
To: Renfrewshire Integration Joint Board

On: 16 September 2016

Report by: Chief Officer

Subject: Renfrewshire HSCP Performance Management Exception Report

1. Summary

1.1 It was agreed that an update on performance would be presented at all IJB meetings. The full scorecard updating all performance measures will be presented twice yearly, with the next one to be reported at the 25th November 2016 meeting.

1.2 This report provides an update on four indicators from the Performance Scorecard 2016/17 that were discussed at the IJB in June 2016:

- % of clients on the Social Work Occupational Therapy (OT) waiting list allocated a worker within 4 weeks;
 - % of long term clients receiving intensive home care
 - % of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks;
 - The number of non-smokers at the 3 month follow up in the 40% most deprived areas.
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2. Recommendation

It is recommended that the IJB:

2.1 Note the updates on performance in Occupational Therapy, Home Care, Community Mental Health and Smoking Cessation and supports the remedial actions proposed.

2.2 Note that the full scorecard updating all performance measures will be presented at the 25th November 2016 meeting.

3. Exception Reporting

3.1 Background

The Performance Report 2015/16 presented at the last IJB meeting on 24th June 2016 has a range of performance measures across health and adult social work. The full scorecard will be presented to the IJB showing performance at mid year. Exception reports will be taken to all IJB meetings.

- 3.2 An exception report on two health measures and two social work measures are included in this report. All these measures show an improvement in performance. The Occupational Therapy and the Primary Care Mental Health referral targets have not yet been achieved but good progress has been made in both areas.
- 3.3 A summary of performance on the four measures is included at Appendix one. Detailed exception reports are included in Appendix two.

3.4 **Red status indicator - Social Work Occupational Therapy (OT) waiting list allocated a worker within 4 weeks**

There are two performance measures for Social Work OT. The average number of clients on the OT waiting list and those on the waiting list allocated a worker within 4 weeks. The target for the average number of clients on the waiting list is a maximum of 350 and at March 2016 this was achieved, with 297 clients on the waiting list. The second measure of allocating a worker within 4 weeks for non critical cases is proving more challenging.

There has been an increase of around 50% in referrals to Adult Services over the past 3 years. Requests for OT assessments constitute a substantial element of these referrals. Over this period the OT service has been reorganised, resulting in improved working practice. Despite this, the upward trend in referral rates has continued and increased productivity by OTs has a consequential impact on both equipment and adaptation budgets.

Quarter one in 2016/17 shows 50% of clients on the OT waiting list were allocated a worker within 4 weeks; an increase from 20% at March 2016 but still less than the 70% target.

It remains a challenge to allocate non critical cases with the 4 week period due to the 50% increase in referrals over the past three years and the increasing complex needs that service users present with. Please see appendix 2 for more detail.

3.5 **Amber status indicator - Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks**

At July 2016, 94% of Primary Care Mental Health Team patients were referred to their first appointment within 4 weeks, 6% below the 100% target but an increase of 6% on the financial year end figure of 88% (red status). While there was a further dip in April 2016 to 60%, July's performance of 94% now shows the current status as amber.

Over this period GP venue refurbishment has caused difficulty in operating appointments for face to face assessment and treatment in

two locations. This issue has now been addressed by relocating staff and offering appointments in alternative venues.

Two new have now been filled and are expected to start in September 2016. This will improve the team's capacity and flexibility in assessing and will be crucial in expanding our ability to provide face to face appointments. This was an area where most of the previous 8 breaches were noted. Continued improvement is expected throughout 2016.

3.6 **Green status indicators – Home Care and Smoking Cessation**

Home Care - good progress has been made in the performance of care at home service during 2015/16. Performance at March 2016 was the first time the national target of 30% of long term care clients receiving intensive home care (10 hours plus) was achieved. This is reflective of the increasingly complex needs of individuals who are being supported at home; it is anticipated that the figure will continue to rise as the older population increases.

Smoking cessation - at March 2016, there were 254 non smokers at the 3 month follow up in the 40% most deprived areas, an encouraging 48.5% above the annual target of 171. Quarter 4, January-March 2016 saw the biggest increase with 83 quits against the quarter target of 43.

To maintain performance in 2016/17, all clinics are now open access to maximise accessibility with no booking or referral required. In addition, clinics will run in a rolling format, therefore clients can access the service at any point and stay for the duration they require to achieve 12 weeks' Smokefree. A shared-care pharmacy clinic has also been established in Ferguslie Park.

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. However a positive impact has been noted for smoking cessation in the 40% most deprived areas, where 2015/16 performance was 48.5% above target. This is an encouraging result, which should contribute to reducing the health gap across communities.

