-	-	<b>~</b>

National Outcome 6	People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing						
Performance Indicator	16/17	17/18	18/19	Target	Direction	Status	
r errormance maleator	Value	Value	Value	ranget	of Travel	Status	
Number of carers accessing training	233	242	Qtr. 2 104	110	•		
Number of adult support plans completed for carers (age 18+)	-	-	Qtr. 2 41	-	-		
Number of adult support plans refused by carers (age 18+)	-	-	Qtr. 2 As above 5	-	-		
Number of young carers' statements completed	-	-	Qtr. 2 47	-	-		

National Outcome 7	Health and social care services contribute to reducing health inequalities					
Performance Indicator	16/17 Value	17/18 Value	18/19 Value	Target	Direction of Travel	Status
Suicide - rate per 100,000	16	23	Annual figure. Due Jun 2019	-	-	
Number of Adult Protection contacts received	2,578	2,830	Qtr. 2 740	-	-	
Total Mental Health Officer service activity	200	200	Qtr. 2 86	-	-	

Performance Indicator	16/17	17/18	18/19	Target	Direction	Status	
Performance mulcator	Value	Value	Value	raiget	of Travel	Status	
Number of Chief Social			Qtr. 2				
Worker Guardianships	107	117	115	-	-		
(as at position)			115				
Percentage of children							
registered in this period			Qtr. 2				
who have previously	12%	23%	16%	-	-		
been on the Child			10/0				
Protection Register							

National Outcome 8	People who work in health and social care services are supported to continuously improve the information, support, care and treatment they						
	provide and feel engaged in the work they do						
Daufanna and Indiantan	16/17	16/17 17/18 18/19		Tauast	Direction	<b>6.</b> .	
Performance Indicator	Value	Value	Value	Target	of Travel	Status	
% of Health Care Support Worker staff with mandatory induction completed within the deadline	100%	100%	Qtr. 2 100%	100%	-		
% of Health Care Support Worker staff with standard induction completed within the deadline	100%	100%	Qtr. 2 100%	100%	-	<b>②</b>	
% of health staff with completed TURAS profile/PDP (See note 5)	68.9%	75.8%	Data recording issue.	80%	•		
Improve the overall iMatter staff response rate	65%	59%	Annual indicator. Due Mar 2019	60%	•		
% of complaints within HSCP responded to within 20 days	-	76%	53%	70%	•		
Sickness absence rate for HSCP NHS staff	5.6%	5.5%	Qtr. 2 5.1%	4%	<b>a</b>		
Sickness absence rate for HSCP Adult Social Work staff (work days lost per FTE)	3.65	4.34	Qtr. 2 4.64	1.79 days	•		
No. of SW employees, in the MTIPD process, with a completed IDP	543	909	Annual Indicator due June 2019	-	-		

National Outcome 9	Resources are used effectively in the provision of health and social care services, without waste					
Performance Indicator			18/19	Target	Direction	Status
- errormance maleator	Value	Value	Value		of Travel	Status
Formulary compliance	79.5%	79.7%	Qtr. 1 79.1%	78%	•	
Prescribing cost per treated patient	New indicator	£83.70	Jul 18: £84.66	£86.63	•	
Total number of A&E attendances	57,244	56,681	Qtr. 1 15,733	14,030	•	
Care at Home costs per hour (65 and over)	£23.56	2017/18 information available early 2019	2018/19 information available early 2020	-	-	
Direct Payment spend on adults 18+ as a % of total social work spend on adults 18+	3.7%	2017/18 information available early 2019	2018/19 information available early 2020	-	-	
Net residential costs per week for older persons (over 65)	£360	2017/18 information available early 2019	2018/19 information available early 2020	-	-	
Prescribing variance from budget	0.83% underspent	3.95% over budget	Jul 18: 1.51% over budget	-	-	

### <u>Notes</u>

### 1. Breastfeeding

Further to a change in the data recording process across NHS GGC, a way forward has been agreed. The Information Services team is now working on data which we hope to report on more fully at a future meeting or by year end 2018/19.

#### 2. Primary Care Mental Health Team - 9 Week Waiting Times Target

Due to the recent change from the PIMS IT system to EMIS, the Mental Health Service now no longer reports on the local 9 week referral to first appointment target. However we do report on the national 18 weeks referral to treatment (RTT) target, which is reported to the Scottish Government on a monthly basis.

#### 3. Antenatal Care

There is a delay with the data from ISD for the following indicator: at least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation. We hope to report on this data by year end 2018/19.

### 4. Drug Related Hospital Stays

Data has been delayed due to the national Information Services Division (ISD) carrying out a public consultation on inclusion of hospital stays associated with drug poisonings/overdoses. A publication date has not yet been agreed.

### 5. Percentage of Health Staff with Completed TURAS Profile/PDP

Unfortunately there is a recording issue with the new TURAS staff appraisal system which means data is unavailable at this time. We hope to be able to report full performance at a later date or by year end 2018/19.