# Adult Health and Social Care Performance Report
# Quarter One - 2022/23

Midlothian

| Progress in delivery of strategic outcomes |
| --- |

**Our Vision**: People in Midlothian are enabled to lead longer and healthier lives.
**Our Values:** Right support, right time, right place.

Midlothian Integration Joint Board plan and direct the services that are delivered by Midlothian Health and Social Care Partnership (HSCP). The HSCP is a partnership between NHS Lothian and Midlothian Council and is responsible for services that help Midlothian residents to live well and get support when they need it. This includes all community health and social care services for adults in Midlothian and some hospital based services such as Accident and Emergency.

In order to meet the legal requirements of the Public Bodies (Joint Working) (Scotland) Act 2014, the HSCP was required to develop, consult on, and publish a new 3 year Strategic Plan in 2022. The new Strategic Plan for 2022-25 was published in April 2022.

### HSCP COVID-19 Response
The Health and Social Care Partnership, its partners and the communities it serves continued to be impacted by the COVID 19 pandemic. A recent spike in infections has caused continued significant pressure on our workforce due to absences. The Health and Social Care Partnership has maintained delivery of services and continues to work with its partners to ensure resources are being managed and deployed to cover staff absences where needed and continue to develop our remobilisation plans.

### Seasonal Flu/COVID Booster Programmes
-The covid spring booster vaccination campaign officially closed on 30.06.22. There was an uptake of 85.3% of this eligible cohort. Those individuals who missed their appointment due to being infected with covid are still being encouraged to come forward over the coming weeks.

-The 5-11 year old children, covid vaccination programme continues over the summer. The uptake for 1st doses as of 26.07.22 is 24.6% (31.7% for at risk children). We are now calling patients for their second dose and children turning 5. The uptake for 2nd doses as of 26.07.22 is 8.1% (20.8% for at risk children).

-The Rosewell Steading Vaccination site officially opened on Monday 4th July. 5-11 year old clinic will continue to be run from Midlothian Community Hospital on a Saturday to enhance patient experience for this age group.

-The Midlothian vaccination team have recently taken on responsibility for all vaccinations that were part of the Vaccination Transformation Programme from the GP's to HSCP. Shingles and Pneumococcal vaccination uptake is increasing gradually as this progresses.

-Flu/covid booster planning is underway and we have received JCVI Guidance on the covid booster vaccine and timelines have yet to be approved by ministers.

### Service Transformation
On 20 June 2022 the Scottish Parliament published the National Care Service Bill which will provide the foundation for the NCS. Alongside the Bill, explanatory notes, a policy memorandum, a financial memorandum and a delegated powers memorandum were also published. The Bill is now in consultation stage 1. The consultation was launched on 8 July and it will remain open until 2 September.

## Justice Service

Activity during Q1 saw Justice in Midlothian going live with our bespoke Bail Services. Through the introduction of Midlothian Bail Services we intend to provide the Courts a credible alternative to the use of remand where individuals are assessed as needing support and supervision to meet their bail conditions. It is intended to reduce the number of individuals normally resident in Midlothian being held on remand pending trial, or for reports after conviction, who with appropriate safeguards in respect of public protection could be released on bail to the community. The objectives of bail supervision will be to:

• To increase the confidence of courts in the successful completion of bail periods through the availability of supervision;
• To reduce the number of individuals remanded to custody;
• To encourage greater confidence in the use of non-custodial disposals by sentencers as a result of the experience of successful completion of periods on bail supervision;
• To provide appropriate support to individuals in the community, which minimises disruption to families, employment and housing, while ensuring compliance with bail conditions.

As of 1st April 2022 Midlothian provided supervision and monitoring for those made subject to bail with a supervision condition (Supervised Bail). This is in collaboration with our third sector partner Change Grow Live and Edinburgh Sheriff Court Social Work Services. This will enable us to fulfil the Scottish Government incentive to increase the provision and take up of Supervised Bail across Scotland. From 17th May 2022 an additional bail service became available across Scotland: bail with electronic monitoring (EM bail). Our Justice Social Work team will be involved in the assessment for those who may be suitable for EM bail but will not be involved unless there is also a condition of supervision. EM bail will be managed by the EM Service provider; the current contract holder is G4S. Management within the team wrote a procedure which ensures that social work staff based at Edinburgh Sheriff Court, and relevant courts in other Local Authority areas, have a clear point of contact with Midlothian Justice Service. It is anticipated that supervised bail will also be available for Midlothian residents who are appearing in other courts across Scotland. This will enable them to receive timely and accurate information regarding those who are being considered and assessed for a Supervised Bail Order.

## Substance Misuse

Key services based in Number 11 in Dalkeith continued to provide services in Q1 including outreach treatment, injecting equipment provision [IEP], naloxone, information/advice. There has been an impact of Covid related sickness and absence on service delivery. There are also challenges with recruitment at the moment. However, the Midlothian Substance Use Service continues to support and treat those individuals who are most at risk. This includes the provision of Buvidal [an injectable form of Buprenorphine].The caseload of the SUS service in Q1 averaged around 300. As a proxy measure, this indicates that at any given point, 300 people were provided treatment and support as a protective factor in minimising harm. As a consequence of a pressure on capacity due to recruitment challenges, consistently high number of people being treated and impacts of Covid related illness, the service was unable to deliver rapid access to new patients. However, the service reports a significant reduction in Near Fatal Overdoses with a particularly significant reduction in harms and causes for concerns at the supported accommodation units that receive support from Assertive Outreach staff. Staff recruitment is underway to employ 2 WTE Non-Medical Prescribers along with other new nursing and 3rd sector staff. The work on these posts will be to augment service capacity to deliver the Medication Assisted Treatment Standards.

