

To: Renfrewshire Integration Joint Board

On: 26 June 2020

Report by: Chief Officer

Subject: Performance Management End of Year Report 2019/20

Direction Required to Health Board, Council or Both	Direction to:	
	1. No Direction Required	X
	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	4. NHS Greater Glasgow & Clyde and Renfrewshire Council	

1. Summary

- 1.1 Performance information is presented at all Renfrewshire IJB meetings. This is the second full performance report for the financial year 2019/20 and covers the period April 2019 to March 2020. There are two appendices attached: the performance Dashboard which summarises progress against a number of key indicators to give IJB members a quick overview of indicators that are doing well and have green status; indicators that have amber status and could move to green or red status at a later date; and indicators that have red status, where performance can be improved. The Dashboard is attached at Appendix 1. The full Scorecard provides more detail, with trend data where available, and updates all performance measures against the nine National Health and Wellbeing Outcomes. The Scorecard is attached at Appendix 2.
- 1.2 While this report is for the period April 2019 to March 2020, data is not yet available for all performance measures to March 2020. Information provided in the report is the most up to date available at this point.
- 1.3 The report provides an update on indicators from the Performance Scorecard 2019/20. There are 67 indicators of which 42 have targets set against them. Performance status is assessed as either green, on or above target; amber, within 10% variance of target; or red, more than 10% variance from target.
- 1.4 Currently 54.8% of our performance measures have green status, 23.8% amber status and 21.4% red status.
- 1.5 The most significant challenge faced by Renfrewshire HSCP and its partner organisations (and indeed all HSCPs across Scotland) has been responding to the COVID-19 pandemic in March 2020. The HSCP responded rapidly to the emerging situation to ensure services have continued to be delivered safely and effectively and protect

vulnerable people within our communities. The impact of COVID-19 on services delivered by the Partnership has been unprecedented, requiring a significant degree of service change within a short period of time. The full impact of these changes in demand across health and social care services are unknown. Where patients have avoided or delayed attendance for symptoms and conditions that would typically require treatment, it is possible that these may be exacerbated, leading to more serious health conditions over time. This could place significant additional pressures on healthcare services in addition to the ongoing response to COVID-19. At this point it is unclear how substantial the impact will be on our performance measures. The extent will become clearer as we move forward during 2020/21. Our performance in all areas will continue to be closely monitored and risks assessed appropriately.

- 1.6 An update on the development of our Annual Performance Report for 2019/20 is included in section 9 of this report.

2. Recommendations

It is recommended that the IJB:

- Approves the Performance Management End of Year Report 2019/20 for Renfrewshire HSCP;
- Notes that an Improvement Plan for Renfrewshire HSCP's Child and Adolescents' Mental Health Service (CAMHS) will be brought to a future IJB for approval;
- Notes that further to the guidance from the Scottish Government regarding the timetable and content for Partnerships' 2019/20 Annual Performance Reports, we seek IJB approval to delay publication of the Report to September 2020; and
- Notes that the impact of COVID-19 on the HSCP's performance at this point is not fully understood.

3. Performance Reporting 2019/20

- 3.1 The Scorecard is structured on the nine National Health and Wellbeing Outcomes. It includes measures from the Core Indicator set, incorporating some high level outcome indicators drawn from the Health and Care Experience Survey which is carried out every two years. Feedback from our performance reporting during 2018/19 has been taken into account to ensure a balanced coverage in terms of services, outcomes and performance measures.
- 3.2 At year-end 2019/20, the Scorecard shows the status of the 42 indicators that have targets set against them as:
- 23 green indicators (54.8%)
 - 10 amber indicators (23.8%)
 - 9 red indicators (21.4%)

- 3.3 In Sections 4 to 7 of the report we cover: an update on our performance against four of the six Ministerial Strategy Group (MSG) indicators that are updated more frequently (section 4); Scorecard indicators where there has been improved performance in 2019/20 (section 5); Scorecard indicators where there has been a deterioration in performance in 2019/20 (section 6); and an update on the Local Government Benchmarking Framework indicators (section 7).

4. Ministerial Strategy Group (MSG) Indicators and Unscheduled Care

- 4.1 At the IJB meeting on 20th March 2020, members received a performance report on Unscheduled Care. The report detailed our performance against the six Scottish Government Ministerial Strategy Group (MSG) 2019/20 targets for unscheduled care.