If required following implementation, the actual impact of the recommendations and the mitigating actions will be reviewed and monitored, and the results of the assessment will be publicised on the Council's website.









- 8. **Health & Safety** – None
- 9. **Procurement** – None
- 10. **Risk** – None
- 11. **Privacy Impact** – None

Author:



- Clare Walker, Planning and Performance Manager
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Renfrewshire Integration Joint Board Scorecard 2016/17


Appendix 1

PI Status		Direction of Travel	
	Alert		Improvement
	Warning		Deterioration
	OK		Same as previous reporting period
	Unknown		
	Data Only		


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.

PI code & name	2014/15		2015/16		Latest 2016/17		Target	Direction of Travel	Status			
	Value		Value		Value							
Local Indicators												
HSCP/AS/HC/02	Percentage of long term care clients receiving intensive home care (National Target: 30%)		28%		31%		Annual %		30%			
HSCP/AS/OT/01	Percentage of clients on the OT waiting list allocated a worker within 4 weeks (Social Work only)		13%		20%		50%		70%			

National Outcome 3. People who use health and social care services have positive experiences of those services, and have their dignity respected.

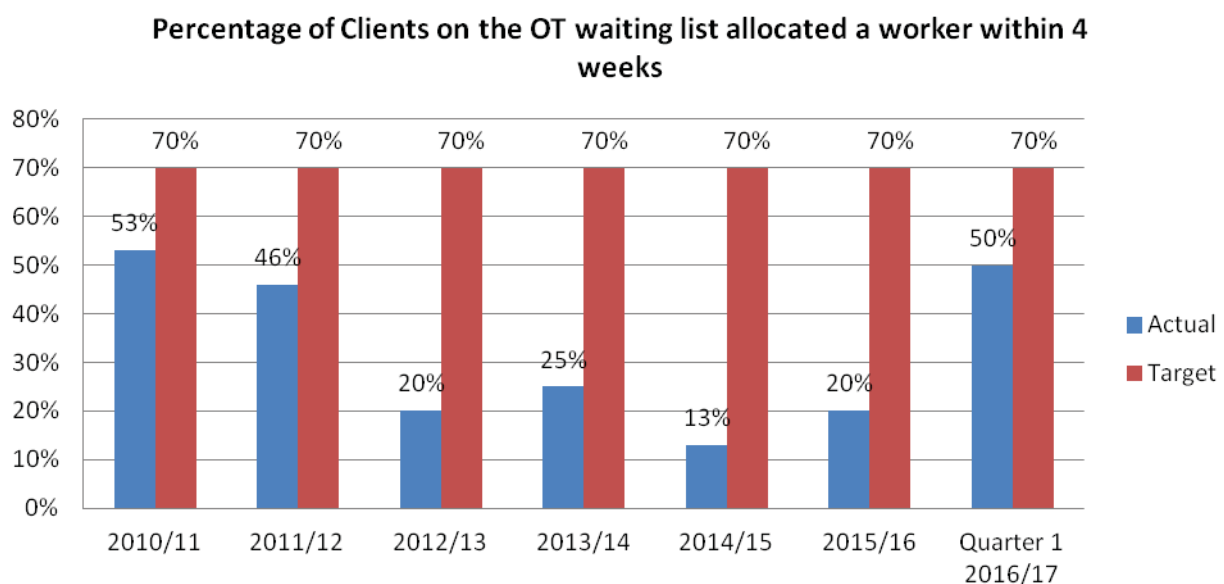
PI code & name	2014/15		2015/16		Latest 2016/17		Target	Direction of Travel	Status			
	Value		Value		Value							
Local Indicators												
HSCP/MH/PCMH/03	Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks		-		88%		94%		100%			

National Outcome 5. Health and social care services contribute to reducing health inequalities.

PI code & name	2014/15		2015/16		Latest 2016/17		Target	Direction of Travel	Status			
	Value		Value		Value							
HSCP/HI/AD/01	Smoking cessation - non smokers at the 3 month follow up in the 40% most deprived areas		-		254		Not yet available		171			

Exception Report: Percentage of clients on the OT waiting list allocated a worker within 4 weeks – Outcome 2

Measure	Percentage of clients on the OT waiting list allocated a worker within 4 weeks. Social Work only target.
Current Performance	During the first quarter of 2016/17, 50% of clients on the waiting list were allocated a worker within 4 weeks. Current performance is lower than the target of 70%, but has significantly improved on the 2015/16 year end figure of 20%.
Lead	Ian Beattie, Head of Health & Social Care Services, Paisley and Mandy Ferguson, Head of Health & Social Care Services, West Renfrewshire.