Naloxone
Accidental overdose is a common cause of death among users of heroin, morphine and similar drugs, which are referred to as opioids. Naloxone is a drug which temporarily reverses the effects of a potentially fatal overdose with these drugs. Administering Naloxone provides time for emergency services to arrive and for further treatment to be given. Services and MELDAP have continued the roll out of training and providing ˜Take Home Naloxone" kits (hereafter referred to as THN) or Nyxoid [Nasal Spray]. These are issued to people at risk of opioid overdose, their friends and family and service workers in order to help prevent overdose deaths. Any member of the public over the age of 16 can be trained in the use of Naloxone allowing them to carry and administer it as well as recognise the signs of someone who may be experiencing an overdose. MELDAP is currently working with Midlothian Council to:
. Promote Naloxone training and carrying amongst their staff group.
. Include Naloxone training and carrying with the 1st aid trainers' course.
. Look to try and ensure that there are Naloxone trained members of staff within all public facing buildings where possible.

Staff would be volunteering for this training, there would not be any compulsion to carry Naloxone.

Midlothian and East Lothian Drugs and Alcohol Partnership (MELDAP) has a primary aim to coordinate the design, delivery and evaluation of drug and alcohol services across East Lothian and Midlothian.

We continue to work with partners locally to provide a number of initiatives including:
• A direct Contact Service
• Advocacy services
• Increased support to families and loved ones.
• SMART Recovery Groups
• Horizons Recovery Cafe
• Recovery College
Provision of services to children, young people and families affected by substance use
• Youth and community initiatives
• Linking in with third sector organisations (Alcohol Education Trust, Re-Solv, 6VT)
• Continue to provide phones, top-ups and tablets to help people get or stay connected

We are also developing a new pilot out of hour's provision. These initiatives assist individuals to reduce the harmful impact of long-term drug use.

Drug Trends Service staff have provided feedback that there has been an increase in cocaine use through snorting, injecting and/or smoking. There continues to be concerns about the availability of "street benzo's" for example, illicit Diazepam, Etizolam and Alprazolam [Xanax]. These tablets are likely to be used in conjunction with other drugs [poly drug use] increasing the level of risk.

**Learning Disabilities**
The effective use of the Community Living Change Fund represents an important part of delivering high quality community based support for people with Complex needs in Midlothian and avoiding hospital delays and out of area placements. The formation of a Complex Care Expert Panel was agreed at the June Finance and Performance Group and this will oversee spending of Midlothian's Complex Care Community Fund up to March 2024.

A very successful conference for all Complex Care stakeholders was held in June, and a staff training video created by members of People First Midlothian was launched. The conversations at the conference are helping us to shape the next phase of this work, including the development of the Positive Behavioural Support programme and the Dynamic Support Register.

The Learning Disability Human Rights Expert Panel has held two events bringing together a diverse group of people with learning disabilities to inform how we address Human Rights and Supported Decision Making in Midlothian. The expert panel is now being expanded to ensure that people with lived experience are at its core.

The Day Service review and redesign work has been delayed by the limitations imposed by COVID 19 guidance, but services are now at, or near, capacity. Human Threads, a large scale, multi-sensory exhibition conceived in partnership with the Tramway in Glasgow, runs from 11th May - 28th Aug 2022. The work is informed by individuals with profound and multiple learning disabilities and represents the culmination of years of pioneering research by Artlink and the Cherry Road Learning Centre.

The flats at Bonnyrigg High Street are scheduled for completion in September 2023. Designs for Primrose Lodge in Loanhead are complete, and the property is now vacant but awaiting use for a delayed 12 week decant from Teviot Court.

**Older People**
Extra Care Housing: As with many other areas, Midlothian faces many challenges in addressing the housing and care needs of an ageing population with increasingly complex requirements. Extra Care Housing is a model of accommodation and care that supports people to live in their own tenancy. Work was progressed on 3 sites (Dalkeith, Bonnyrigg and Gorebridge) to provide 106 ECH bungalows or flats.

Care Homes: Midlothian has 10 older people's care homes, 2 of which are HSCP run with one being an intermediate care facility. The remaining 8 are privately run either by private companies, charitable organisations or independent care homes. Health Boards and local Health and Social Care Partnerships continue to carry responsibilities for the clinical and professional oversight of the care provided to people resident in care homes in line with the Scottish Government guidelines (May 2020).

The Care Home Support Team provided substantial support to care homes for older people to address the challenges faced throughout the pandemic. Examples include providing direct support to meet staffing challenges, input to meet the complex care needs of individual residents, vaccination, testing of staff and residents, support with reintroduction of visiting and practical and emotional support to staff affected by the impacts of the loss of residents in unprecedented numbers. Moving into a new phase of Covid-19 the CHST will continue to provide support in a more planned, proactive way, working alongside Care Home Staff in an advisory role, whilst remaining responsive when necessary. The focus will remain on care provision, applying principles of Quality Improvement, through project-based work.

Care at Home: Care at Home continues to be a key contributor to the HSCP vision for people to receive the right care in the right place; in their home and community as far as possible. It supports efforts to reduce length of hospital stay, as well as admission avoidance. Care at Home is currently provided by the HSCP and external providers. Care at Home services continue to meet community needs by allocating new packages of care weekly. Midlothian services continue to experience significant ongoing recruitment pressures, which are reflected nationally, including recruitment of office-based staff. Despite this pressure, Care at Home services worked hard to ensure packages of care continued to be delivered. New contracts were awarded to external Care at Home providers in 2021 and work is ongoing to ensure contracts are implemented effectively, including proactive monitoring and audit activity.

**Carers**
New carer contract started 1st July 2021. VOCAL as the main carer support provider have been recruiting and developing capacity for delivery within the service since that time. Additionally VOCAL had begun expanding the service in response to additional resource funding, which the contract amendments to enable payment to be made, hope to be done within Q1. This funding will take in to account an increase in capacity within some areas of service beginning October 2021, and further so during Q1 2022/23. Amended contract has been issued to VOCAL. Additional resource to fund a Dementia carer support practitioner is in place, and changes to Alzheimer Scotland is being finalised for issue. Discussions and planning for 2022/23 carer funding for Adult and Young Carers, and underspend from 2021/22 will be taken forward during Q2.

Carer Strategy being finalised and expected to be published online at the beginning of Q2.

**Mental Health**
Midlothian has invested strongly in its Primary Care Mental Health Team, which, since 2019, has been developed, and rolled out to all 12 GP practices, offering direct access to mental health triage, assessment and brief intervention for people aged 18-65. The team is multi-disciplinary and delivers a community-based access service in partnership with the General practitioners, voluntary sector, third sector and other relevant statutory services.