The Performance Scorecard attached at Appendix 1 focuses on the following four indicators that are updated more frequently. As the data is not yet fully validated, the time periods used are the most reliable for each indicator to date.

- Emergency admissions (18+) April – December 2019
- Unplanned bed days (18+) April – December 2019
- A&E attendances April – March 2020
- Delayed discharge bed days (18+) April – February 2020

- 4.2 Current performance on these indicators is as follows:

- 4.2.1 **Emergency admissions (18+):** at December 2019 there were 13,785 admissions against a Quarter 3 target of 13,127 (amber status). The annual target is 17,502.

- 4.2.2 **Unplanned bed days; acute specialties:** at December 2019 there were 90,947 unplanned bed days against a Quarter 3 target of 92,982 (green status). The annual target is 123,976.

- 4.2.3 **A&E Attendances (All):** at March 2020 the annual total was 60,238 attendances at A&E, against a target of 56,119, (amber status).

- 4.2.4 **A&E Attendances (18+):** at March 2020 the annual total was 47,295 attendances at A&E, against a target of 45,121(amber status).

- 4.2.5 **Delayed discharge bed days (18+):** at February 2020 there were 8,161 delayed discharge bed days against a Quarter 3 target of 4,126 (red status). The annual target is 4,501.

- 4.3 Along with this Performance Report, the NHS Greater Glasgow and Clyde draft Unscheduled Care Commissioning Plan for 2020 – 2025 is also presented at this IJB meeting on 26th June 2020. The purpose of the Unscheduled Care Commissioning Plan, which all six HSCPs in NHSGGC have contributed to, is to outline how we will respond to the continuing pressures on health and social care services in Greater Glasgow and Clyde and meet future demand. The draft explains that with an ageing population and changes in how and when people

choose to access services, we need to adapt so we can meet patients' needs in a variety of ways, with integrated services that the public understand how to use.

- 4.4 One key aspect of the Unscheduled Care work is learning from the pandemic, during which we have seen a fall in unscheduled care activity. For example, emergency attendances for those 18+ in NHSGGC were 25,099 in January 2020; 22,820 in February 2020; and 17,427 in March 2020. Attendances have begun to increase again and we are already seeing an upturn in activity in some areas in response to the 'NHS is open' campaign. It is important, going forward that we learn lessons from what has worked well during the pandemic and might be followed through as part of our system-wide approach to improving patient services and managing demand effectively.

5. **Scorecard Indicators with Improved Performance**

There has been improved performance in 2019/20 for the following Scorecard indicators:

- 5.1 **The percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks** (Outcome 3), has increased from 86.5% at March 2019 to 90.5% at March 2020 against the target of 100%, changing its status from red to amber. Performance had increased to 95% at February 2020; however vacancies and short term staff sickness, along with a reduction in referrals due to COVID-19, have all impacted on the year-end figure. Plans to improve performance include recruitment to vacant posts. The service is also embracing the advantages of technology and will utilise the Attend Anywhere system for self-referral, assessment and treatment appointments. It is hoped this will reduce DNAs (did not attend) appointments and improve the efficiency of the service.
- 5.2 **Uptake rate of the 30-month child assessment** (Outcome 4): the current uptake of assessments has increased from 93% at March 2019 to 95.5% of eligible families at March 2020. During 2019/20, Renfrewshire has benefited from increased health visiting capacity due to reaching the end point of the Healthy Children's Programme. This has led to reduced caseload numbers and has facilitated a sustained performance in relation to the 30-month Ready to Learn assessment.
- 5.3 **The percentage of NHS staff that have passed the Fire Safety LearnPro module** (Outcome 3) has increased from 45.6% at March 2019 to 80.2% at March 2020, against a target of 90%. Performance at February 2020 was 88.1%. Year-end performance is likely to have been affected by the COVID-19 pandemic and the ability of staff to complete the module due to COVID-19 response requirements, as well as staff sickness absence and shielding. We hope to increase performance during 2020-21, however it is unclear how the continuing effects of the pandemic will impact on this area/indicator. In terms of monitoring and reassurance, each employee and their manager receive a monthly update from HR on statutory and mandatory LearnPro module compliance, including Fire Safety. These monthly updates should ensure this requirement does not lose continued focus and responsibility.