Commentary

There has been a significant increase of around 50% in referrals to Adult Services over the past 3 years. Requests for OT assessments constitute a substantial element of these referrals, resulting in considerable additional demand on OT services. At Quarter 4 in 2014/15, 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, resulting in improved working practice. Despite this, the upward trend in referral rates has continued, while the resource to respond has remained static. The exception to this is the Reablement service. Increased productivity by OT's has a consequential impact on both equipment and adaptation budgets, and there has been particular pressure on waiting times for OT assessment.

Performance in relation to OT assessment, the provision of equipment and the installation of small adaptations has actually improved over the period and the waiting list numbers have reduced.

Actions to Address Performance

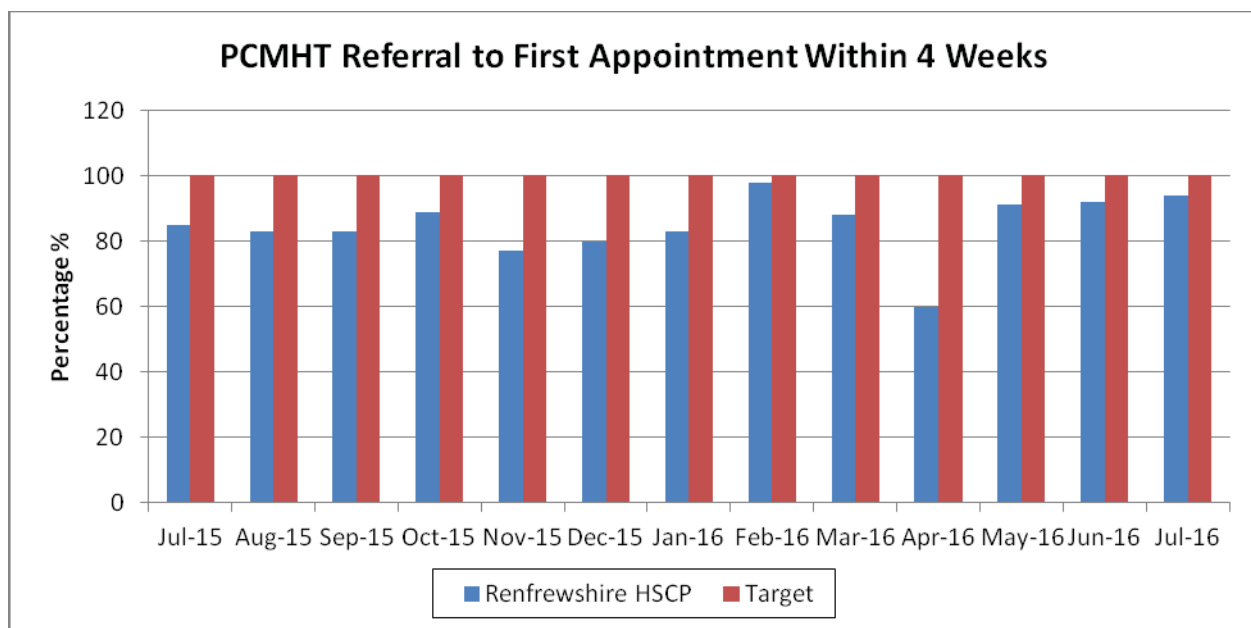
- Vacant posts in the locality teams have now been filled which has increased capacity and reduced waiting times. We continue working to improve performance and pathways in Occupational Therapy across the Partnership.
- To address high levels of demand in particular areas, managers are now allocating OT work across the whole Renfrewshire area to ensure a more even distribution.
- OT duty systems ensure non complex cases are dealt with quickly and not added to the waiting list.
- Urgent cases will be seen quicker and lower priority may wait longer.
- Work to increase collaboration and pathways between community based social care and health OTs. 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

- Over the next 12 months overall performance and waiting times will be closely monitored.
- OTs are currently performing well and coping with additional demand and increases complexity of referrals. It will remain a challenge to allocate non critical cases within a 4-week period and consideration should be given to revising this target.

Exception Report: Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks – Outcome 3

Measure	Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks
Current Performance	At July 2016, 94% of patients were referred to first appointment within 4 weeks against a target of 100%
Lead	Katrina Phillips, Head of Mental Health, Addiction and Learning Disability Services



Commentary

At July 2016, 94% of Primary Care Mental Health Team patients were referred to their first appointment within 4 weeks, 6% below the 100% target but an increase of 6% on the financial year end figure of 88% (red status). While there was a further dip in April 2016 to 60%, July's performance now means the status has returned to amber.