Further developments and opportunities has enabled Midlothian the opportunity to submit an application for further funding through Mental Health and Well Being monies for next four years to improve, develop and expand individuals access to Primary Care Mental Health and well-being Services.

Individual Placement Support has been impacted by Covid 19 and subsequently the current post holder has left the post. This post will be advertised in due course. Prior to the post being vacant the service was providing support to 4 individuals into employment and/or Further Education.

There continues to be strong partnership working between Housing, Health and Social care and third sector providing support and housing for individuals with complex needs, through the housing first model.

**Adults with Long Term Conditions, Disability and Impairment**
Awareness training sessions for HSCP staff, provided by Deaf Action and Sight Scotland have also not been possible due to the pandemic and training over Zoom or Teams cannot provide practical, hands on training. Sight Scotland continue to provide information sessions to staff in relation to the services they provide. Work has commenced with Deaf Action to review the work being undertaken.

In response to the closure to the public of the Audiology Department due to Covid restrictions volunteers continue to uplift peoples' faulty hearing aids from their homes and delivered the aids to Midlothian Community Hospital for an Audiology technician to repair, and then return the repaired aids back to the individuals.

Hybrid model up and running for delivery of face to face and digital for all weight management programmes. Digital devices secured for people referred so they are able to decide what options best suits their needs.

Improving the Cancer Journey (ICJ) - As we shift into year 2 of operation, monthly targets increase from seeing 13 to 17 people per month (51 people per quarter). As well as ICJ colleagues having a presence at the Edinburgh Cancer Centre, local work is focusing on primary care engagement (tests of change within 3 GP practices). Midlothian has a new peer support group which meets monthly. A focused look at data relating to carers shows that Midlothian has the highest percentage of carers using ICJ in the Lothians. This is supported by the positive working relationships in place between ICJ and VOCAL.

## Sport and Leisure

Gorebridge Leisure Centre which was utilised as a mass vaccination centre until 03/04/22 began to operate as a leisure centre on 11/04/22 with the gym re-opening. The main hall is currently undergoing remedial work but OAP indoor bowling groups and PEEP groups have been accommodated. The works are scheduled for completion by the end of July following which a fuller programme will return.

Ongoing challenges around the global supply of chlorine products for swimming pools has meant that all spa pools are currently unavailable to reduce the usage of chlorine and to prevent any swimming pool closures. The supply of product is unpredictable and precarious and may result in reduced swimming pool availability in the coming months. Contingency plans are in place to ensure as little disruption as possible but should the situation deteriorate some periodic pool closures may be inevitable.

The Active Schools Team have continued to ensure a safe & positive return to sport, re-engaging and rebuilding our Active Schools programme to provide opportunities for our Midlothian young people. The programme has continued to grow with more opportunities to be active being available and more volunteers working in our programme:-

• Term 3 saw 1600 pupils from primary & secondary participating in Active Schools Clubs in school & community settings. This year we relaunched our face to face events, which were well attended with positive feedback from schools.
• We successfully launched our Active Schools Leadership Academy (ASLA) at the beginning of the academic year, upskilling Midlothian young people through a programme of training & providing supported coaching opportunities to help them reach positive destinations & invest in our local workforce. This also created more free opportunities for younger pupils. 12 pupils from 4 high schools successfully completed 9 training courses which finished in term 3. 12 new free clubs were delivered by our young leaders. 164 Midlothian young people participated in these clubs.
• We have continued to expand the partners we work with, to enhance our programme including Edinburgh College, CLL & Home School Practitioners to allow us to offer more opportunities and also ensure our programme is accessible to all.
• We have continued to run new projects & initiatives, EG: Fit for Girls project which started in Jan and continued until June -Four workshops and surveys rolled out across 5 high schools in Midlothian led by 10 girls on the committee, consulting with approx. 80 girls. This project has provided girls in Midlothian with a platform to share experiences, stories and have open, honest conversations about taking part in PE and sport. The leaders have helped to inspire their peers through their workshops and allowed their voice to be heard whilst creating a sense of community for girls within their schools. • We have put plans in place and shared information with partners on our move to a wholly free activity model from August.

| Challenges and Risks |
|---|

**COVID-19**
The Health and Social Care Partnership, its partners and the communities it serves continued to be impacted by the COVID 19 pandemic. A recent spike in infections has caused continued significant pressure on our workforce due to absences. The Health and Social Care Partnership has maintained delivery of services and continues to work with its partners to ensure resources are being managed and deployed to cover staff absences where needed and continue to develop our remobilisation plans.

**A growing and ageing population**
Midlothian is the second smallest Local Authority in mainland Scotland but the fastest growing. This will continue to pose challenges for health and social care services whilst also changing some local communities. As people live for longer many more people will be living at home with frailty and/or dementia and/or multiple health conditions. An increasing number of people live on their own, and for some this will bring a risk of isolation.

**Higher rates of long-term conditions**
Managing long-term conditions is one of the biggest challenges facing health care services worldwide, with 60% of all deaths attributable to them. Older people are more susceptible to developing long-term conditions; most over 65s have two or more conditions and most over 75s have three or more conditions. People living in areas of multiple deprivation are at particular risk with, for example, a much greater likelihood of early death from heart failure. They are also likely to develop 2 or more conditions 10-15 years earlier than people living in affluent areas.

**Higher rates of mental health needs**
Many mental health problems are preventable, and almost all are treatable, so people can either fully recover or manage their conditions successfully and live fulfilling healthy lives as far as possible. The incidence of mental health issues in Midlothian, while similar to the rest of Scotland, is a concern. Living in poverty increases the likelihood of mental health problems but also mental health problems can lead to greater social exclusion and higher levels of poverty. People who have life-long mental illness are likely to die 15-20 years prematurely because of physical ill-health.

**Our services are under pressure**
People place a high value on being able to access effective health services when they need them. People expect to receive high quality care services when these are needed whether as a result of age, disability, sex, gender or long term health conditions. Yet there are a number of pressures on our services.