5.4 **The percentage of children seen within 18 weeks for paediatric Speech and Language Therapy assessment to appointment** (Outcome 4) achieved the target of 100% at March 2020. This compares to 63% at March 2019 and 86.7% at mid-year. The indicator status has therefore changed from red to green. During the period affected by COVID-19, most of the delivery method was online and the longer term impact of online delivery on children's outcomes will be assessed going forward.

We achieved this via the following methods:

- Increased pre-referral work at our drop-in clinics
- An increased focus on universal approaches in partnership with Education Services (Renfrewshire's Inclusive Communication Environments)
- Evidence based clinical pathways for early language and communication delay delivered by a wider skill mix, utilising a coaching and strengths-based model of Clinical Support Workers delivering the PATIR programme (Play and Talk in Renfrewshire)
- A focus on community and locality team based working in West Renfrewshire and Paisley, ensuring easier access for SIMD (Scottish Index of Multiple Deprivation) areas 1-5. This in turn reduces appointment DNAs (did not attend), increases parental engagement and maximises collaboration.

5.5 We have exceeded our target for **alcohol related hospital stays** (Outcome 4) with a rate of 8.2 per 1,000 population aged 16+ (target 8.9) at December 2019 (Quarter 3) compared to 8.8 at March 2019. This is the lowest rate achieved since the recording of this indicator in January 2009.

5.6 **The percentage of people seen within three weeks for Alcohol and Drug Services** (Outcome 4) has increased from 71.4% at March 2019 to 99.1% at December 2019 (Quarter 3). The improvement in performance can be attributed to a number of new processes which have been put in place to ensure new referrals are allocated in a timely manner; an increase in the number of assessment clinics being provided; and training has also been offered to staff to improve data quality. The Alcohol and Drug Service has successfully continued to deliver during COVID, ensuring clients are well supported.

5.7 **The rate of pregnancies for those under 16 years (rate per 1,000 population)** has reduced from 2.4 in 2018/19 to 1.5 in 2019/20, against a target of 3.1. In response to a national review of the Relationships, Sexual Health and Parenthood Education (RSHPE) resource that can now be accessed online, the Health Improvement Team has provided training to education staff, as well as primary and secondary school staff, to support the delivery of this agenda. In addition, Sandyford, the specialist sexual health service for NHS Greater Glasgow and Clyde has, as part of their service redesign, planned changes to their youth services to increase the accessibility of services for young people going forward.

- 5.8 **Emergency admissions from care homes** (Outcome 4). Performance at March 2020 is 746 compared to 823 at March 2019. 2019/20 data was obtained from a new Performance Dashboard and a target for this indicator will now be set for 2020/21. Work continues with Care Home Liaison Nurses providing support to Care Homes with high admission rates to hospital. The Red Bag initiative is now embedded into practice to support Care Homes' transfers to and from Acute Services. Benefits include: a quicker transfer to hospital; less time collecting key information; shorter hospital stay; and better communication at discharge. It should be noted that it is possible that the COVID-19 pandemic may have contributed to and affected the number of hospital admissions in Quarter 4 of 2019/20.
- 5.9 **Percentage of children vaccinated against MMR at 24 months** (Outcome 4). Performance has increased from 94.7% at June 2019 to 96% at December 2019, against a target of 95%. Status has therefore changed from amber to green. During COVID, we have emphasised the importance for families to continue to attend child immunisation clinics where possible.
- 5.10 **The sickness absence rate for NHS HSCP staff** (Outcome 8) has decreased from 5.39% at March 2019 to 4.75% at March 2020 against the national NHS target of 4%. Based on March 2020 figures, Renfrewshire is the best performing HSCP in Greater Glasgow and Clyde against a Board average of 4.99% and an HSCP average of 5.52%. The absence level in March 2020 is encouraging with long term absence reflecting all the positive but time-consuming work in bringing many long term sickness absence cases to an end point. However, the absence level does not reflect any COVID specific absence recording.
- 5.11 **Total number of A&E attendances** has decreased from 61,174 at March 2019 to 60,238 at March 2020, while the **total number of A&E attendances (18+)** has decreased from 47,718 to 47,295 for the same time period. While attendance numbers at A&E had reduced in March 2020 with the COVID-19 pandemic, the number of attendances are now increasing and are almost back to pre-COVID days. Work to reduce pressure in this area is on-going, with a HSCP and NHSGGC Board-wide campaign to redirect service users from both A&E and GPs to other more appropriate services, where possible, using printed material and social media.