Currently (at August 16), the Doing Well service has capacity to ensure all telephone assessments are carried out within 28 days. The service has adjusted over the last few months to staff leaving posts and subsequently recruiting to these posts.

Over this period GP venue refurbishment has caused difficulty in addressing appointments for face to face assessment and treatment in two locations. This issue has now been addressed by relocating staff.

At times, patient expectations and demands do not meet the target demands of the service. For example, patients self-referring then advising they wish an assessment appointment outwith the 4-week target; or patients requesting a particular venue and matching the request to availability of clinical space.

Actions to Address Performance

Currently the Team Leader at Doing Well is in the process of re-allocating staff resources to meet the current demand across Renfrewshire GP practices regarding both assessment and treatment.

Doing Well staff are using admin time to open up extra clinics/appointments to meet the team's demand for assessment and treatment.

Staff are aware of caseload management and improvements in performance and the need for further continued effort are covered at team meetings. The Team Leader is monitoring team assessment activity through PIMS and BOXI systems for accuracy and demand.

The Team Leader supports staff in monitoring/ensuring prompt attention to demand for face to face assessments.

Two new staff have been recruited and will start with Doing Well in the next 8 weeks. This will enable the service to increase its ability and flexibility to meet patients' demands on the service in the forthcoming months.

The Team Leader attends monthly one-to-one management meetings with the Service Manager to review capacity and demand.

Timeline For Improvement

Performance figures for Renfrewshire have shown an improvement for assessment of 94% for July 2016. Assessments = 136 < 28days, 8 > 28 days.

Team Leader is monitoring assessment activity on a weekly basis by manual and electronic measures.

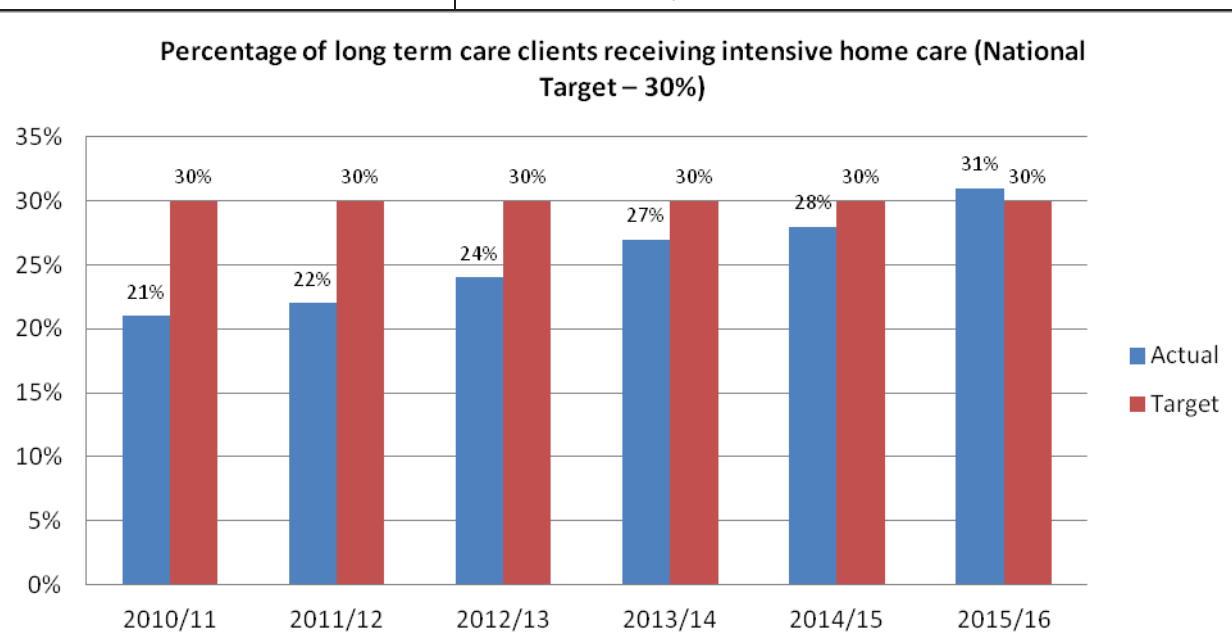
Two new members of staff have been recruited and are expected to start in September 2016. This will improve the team's capacity and flexibility in assessing and will be crucial in expanding our ability to provide face to face appointments. This was an area where most of the 8 breaches were noted.

The Service Manager and Team Leader expect continued improvement in August and September 2016.

With full staffing available in October, the 100% target is achievable.