**Financial pressures**
Financial pressures on public services are well documented. There is no doubt that we need to do things differently: the traditional approach to delivering health and care services is no longer financially sustainable.
We have particular pressures in our disability services with challenges to meet complex needs in the community when in the past care settings may have been considered.

**Workforce pressures**
The Covid-19 pandemic has and will continue to influence the demand for, and deployment of, the health and care workforce for the foreseeable future.

There is reduced availability of staff with appropriate qualifications or skills, including General Practitioners, Social Care Workers and Staff Nurses. This impacts on service delivery and development.

The recent spike in Covid-19 positivity within the community has caused significant pressure across the whole system.

**Unpaid carers**
Unpaid carers fulfil significant, valuable and wide-ranging roles within Midlothian communities, helping to keep people with care and support needs within our communities. During the pandemic many people became carers for the first time, or saw changes to their caring role, resulting in them providing significantly more care for their elderly, sick or disabled family, friends and neighbours. Through this period services supporting carers continued to offer a range of support, including digitally, and by telephone, though services supporting the person they provide support to may have been reduced, e.g. respite and day services, impacting on carers. Further work is required to reduce the significant pressure and impact of caring that carers reported, by continuing to explore innovative options to enable support to be given to both carers and the cared-for, and for there to be opportunities for breaks from caring.

**Acute hospitals** Acute hospitals are under huge pressure due to unsustainable demand and financial restrictions. Investing in community based services and work with carers is required to minimise avoidable and inappropriate admissions and facilitate earlier discharge. By treating people closer to home, or in their own home the HSCP can support admission avoidance and improve people's outcomes.

# Adult Health and Social Care Service Plan Dashboard

## Adult, Health and Social Care

Midlothian

Successes and Challenges

### Corporate Performance Indicators (latest)
🔴 6  ✅ 7  ❓ 0  📊 8

### Service Plan Actions (latest)
🔴 0  ✅ 34  ❓ 0

### Service Plan PIs (latest)
🔴 2  ✅ 28  ❓ 2  📊 10

### Corporate PIs Off Target
PIs  🔴 6

% of invoices paid within 30 days of invoice receipt (cumulative)

% of internal/external audit actions progressing on target or complete this quarter.

Average time in working days to respond to complaints at stage 1

Percentage of complaints at stage 1 complete within 5 working days

Percentage of complaints at stage 2 complete within 20 working days

Performance against revenue budget

### Service Plan Actions Off Target
Actions 🔴 0

There are no Actions Off Target

### Service Plan PIs Off Target
PIs  🔴 1

Average wait time for social work services

### Service High Risks (latest)
⚠️ 0

There are no High Risks

### All Risks - Adult Social Care
Risks  ⚠️ 13  ✅ 9

Key PIs
- 🔴 Off Target
- ✅ On Target
- 📊 Data Only
- ❓ Data Not Yet Available

Key Actions
- ❌ Off Target
- ✅ On Target/Complete
- ❓ Data Not Yet Available

Key PIs
- 🔴 Off Target
- ✅ On Target
- 📊 Data Only
- ❓ Data Not Yet Available

Key Risks
- ⚠️ High Risk/Medium Risk
- ✅ Low Risk

# Adult Health and Social Care PI summary

| **Manage budget effectively** |
|---|

| Priorities | Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 | Feeder Data | Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Value | Value | Value | Status | Note | Short Trend | | | |
| 01. Manage budget effectively | Performance against revenue budget | £52.319 m | £50.868 m | £59.284 m | 🛑 | Off Target | ⬇️ | £59.113 m | | |

| **Manage stress and absence** |
|---|

| Priorities | Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 | Feeder Data | Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Value | Value | Value | Status | Note | Short Trend | | | |
| 02. Manage stress and absence | Average number of working days lost due to sickness absence (cumulative) | 17.10 | 4.92 | 4.83 | ✅ | **Q1 22/23:** On Target | ⬆️ | 10.53 | Number of days lost | 2,838.88 |
| | | | | | | | | | Number of FTE in service | 588.03 |

| **Complete all service priorities** |
|---|

| Priorities | Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 | Feeder Data | Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Value | Value | Value | Status | Note | Short Trend | | | |
| 03. Complete all service priorities | % of service priority Actions on target / completed, of the total number | 82.86% | 94.29% | 100% | ✅ | **Q1 22/23:** On Target | ⬆️ | 90% | NUMBER of service priority actions in total | 34 |
| | | | | | | | | | NUMBER of service priority actions on target / completed | 34 |

| **Process invoices efficiently** |
|---|

| Priorities | Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 | Feeder Data | Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Value | Value | Value | Status | Note | Short Trend | | | |
| 04. Process invoices efficiently | % of invoices paid within 30 days of invoice receipt (cumulative) | 96% | 92% | 96% | 🛑 | **Q1 22/23:** Off Target Service works to address delayed invoice payment, however, processing delays often result from invoices being queried with external providers. | ⬆️ | 97% | Number of invoices received (cumulative) | 361 |
| | | | | | | | | | Number paid within 30 days (cumulative) | 347 |

## Improve PI performance

| Priorities | Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 | Feeder Data | Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Value | Value | Value | Status | Note | Short Trend | | | |
| 05. Improve PI performance | % of Service PIs that are on target/ have reached their target. (does not include Corporate PIs) | 76.09% | 86.96% | 92.86% | ✅ | **Q1 22/23:** On Target | ⬆ | 90% | Number on tgt/complete or Data Only | 39 |
| | | | | | | | | | Number of PI's in total | 42 |

## Control Risk

| Priorities | Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 | Feeder Data | Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Value | Value | Value | Status | Note | Short Trend | | | |
| 06. Control Risk | % of high risks that have been reviewed in the last quarter | 100% | 100% | 100% | ✅ | **Q1 22/23:** Risks reviewed. No risks graded as 'high'. | ▬ | 100% | Number of high risks reviewed in the last quarter | 0 |
| | | | | | | | | | Number of risks that are graded as high | 0 |