6. **Scorecard Indicators with Deteriorated Performance**

Performance has deteriorated in 2019/20 for the following indicators:

- 6.1 Performance on **Alcohol Brief Interventions (ABIs)** (Outcome 1) at March 2020 is 224 completed compared to 306 for the same period in 2018/19. Renfrewshire HSCP is keen to improve performance in this area and funding has been secured from the Renfrewshire Alcohol and Drug Partnership to recruit a full-time post for one year. Unfortunately having gone through the recruitment process, there has not been a suitable candidate to appoint to this post. Taking account of the current situation with COVID-19, the recruitment of this post has been postponed and will be progressed as soon as it is appropriate to do so.

6.2 At 20.5%, the rate for **the number of babies exclusively breastfed at their 6-8 week review** (Outcome 1) at December 2019 (Quarter 3) is below target for 2019/20 (21.4%). This means the indicator status changes from green to amber. However, the overall average for the calendar year 2019 is 22.9%, which is above target.

Our third sector partner, the Breastfeeding Network (BFN) has been awarded funding for three Breastfeeding Support Groups in Renfrewshire (Linwood, Paisley East and Bishopton) in addition to the current BFN support group in Johnstone. Groups will be led by trained peer support workers and will commence as soon as possible after the COVID-19 pandemic.

Support is however being provided during the pandemic via the national breastfeeding helpline. The Breastfeeding Network has a Facebook support page, an email address that women can email for support, and also offers virtual breastfeeding group chats. Mothers can also still contact their Health Visitor if they need help, and support will be given via the phone. Health Visitors are carrying out house visits at 11-15 days and 6-8 weeks.

6.3 **Exclusive breastfeeding at 6-8 weeks in the most deprived areas** (Outcome 5) has also seen a deterioration in performance from 17.7% at March 2019 to 11.5% at March 2020 against a target of 19.9%. The overall average for the calendar year 2019 was 15.9%. It should be noted however, the number of mothers' breastfeeding in deprived areas is small and percentage rates can fluctuate considerably from one quarter to the next.

6.4 At 8,161 at February 2020, **the number of delayed discharge bed days** (Outcome 2) for 2019/20 is above the annual target of 4,501, remaining at red status. Renfrewshire HSCP continues to focus on reducing delayed discharges and has continued to improve our position in March 2020. For example, the HSCP's target to achieve a 20% reduction in the number of individuals delayed for discharge in Acute services against a baseline of 26 individuals was exceeded by 31st March (16 individuals delayed against a target of 21).

Improvement work has included:

The on-going implementation of a Delayed Discharges Action Plan and further complementary actions to reduce delays as part of Renfrewshire HSCP's COVID-19 mobilisation plans and service response. These have included:

- Deployment of staff to reinforce critical roles supporting discharge
- Rolling recruitment programmes within Care at Home
- Creating additional capacity for step-down beds
- Introducing electronic scheduling in Care at Home to support enhanced planning and increased capacity.

Forward plans for addressing delayed discharges recognise that due to COVID-19, the number of people being discharged from hospital will

continue to increase, placing additional demand on service provision in the financial year 2020/21.

- 6.5 **Percentage of long term care clients receiving intensive home care (national target: 30%)** (Outcome 2). Performance has decreased from 28% at March 2019 to 27% at March 2020. Clients receiving intensive home care are those who are receiving more than 10 hours of home care per week but does not include other home care services such as community meals and technology enabled care (TEC). The service continues to actively review the needs of service users to ensure that the Partnership meets their care requirements appropriately. This may result in changes to the level and nature of services that some individuals receive.
- 6.6 **Percentage waiting for dementia post-diagnostic support (PDS)** within a 12-week standard was a new indicator for 2019/20 with performance at 91.8% at mid-year, September 2019. Performance has since deteriorated to 25% at year-end March 2020. The main impact has been a national under estimation of the dementia prevalence rate by up to 50%. This along with service vacancies and the length of time to recruit to posts, and staff sickness rates, has made this target challenging for the service. In order to achieve the 12-week standard for all patients, a review of staffing levels is required. The introduction of PDS did not come with any financial support and is therefore funded within the existing budget.
- 6.7 **A&E waits less than 4 hours** (Outcome 3) has shown some deterioration in performance, with a decrease from 89.5% at March 2019 to 84% at February 2020, against a target of 95%.
- 6.8 **Child and Adolescents' Mental Health Service (CAMHS) – percentage of patients seen within 18 weeks** (Outcome 3) has reduced from 82.5% at March 2019 to 66.7% at March 2020 against a target of 80%. CAMHS waiting times are a challenge across the Greater Glasgow and Clyde Board area, with a Board rate of 46.4% at March 2020. Over the past three years there has been a 10% increase in referrals to the service. The number of rejected referrals has decreased over the last 18 months from 35% to 10%. Staff changes over the same period, due to retirements and staff moving to promoted posts, as well as the time gap to recruit, have all impacted on service performance. The Scottish Government committed to fund two additional Band 6 posts for a two-year period, which have been recruited to. In addition, the service has looked at delivering alternative service models, such as group work and developing new clinical pathways. An Improvement Plan for the service will be brought to a future IJB for approval.
- 6.9 **The percentage of babies with a low birth weight (<2,500g)** (Outcome 4) increased from 6.3% at March 2019 to 7.1% at December 2019 (Quarter 3). The target for this indicator is 6%, which was last achieved at June 2017.