Exception Report: Percentage of long term care clients receiving intensive home care Outcome 2

Measure	Percentage of long term care clients receiving intensive home care (National Target: 30%) Social Work only target.
Current Performance	As at year end 2015/16, 31% of long term care clients received intensive home care services. Current performance exceeds the national target of 30%.
Lead	Ian Beattie, Head of Health & Social Care Services, Paisley and Mandy Ferguson, Head of Health & Social Care Services, West Renfrewshire.



Commentary

Good progress has been made in the care at home service during 2015/16. For the first time the national target of 30% of long term care clients receiving intensive home care (10 hours plus) has been met. This is reflective of the increasingly complex needs of individuals who are being supported at home and it is anticipated that the figure will continue to rise as the older population increases.

Actions to Maintain Performance

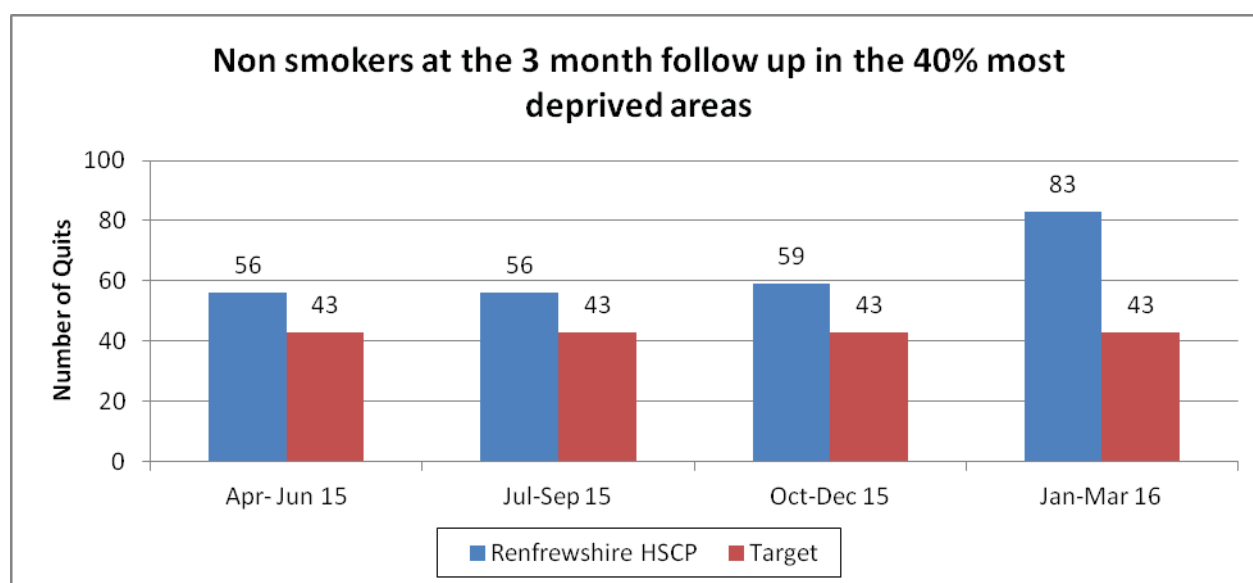
Care at home services continue to focus on reablement intervention and reviewing care packages to ensure that the most vulnerable clients receive the right level of support and that independence is maximised wherever possible.

The procurement of the scheduling and monitoring system will enable improved management information that will better enable the service to monitor service delivery in real-time. This will be introduced over 2017/18.

We continue to monitor the levels of care to ensure that clients receive the appropriate levels of support to meet their care needs.

Exception Report: Smoking cessation - non smokers at the 3 month follow up in the 40% most deprived areas – Outcome 5

Measure	Smoking cessation - non smokers at the 3 month follow up in the 40% most deprived areas
Current Performance	At March 2016, there were 254 non smokers at the 3 month follow up in the 40% most deprived areas
Lead	Fiona Mackay, Head of Strategic Planning and Health Improvement



Commentary

At March 2016, there were 254 non smokers at the 3 month follow up in the 40% most deprived areas, an encouraging 48.5% above the annual target of 171. Quarter 4, January-March 2016 saw the biggest increase with 83 quits against the quarter target of 43.

Actions to Maintain Performance

- The number of clinics running each week will be maintained.
- A shared-care pharmacy clinic has been established in Ferguslie Park.
- All clinics are now open access to maximise accessibility; no booking or referral required.
- All clinics now run in a rolling format, therefore clients can access the service at any point and stay for the duration they require to achieve 12 weeks' Smokefree.
- Marketing materials have been improved and updated.
- Referral routes have been modernised to include digital referral via the NHS Board website. A Cognitive Behaviour Therapy programme is also being piloted which links to the 'Living Life to the Full' programme. This will help clients gain more self-help materials for coping with stress, anxiety and low mood with the potential to reduce relapse.