## Implement Improvement Plans

| Priorities | Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 | Feeder Data | Value |
|---|---|---|---|---|---|---|---|---|---|---|
| | | Value | Value | Value | Status | Note | Short Trend | | | |
| 07. Implement Improvement Plans | % of internal/external audit actions progressing on target or complete this quarter. | 66.6% | 50% | 80% | 🛑 | **Q1 22/23:** Off Target 4 internal audit actions. 1 action 'off target' relating to Learning Disabilities and Physical Disabilities (IA.LDPD.02.1.AS). | ⬆ | 90% | Number of internal/external audit actions on target or complete | 4 |
| | | | | | | | | | Total number of internal/external audit actions | 5 |

# Adult Health and Social Care Complaints Indicator Summary

| Commitment to valuing Complaints - Outcomes and Customer Feedback |
|---|

| Indicator | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Annual Target 2022/23 |
|---|---|---|---|---|---|---|---|
| | Value | Value | Value | Status | Note | Short Trend | |
| Number of complaints received (quarterly) | 53 | 14 | 15 | 📈 | Data only | ⬆ | |
| Number of complaints closed in the year | 53 | 11 | 14 | 📈 | Data only | ⬆ | |
| Number of complaints upheld (quarterly) | 3 | 1 | 0 | 📈 | Data only | ➖ | |
| Number of complaints partially upheld (quarterly) | 3 | 3 | 0 | 📈 | Data only | ➖ | |
| Number of complaints not upheld (quarterly) | 33 | 4 | 13 | 📈 | Data only | ⬆ | |
| Number of complaints Resolved (quarterly) | 14 | 3 | 1 | 📈 | Data only | ⬇ | |
| Average time in working days to respond to complaints at stage 1 | 13.17 | 7.45 | 7.9 | 🛑 | **Q1 22/23:** Off Target 7 out of 10 Stage 1 Complaints were complete within 5 days. | ⬆ | 5 |
| Average time in working days to respond to complaints at stage 2 | 14.83 | 0 | 19.67 | ✅ | **Q1 22/23:** On Target | ⬇ | 20 |
| Average time in working days for a full response for escalated complaints | 0 | 0 | 20 | ✅ | On Target | ⬇ | 20 |
| Percentage of complaints at stage 1 complete within 5 working days | 36.17% | 36.36% | 70% | 🛑 | **Q1 22/23:** Off Target 7 out of 10 Stage 1 Complaints were complete within 5 days. | ⬆ | 95% |
| Percentage of complaints at stage 2 complete within 20 working days | 66.67% | 100% | 33.33% | 🛑 | **Q1 22/23:** Off Target 1 out of 3 stage 2 complaints were complete within 20 working days. | ⬇ | 95% |
| Percentage of complaints escalated and complete within 20 working days | 100% | 100% | 100% | ✅ | On Target | ➖ | 95% |
| Number of complaints where an extension to the 5 or 20 day target has been authorised (quarterly) | 19 | 3 | 5 | 📈 | Data only | ⬆ | |
| Number of Compliments | 3 | 2 | 2 | 📈 | Data only | ⬆ | |

# Adult Social Care Performance

Midlothian

## 01. Health Inequalities

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.1.1a | Support people living with long term health conditions or facing challenging life situations through the Midlothian Wellbeing service based in Midlothian GP Practices. | **Q1 22/23:** On Target Although meeting targets, the referral rate continues to be below pre pandemic levels in this quarter. The team leader met Primary Care Pharmacy team; Practice Nurse team and CRT Physio team to promote the service and encourage referrals. Wellbeing and ICJ practitioners are promoting WB & ICJ services in GP practice clinical huddles and team meetings across all GP Practices. The service restarted face to face Lifestyle Management and Mindfulness Courses at a GP Practice and a Community venue. | Number of people referred to the Wellbeing Service across all 12 GP practices | 966 | 221 | 263 | ✅ | ⬇ | **Q1 22/23:** On Target | 250 |

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.1.2a | Support people vulnerable to health inequalities by referral to the Community Health and Inequalities Team. | **Q1 22/23:** On Target Referrals come from a variety of sources including, temporary accommodations, justice and self-referrals. We are currently very limited in capacity as we have a vacancy so while we are accepting referrals we have let our partners know that we have limited capacity and there may be a wait for support. | Number of people who received a health assessment from the Community Health Inequalities Team. | 162 | 38 | 38 | ✅ | ⬆ | **Q1 22/23:** On Target Excludes June date which is not yet available. | 37.5 |

## 02. Assessment and Care Management

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.2.1a | Reduce waiting times for occupational therapy and social work services. | **Q1 22/23:** Off Target OT wait time remains within 6 week target. Activity continues to reduce social work services wait time. | Average wait time for occupational therapy services | 4.6 weeks | 17.2 weeks | 6 weeks | ✅ | ⬇ | **Q1 22/23:** On Target | 6 weeks |
| AHSC.P.2.1b | Reduce waiting times for occupational therapy and social work services. | **Q1 22/23:** Off Target OT wait time remains within 6 week target. Activity continues to reduce social work services wait time. | Average wait time for social work services | 10.8 weeks | 16.2 weeks | 13.4 weeks | ⬤ | ⬇ | **Q1 22/23:** Off Target Downturn this quarter. Work continues to reduce the social work services waiting times. | 6 weeks |
| AHSC.P.2.2a | Continue to implement and monitor Self Directed Support | **Q1 22/23:** On Target | Proportion of people choosing SDS option 1 | 8.4% | 5.7% | 8.8% | 📈 | ⬆ | **Q1 22/23:** Data only | |

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---------|-----------------|-------------|-----|---------|------------|------------|--------|-------------|------|--------|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.2.2b | Continue to implement and monitor Self Directed Support | **Q1 22/23:** On Target | Proportion of people choosing SDS option 2 | 1.9% | 2.1% | 1.8% |  |  | **Q1 22/23:** Data only | |
| AHSC.P.2.2c | Continue to implement and monitor Self Directed Support | **Q1 22/23:** On Target | Proportion of people choosing SDS option 3 | 86.7% | 84.4% | 86.9% |  |  | **Q1 22/23:** Data only | |
| AHSC.P.2.2d | Continue to implement and monitor Self Directed Support | **Q1 22/23:** On Target | Proportion of people choosing SDS option 4 | 2.9% | 2.7% | 2.5% |  |  | **Q1 22/23:** Data only | |
| AHSC.P.2.2e | Continue to implement and monitor Self Directed Support | **Q1 22/23:** On Target | Increase the % of people who feel they are participating more in activities of their choice | 86.9% | 79.5% | 87.8% |  |  | **Q1 22/23:** On Target | 75% |