6.10 Performance has dipped slightly for Smoking cessation - **non-smokers at the 3-month follow up in the 40% most deprived areas** (Outcome 5). There were 127 quits at Quarter 3, December 2019, against a target of 131, changing the status from green to amber. It is hoped this target will be achieved when Quarter 4 data becomes available.

6.11 **The percentage of health staff with completed TURAS profiles/Personal Development Plans (PDPs)** (Outcome 8) has increased slightly from 48.7% at March 2019 to 49.3% at March 2020. Performance had increased to 62.6% at mid-year, September 2019 against the target of 80%. Despite this dip in performance, Renfrewshire HSCP currently has the highest level of compliance amongst the six Partnerships in NHSGGC and is above the GGC average. That stated, there has been a message issued from the Senior Management Team that staff not currently fully occupied during this disruption to normal activities should populate the evidence for their TURAS/Knowledge Skills Framework (KSF) Review and update their PDP in preparation to meet with their manager when COVID priorities scale down.

6.12 **Sickness absence rate for HSCP Adult Social Work staff** (work days lost per full-time equivalent (FTE) (Outcome 8). Performance at Quarter 3, December 2019, is 13.64 days lost against a Quarter 3 target of 11.7 days. Performance at year-end 2018/19 was 17.43 days lost. Unfortunately, year-end data for 2019/20 is currently unavailable.

There are a number of planned measures in place to address on-going sickness absence challenges within the HSCP. These include:

- HR Teams continuing to work closely with service management teams to offer training and identify areas that require additional support
- On-going health improvement activities and support through Healthy Working Lives (HWL), aimed at raising employee awareness of health issues.

6.13 **The percentage of diabetic foot ulcers seen within 4 weeks Renfrewshire (Clyde)** has seen performance decrease from 91.1% at March 2019 to 81.7% at March 2020, with performance in NHSGGC as a whole also dipping from 87.4% at March 2019 to 81.2% at March 2020. The status of both these indicators is now amber.

The Podiatry Service has faced particular challenges in recruiting bank staff during 2019-20, and was unable to backfill long term sickness absence and maternity leave. With rising referrals into Foot Protection, response times dropped below the two-day target, however over 90% of patients were seen within three working days, both in Renfrewshire (Clyde Quadrant) and across NHSGGC. Recruitment for 2020-21 looks more promising; however the impact of the COVID contingencies on service performance will be significant.

7. Local Government Benchmarking Framework (LGBF) Indicators (Outcome 9)

7.1 2019/20 data for the Local Government Benchmarking Framework indicators is not expected until early 2021. A recent update on the 2018/19 data is included at Outcome 9 in the Scorecard. There are no targets assigned to these indicators.

7.2 **Care at Home costs per hour (65 and over)** have increased from £22.83 at 2017/18 to £26.40 at 2018/19. The Scottish average is £24.67 - The Local Government Benchmarking Framework figure is calculated from the Local Financial Return and the Social Care Census. Renfrewshire's cost per hour is above the Scottish average and is the second highest within the family group with only South Ayrshire costs being higher at £27.56.

7.3 **Direct Payment spend on adults 18+ as a % of total social work spend on adults 18+** has increased from 4.25% at 2017/18 to 5.8% at 2018/19. The Scottish average is 7.3%. The Partnership has seen a year on year rise in the uptake of direct payments in line with national and local policy for supporting people within their communities. The service will continue to promote Self Directed Support and increase uptake to ensure those who are eligible can have greater choice and control over how they receive services.

7.4 **Net residential costs per week for older persons (over 65)** have decreased from £414 at 2017/18 to £277 at 2018/19. The Scottish average is £381. This can partly be attributed to a 16% increase in the number of clients. Also, more detailed allocation of catering and cleaning costs across client groups was processed in 2018/19, whereas most of these recharges were allocated to Older People in prior years. This change is due to the normal review undertaken regularly to check that overhead allocations are reasonable.

8. Impact of COVID-19 on Performance

8.1 As mentioned throughout this report the full impact of COVID-19 on our performance towards the end of financial year 2019/20 and going forward in 2020/21 is not fully known. It is still early days, but with the nature of COVID-19 and the actions taken to address it, there is likely to be increased demand on unscheduled care, mental health and community based services, which will bring additional complexity into the transition/recovery planning. Innovative ways of working have been put in place to maintain services and reduce risk to staff, patients and clients. Adaptions made as part of this are being considered with learning and good practice as part of the approach to transition and recovery.

8.2 The HSCP's response to mitigating against the impact of COVID-19 had significant impact both financially and upon business as usual service delivery models. The uncertainty and challenges arising from this situation are unprecedented and will continue to impact well into the 2020/21 financial year. At this point it is unclear how substantial the impact will be on our performance measures. However, our

performance in all areas will continue to be closely monitored and risks assessed appropriately.

9. Annual Performance Report 2019/20

- 9.1 As already advised in the IJB Bulletin, in previous years a draft of our Annual Performance Report has been presented at IJB meetings in June of each year, then finalised, sent to the Scottish Government, and published online by 31 July. The reports have a balance of qualitative information and statistical data and highlight the importance of patients', service users' and carers' feedback in the development and improvement of our services.
- 9.2 There is a new power in paragraph 8 of Schedule 6 to the Coronavirus (Scotland) Act, to postpone publication of Integration Authorities' Annual Performance Reports due to the COVID-19 pandemic. Further to a National Meeting on Monday 15 June, the Scottish Government has confirmed that 2019/20 Annual Performance Reports have been granted an extension to 31 October 2020. We therefore plan to bring Renfrewshire HSCP's 2019/20 Annual Performance Report to the next IJB meeting for approval and we will publish the Report online by September 2020.

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

List of Background Papers – None.

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Any enquiries regarding this paper should be directed to Frances Burns, Head of Strategic Planning and Health Improvement
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Dashboard Indicators








Appendix 1

	Perf.	Target
Reduce the rate of pregnancies for those under 16 years (rate per 1,000 population)	1.5	3.1
Uptake rate of child health 30-month assessment	95.5%	80%
At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation	94%	80%
Number of carers accessing training	192	165
Smoking cessation - non-smokers at the 3 month follow up in the 40% most deprived areas	127	131
Exclusive breastfeeding at 6-8 weeks	20.5%	21.4%
% of diabetic foot ulcers seen within 4 weeks in NHS GGC	81.2%	90%
% of long term care clients receiving intensive home care (national target: 30%)	27%	30%
Reduce the percentage of babies with a low birth weight (<2500g)	7.1%	6%
Sickness absence rate for HSCP NHS staff (%)	4.75%	4%
Exclusive breastfeeding at 6-8 weeks in the most deprived areas	11.5%	19.9%
Number of delayed discharge bed days	8,161	4,126














Renfrewshire Integration Joint Board Scorecard 2019-2020

Performance Indicator Status		Direction of Travel		Target Source	
	Target achieved		Improvement	N	National Target
	Warning		Deterioration	B	NHSGGC Board Target
	Alert		Same as previous reporting period	L	Local Target
	Data only			M	MSG Target


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	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Exclusive breastfeeding at 6-8 weeks	23.4%	24.4%	Dec 19 20.5%	21.4%			B
Number of Alcohol Brief Interventions	549	306	224	-	-		-

National Outcome 2		People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community					
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Percentage of clients accessing out of hours home care services (65+)	89%	89%	Dec 19 89%	85%			L
Average number of clients on the Occupational Therapy waiting list	302	349	¹ Sep 19 365	350			L
People newly diagnosed with dementia have a minimum of 1 year's post-diagnostic support	100%	100%	100%	100%			N
Percentage waiting for dementia post-diagnostic support within 12 week standard	-	-	25%	2019-20 data will establish baseline	-		N