## 03. Carers

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---------|-----------------|-------------|-----|---------|------------|------------|--------|-------------|------|--------|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.3.1b | Provide carers with the tools and skills to manage their caring role through the provision of Adult Carer Support Plans and information and advice services. | **Q1 22/23:** On Target Adult Carer Support Plans (ACSP) continue to be delivered by the HSCP and VOCAL. Reporting schedule and monitoring & evaluation framework in place. Access to quality information and advice to lessen the impact of caring, as well as support to enable them to care for as long as they able and willing to is fundamental to the carer support being provided, and a key aspect of the Carer Act legislation. | Number of completed Adult Carer Support plans by the HSCP (accumulative) | 80 | 22 | 16 |  |  | **Q1 22/23:** On Target | 15 |

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---------|-----------------|-------------|-----|---------|------------|------------|--------|-------------|------|--------|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.3.1c | Provide carers with the tools and skills to manage their caring role through the provision of Adult Carer Support Plans and information and advice services. | **Q1 22/23:** On Target Adult Carer Support Plans (ACSP) continue to be delivered by the HSCP and VOCAL. Reporting schedule and monitoring & evaluation framework in place. Access to quality information and advice to lessen the impact of caring, as well as support to enable them to care for as long as they able and willing to is fundamental to the carer support being provided, and a key aspect of the Carer Act legislation. | Number of completed Adult Carer Support plans by VOCAL (accumulative) | 1,930 | 457 | 479 | ✅ | ⬇ | **Q1 22/23:** On Target | 150 |
| AHSC.P.3.1e | Provide carers with the tools and skills to manage their caring role through the provision of Adult Carer Support Plans and information and advice services. | **Q1 22/23:** On Target Adult Carer Support Plans (ACSP) continue to be delivered by the HSCP and VOCAL. Reporting schedule and monitoring & evaluation framework in place. Access to quality information and advice to lessen the impact of caring, as well as support to enable them to care for as long as they able and willing to is fundamental to the carer support being provided, and a key aspect of the Carer Act legislation. | Number of Carers accessing Information and Advice services from VOCAL and British Red Cross | | | 734 | 📈 | | **Q1 22/23: Data Only** 734 Vocal 46 BRC | |

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.3.3a | Support carers to be involved in future planning by developing a local power or attorney communications campaign to compliment ongoing national campaign. | **Q1 22/23:** On Target Initial meeting with new Communications Officer during Q1 to introduce area of work and draft Action Plan. Action Plan further developed with Lead Performance Improvement Officer, to be shared with SLWG for agreement. Bitesize workshop to support staff training was cancelled for Q1 due to limited number of staff signing up to attend. | Local Power of Attorney campaign delivered. | | | 25% | ✅ | | **Q1 22/23:** On Target | 25% |

## 04. Older People

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| HSCP.P.4.7a | Sustain and increase the range of online, outdoor and creative opportunities for people to connect with each other, including: Aging Well and British Red Cross radio show; and online groups. | **Q1 22/23:** On Target In June 2022 a total of 189 groups and activities were listed in the British Red Cross Community Calendar for older people. This compares to a baseline total of 166 in March 2022. The British Red Cross Local Area Coordination service, commissioned by the HSCP, continues to work to support local groups and individuals. In July and August the LAC service will run pop up | Number of activities including online / outdoor publicised in British Red Cross Community Calendar. | | | 189 | ✅ | | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0 |

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| | | activities in towns across Midlothian. Volunteer Midlothian's Connect Project, also commissioned by the HSCP, have delivered a successful pilot of an outdoor befriending group. | | | | | | | | |
| HSCP.P.4.8a | Identify a service delivery model that enables the HSCP Home Care Service to be sustainable by reviewing HSCP Internal Home Care service. | **Q1 22/23:** On Target Update not currently available - 6 month update to be provided. | Review complete. Future model of delivery identified. | | | 0% | ✅ | | **Q1 22/23:** On Target Measured quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0% |
| HSCP.P.4.9a | Identify a model for delivering future day support for older people: Provide day support for people with complex support needs whilst Highbank Day Service is unavailable. | **Q1 22/23:** On Target Model agreed for provision of enhanced day support at The Bungalow (Alzheimer Scotland). Expected to provide up to 10 places per week for people with more advanced dementia. Day service review working group initiated and plan for review in development. | Number of day services places available for people who need support with personal care or have more advanced dementia. | | | 66 | ✅ | | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0 |

# 05. Mental Health

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---------|-----------------|-------------|-----|---------|------------|------------|--------|-------------|------|--------|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.5.1a | Implement Individual Placement Support specialist employment support for people with mental health issues. | **Q1 22/23:** On Target 3 individuals supported with employment and 1 in education. Post is currently vacant over may/June, this post has been progressed to recruitment. | Number of people (per annum) in employment or education following intervention. | 7 | 3 | 4 | ✅ | ⬆ | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0 |
| HSCP.P.5.4a | Improve housing support for individuals who experience homelessness with complex needs. | **Q1 22/23:** On Target Housing first model continues to be partnership working between Housing and No 11making good progress to support individuals who are experiencing homelessness and complex needs. | Number of individuals who are receiving support from the HSCP through housing first model. | | | 5 | ✅ | | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0 |