Appendix 2

Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Number of unscheduled hospital bed days; acute specialties (18+)	130,409	131,451	² Dec 19 90,947	Q3 92,982 Annual 123,976			M
Number of emergency admissions (18+)	16,961	17,083	² Dec 19 13,785	Q3 13,127 Annual 17,502			M
Percentage of long term care clients receiving intensive home care (national target: 30%)	28%	28%	27%	30%			N
Number of delayed discharge bed days	4,680	6,085	² Feb 20 8,161	Feb 20 4,126 Annual 4,501			M
Homecare hours provided - rate per 1,000 population aged 65+	459	444	Annual indicator available June 2020	-	-		-
Percentage of homecare clients aged 65+ receiving personal care	99%	99%	99%	-	-		-
Population of clients receiving telecare (75+) - Rate per 1,000	39.47	40.17	Annual indicator available June 2020	-	-		-
Percentage of routine OT referrals allocated within 9 weeks	-	52%	¹ Sep 19 46%	-	-		-
Number of adults with a new Anticipatory Care Plan	257	185	*156	-	-		-









Appendix 2







National Outcome 3		People who use health and social care services have positive experiences of those services, and have their dignity respected					
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Percentage of deaths in acute hospitals (65+)	41.9%	42.7%	Sep 19 40.3%	42%	↑	✓	L
Percentage of deaths in acute hospitals (75+)	40.7%	41.6%	Sep 19 39.0%	42%	↑	✓	L
Percentage of patients who started treatment within 18 weeks of referral to Psychological Therapies	100%	94.0%	92.3%	90%	↓	✓	N
Child and Adolescents Mental Health (CAMHS) - % of patients seen within 18 weeks	100%	82.5%	66.7%	80%	↓	✗	N
A&E waits less than 4 hours	84.9%	89.5%	Feb 20 84.0%	95%	↓	✗	N
Percentage of NHS staff who have passed the Fire Safety LearnPro module	67%	45.6%	80.2%	90%	↑	✗	B
Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks.	79%	86.5%	90.5%	100%	↑	⚠	B
Number of routine sensitive inquiries	178	249	*200	-	-		-
Number of referrals made as a result of the routine sensitive inquiry being carried out	8	1	*1	-	-		-

Appendix 2






National Outcome 4	Health and social care services are centred on helping to maintain or improve the quality of life of service users						
	17/18 Value	18/19 Value	19/20 Value	Target	Direction of Travel	Status	Target Source
Reduce the rate of pregnancies for those under 16 years of age (rate per 1,000 population)	3.1	2.4	1.5	3.1	↑	✓	N
At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation	85.1%	93.0%	94.0%	80%	↑	✓	N
Uptake rate of child health 30-month assessment	89%	93%	95.5%	80%	↑	✓	N
Percentage of children vaccinated against MMR at 5 years	97.0%	97.2%	Dec 19 98.0%	95%	↑	✓	N
Percentage of children vaccinated against MMR at 24 months	95.5%	96.0%	Dec 19 96.0%	95%	▬	✓	N
Reduction in the rate of alcohol related hospital stays per 1,000 population	9.0	8.8	Dec 19 8.2	8.9	↑	✓	N
Emergency admissions from care homes	-	823	746	-	-	📊	-
Percentage of paediatric Speech & Language Therapy wait times triaged within 8 weeks	100%	100%	100%	100%	▬	✓	B
Alcohol and Drugs waiting times for referral to treatment. % seen within 3 weeks	84.9%	71.4%	Dec 19 99.1%	91.5%	↑	✓	N






Appendix 2

Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Reduce drug related hospital stays - rate per 100,000 population	156.1	2018/19 data not available until Sep 2020	2019/20 data not available until Sep 2021	170			N
Reduce the percentage of babies with a low birth weight (<2500g)	7.0%	6.3%	Dec 19 7.1%	6%			B
Percentage of children seen within 18 weeks for paediatric Speech & Language Therapy assessment to appointment	73%	63%	100%	95%			B
Emergency bed days rate 65+ (rate per 1,000 population)	263	262	279	-	-		-
Number of readmissions to hospital 65+	1,337	1,368	1,366	-	-		-











National Outcome 5 Health and social care services contribute to reducing health inequalities							
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Smoking cessation - non-smokers at the 3 month follow up in the 40% most deprived areas	201	165	Dec 19 127	Q3 131 Annual 195			N
Exclusive breastfeeding at 6-8 weeks in the most deprived areas	14.5%	17.7%	Dec 19 11.5%	19.9%			B
Number of staff trained in sensitive routine enquiry	-	94	28	-	-		-
Number of staff trained in Risk Identification Checklist and referral to MARAC.	-	133 (Mental Health, Addictions, Children's Services Staff)	64	-	-		-









Appendix 2

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	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Number of carers accessing training	242	229	Dec 19 192	Q3 165 Annual 220			L
Number of adult support plans completed for carers (age 18+)	-	93	Dec 19 88	-	-		-
Number of adult support plans declined by carers (age 18+)	-	78	Dec 19 27	-	-		-
Number of young carers' statements completed	-	78	Dec 19 51	-	-		-

National Outcome 7		People using health and social care services are safe from harm					
Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Number of suicides	23	13	Data available 2020. No update as yet	-	-		-
Number of Adult Protection contacts received	2,830	2,723	Dec 19 1,875	-	-		-
Total Mental Health Officer service activity	200	723	683	-	-		-
Number of Chief Social Worker Guardianships (as at position)	117	113	110	-	-		-
Percentage of children registered in this period who have previously been on the Child Protection Register	23%	24%	³ Sep 19 28%	-	-		-

Appendix 2

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							
Performance Indicator	17/18 Value	18/19 Value	19/20 Value	Target	Direction of Travel	Status	Target Source
% of health staff with completed TURAS profile/PDP	75.8%	48.7%	49.3%	80%			B
Improve the overall iMatter staff response rate	59%	64%	*Result currently unavailable	60%			B
% of complaints within HSCP responded to within 20 days	76%	81%	78%	70%			B
Sickness absence rate for HSCP NHS staff	5.5%	5.39%	4.75%	4%			N
Sickness absence rate for HSCP Adult Social Work staff (work days lost per FTE)	15.71	17.43	Dec 19 13.64	Q3 11.7 days Annual 15.3 days			L

National Outcome 9 Resources are used effectively in the provision of health and social care services							
Performance Indicator	17/18 Value	18/19 Value	19/20 Value	Target	Direction of Travel	Status	Target Source
Formulary compliance	79.7%	78.5%	Feb 20 78.2%	78%			L
Prescribing cost per treated patient	£83.70	£83.23	Feb 20 £85.56	£86.63			L
Total number of A&E attendances	56,797	61,174	60,238	56,119			M
Total number of A&E attendances (18+)	44,684	47,718	47,295	45,121			

Appendix 2

Performance Indicator	17/18	18/19	19/20	Target	Direction of Travel	Status	Target Source
	Value	Value	Value				
Care at Home costs per hour (65 and over)	£22.83	£26.40	Annual Indicator Due early 2021	-	-		-
Direct Payment spend on adults 18+ as a % of total social work spend on adults 18+	4.25%	5.80%	Annual Indicator Due early 2021	-	-		-
Net residential costs per week for older persons (over 65)	£414	£277	Annual Indicator Due early 2021	-	-		-
Prescribing variance from budget	3.95% over budget	0.5% over budget	2.61% under budget	-	-		-
% of new referrals to the Podiatry Service seen within 4 weeks in Renfrewshire	96.6%	95.4%	90.1%	90%			B
% of new referrals to the Podiatry Service seen within 4 weeks in NHS GG&C	97.4%	93.5%	91.4%	90%			B
% of diabetic foot ulcers seen within 4 weeks in Renfrewshire (Clyde)	93.7%	91.1%	81.7%	90%			B
% of diabetic foot ulcers seen within 4 weeks in NHS GG&C	90.5%	87.4%	81.2%	90%			B

Notes

* Denotes an indicator where year-end data is unavailable due to the impact of the COVID-19 pandemic impact on services.

1. Average number of clients on the Occupational Therapy waiting list and Percentage of routine OT referrals allocated within 9 weeks

Data recording for these indicators is moving to a new system; comparable data is currently unavailable for year-end.

2. Number of emergency admissions (18+) and Number of unscheduled hospital bed days; acute specialties (18+)

Please note that this data remains provisional at December 2019 and will be subject to change.

3. Percentage of children registered in this period who have previously been on the Child Protection Register

Quarter 3 data for this indicator is unavailable until late June 2020.