# 06. Learning Disability

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.6.4a | Develop Primrose Lodge in Loanhead into long term accommodation for people with profound and multiple learning disabilities and a two person short break facility. | **Q1 22/23:** On Target Decant from Teviot Court delayed on advice of IPCT Team. Work on Primrose will resume when return date to Teviot has been agreed. | Renovation and Remodeling complete. | | | 0% | ✅ | | **Q1 22/23:** On Target Measured collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0% |
| AHSC.P.6.5a | Strengthen joint working between Learning Disability Services and care providers to inform continuous improvement through a staged approach to developing Quality Assurance procedures. | **Q1 22/23:** On Target Quality Assurance Group reinstated and meeting on a monthly basis. QA Spreadsheet established. | Suite of QA procedures and measures complete. | | | 25% | ✅ | | **Q1 22/23:** On Target Measured quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0% |
| AHSC.P.6.6a | Strengthen work with people with complex needs by improving staff skills in using positive behavioral support and through the application of a dynamic risk tool. | **Q1 22/23:** On Target Event for all stakeholders 29th June 22. Launch of People First Training Video in June 22. Complex Care Expert Panel and Community Fund paper approved by Finance and Performance 28th June. | Draft Dynamic Risk Tool trialled. | | | 0% | ✅ | | **Q1 22/23:** On Target Measured quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0% |

# 07. Substance Misuse

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.7.1a | Ensure those most at risk of overdose have continued access to take-home Naloxone kits to. | **Q1 22/23:** On Target 41 kits distributed (HRT, MSUS, MELD). Of the 41, 14 kits were first supplies and 27 repeat /spare supplies. Kits supplied to 28 females and 13 males. | Number of Naloxone kits replenished by MELD, SMS and Peer Workers. | 139 | 9 | 41 |  | ⬆ | **Q1 22/23:** Data Only | |
| AHSC.P.7.2a | Expand the offer of buprenorphine prolonged release injections as part of Medication Assisted Treatment options. | **Q1 22/23:** On Target SUS Midlothian have instigated the delivery of Buprenorphine Injections as a widening of the availability and choice to people as part of the implementation of the National Medication Assisted Treatment Standards. The number new people taking up the regular offer of buprenorphine prolonged release injections in Q1 is 4. | Number of people taking up offer of buprenorphine prolonged release injections. | 49 | 7 | 4 |  | ⬇ | **Q1 22/23:** Data Only | |
| AHSC.P.7.3a | Deliver 'rapid access to prescribing and treatment' to help individuals who have dropped out of treatment re-engage. | **Q1 22/23:** On Target Although SUS Midlothian [due to recruitment and Covid challenges] did not see any new patients for rapid access in Q1, they are treating and supporting approximately 300 people at any given point. The service also reports a reduction of Near Fatal Overdoses with a particularly significant reduction in harms and causes for concerns at the supported accommodation units that receive support from Assertive Outreach staff. | Number of people assisted via 'rapid access to prescribing and treatment' | 30 | 11 | 0 |  | ⬇ | **Q1 22/23:** Data Only | |

# 08. Justice Service

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.8.2a | Increase referrals through the Safe and Together approach for noncourt mandated domestic abuse perpetrators. | **Q1 22/23:** On Target Women's Aid have seconded a part time worker to the Justice team in order for us to work in partnership to continue to deliver and promote Midlothian Families First (MFF). The worker will be linking in with the wider teams in No 11 to improve an understanding of Domestic Abuse and the provision of MFF. | Number of individuals referred through the Safe and Together approach. | 4 | 0 | 0 | ✅ | ⬇ | **Q1 22/23:** On Target | 0 |
| AHSC.P.8.4a | Build stronger links with Department of Work and Pensions, Welfare Rights and Skills Development Scotland to ensure better access to their services by creating drop-in clinics at Number 11. | **Q1 22/23:** On Target DWP have representatives at both the community justice working group and board. Given the ongoing and growing concerns of poverty and the links to crime it was felt DWP could provide additional support to individuals involved with justice services. DWP and Midlothian community justice created a bespoke bi-monthly drop in within No11 to give individuals the opportunity to seek advice and discuss a number of factors including benefits and alternative supports. | Establish DWP drop in at No11 | | | 100% | ✅ | | **Q1 22/22:** Complete | 100% |

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | | |
| AHSC.P.8.5a | Plan and deliver a seven-day period of community justice mass advertising campaign focusing on case studies. | **Q1 22/23:** On Target Midlothian community justice have developed a strong relationship with Edinburgh College Midlothian Campus. This has been evident specifically in supporting the Media students and their final 2nd year assessment that focused on 'Community Justice'. This was supported by providing a series of mini lectures focusing on the wider areas of justice including the promotion of a survivor led justice system. The students produced short films, animations and documentaries based on their own research and the learning from lecture series. It is planned that the final edits of films will be used to support the delivery of the seven-day campaign due to commence this summer. | Promote Edinburgh College project via 7 day campaign on social media. | | | 80% | ✅ | | **Q1 22/23:** On Target | | 25% |

## 09. Adult Support and Protection

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.9.1a | Raise awareness of self-neglect and hoarding. | **Q1 22/23:** On Target No planned training was scheduled during Q1, however there has been one ASP Case Conference for the principle type of harm being Hoarding. This indicates an increased awareness and understanding of the need to protect individuals who fall under the hoarding protocol. | Number of self-neglect and hoarding referrals which resulted in an investigation. | 4 | 0 | 2 | ✅ | ▬ | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | 0 |

## 10. Adults with long term conditions, physical disabilities and sensory impairment

| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.10.1a | Deliver weight management programmes to help address and prevent obesity and type 2 diabetes. | **Q1 22/23:** On Target Hybrid model up and running for delivery of face to face and digital for all programmes. WMS have secured digital devices for people referred so they are able to decide what options best suits their needs. | Number of people referred to Weight Management Triage. (Tier 2 and Tier 3) | 508 | 138 | 177 | ✅ | ⬆ | **Q1 22/23:** On Target | 100 |

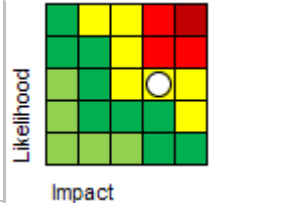| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.10.4a | Support those living with, or previously affected by cancer to stay active by taking part in physical activity to help prevent and manage some of the effects of treatment. | **Q1 22/23:** On Target Activity for April - June: 36 referrals received; 30 people opted into the service (uptake rate 83% - highest across the Lothians); 18 completed assessments. | Number of referrals into Move More or equivalent physical activity referral programme from ICJ (Improving the Cancer Journey) | 9 | 2 | 0 | | | **Q1 22/23:** Data only | |
| AHSC.P.10.4b | Support those living with, or previously affected by cancer to stay active by taking part in physical activity to help prevent and manage some of the effects of treatment. | **Q1 22/23:** On Target Activity for April - June: 36 referrals received; 30 people opted into the service (uptake rate 83% - highest across the Lothians); 18 completed assessments. | % of the total participants in the physical activity programmes | 1.4% | 1.77% | 0.4% | | | **Q1 22/23:** Data only | |
| AHSC.P.10.6a | Working with Audiology determine the feasibility of establishing an audiology clinic(s) in Midlothian. | **Q1 22/23:** On Target No progress made due to vacancy in Planning Officer Role. | Completion of option appraisal. | | | 0% | | | **Q1 22/23:** On Target | 0% |
| AHSC.P.10.7a | Develop locally based specialist services for people with a hearing impairment. | **Q1 22/23:** On Target Work is commencing with Deaf Action to review contracted service provision. | Implementation of locally based specialist services | | | 15% | | | **Q1 22/23:** On Target | 0% |
| AHSC.P.10.8a | Establish effective links between the Physical Disability Planning Group and mainstream services to improve access to wider public services. | **Q1 22/23:** On Target PDPG is meeting regularly and links are being developed with wider public services. | Lines of communication formally agreed with all relevant agencies. | | | 25% | | | **Q1 22/23:** On Target | 0% |

## 11. Extra Care Housing & Respite

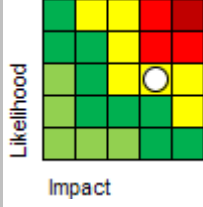| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | Target |
|---------|-----------------|-------------|-----|---------|------------|------------|--------|-------------|------|--------|
| | | | | Value | Value | Value | Status | Short Trend | Note | |
| AHSC.P.11.1a | Open and actively use the 48 new build Extra Care units (including 1 bariatric unit) at Newmills Road, Dalkeith. | **Q2 22/23:** On Target Work ongoing re construction, development of staffing model and identification of potential tenants. Site due for completion end of March 2023. | Complete opening and active use of Extra Care units (including 1 bariatric unit) at Newmills Road, Dalkeith. | | | 25% | ✅ | | **Q1 22/23:** On Target | 50% |
| AHSC.P.11.2a | Support housing services in progressing recommendations for a change in policy around the availability of suitable wheelchair housing in new private housing developments / social housing with ground floor bedroom. | **Q2 22/23:** Complete Recommendations approved by Council August 2022. | Evidence provided to support developed proposal to Council. | | | 100% | ✅ | | **Q1 22/23:** Complete | 100% |
| AHSC.P.11.3a | Increase respite bed availability in Midlothian by offering residential respite within Cowan Court Extra Care Housing complex as 6 month pilot for decision on permanent establishment and roll out to extra care housing new build facilities. | **Q2 22/23:** Off Target Options proposal submitted to SMT September 2022, and further data evidence re Highbank occupancy rates requires to be returned to SMT before end of September 2022. Cowan Court Respite flat pilot review not yet commenced. | Completion of 6 month pilot of residential respite within Cowan Court Extra Care Housing complex. | | | 25% | ✅ | | **Q1 22/23:** On Target | 50% |
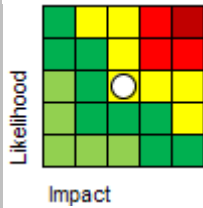
## 12. Sport and Leisure
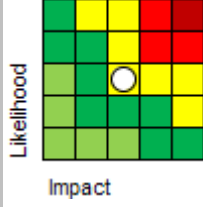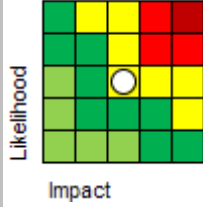
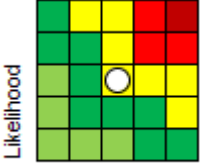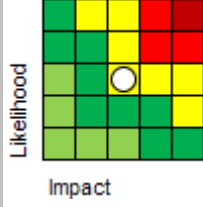| PI Code | Priority/Action | Action Note | PI | 2021/22 | Q1 2021/22 | Q1 2022/23 | | | | | Target |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Value | Value | Value | Status | Short Trend | Note | | |
| AHSC.P.12.1a | Improve access for people with protected characteristics to participate in specialised and mainstream physical activity opportunities. | **Q1 22/23:** On Target All pre-covid activities restarted during Q1 and new activities started such as Sensory Friendly swim sessions at Penicuik. Additional sessions and activities planned for Q2 at all sites. | Number of specific activities available per site for target population. | | | 254 | ✅ | | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | | 0 |
| AHSC.P.12.2a | Ageing Well project – Return to pre-covid levels of participation and provision. | **Q1 22/23:** On Target 5620 attendees, 1288 volunteer hours from 53 active volunteers and 50 activities per week for Q1 meaning project back to pre-covid levels of provision should this continue for full year. | Number of weekly activities available. | | | 650 | ✅ | | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | | 0 |
| AHSC.P.12.3a | Grow Midlothian Active Choices programme to incorporate long-term condition classes into mainstream programme. | **Q1 22/23:** On Target 255 referrals for Q1 meaning referrals back to pre-covid levels while activity opportunities also are returning towards pre-covid levels at all sites. Completion of S&L restructure will facilitate further expansion and integration into mainstream programme. | Number of weekly activities. | | | 325 | ✅ | | **Q1 22/23:** On Target Data collated quarterly to track progress. No quarterly target. As at Q1 year end target expected to be met. | | 0 |

# Adult Health and Social Care Service Risks

Midlothian

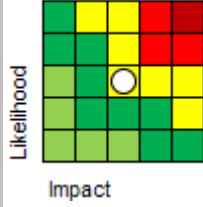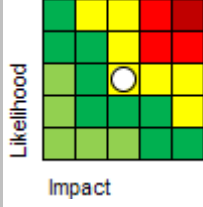| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| ASC.RR.01–01 Capacity of voluntary and private sector to meet Council's requirements in relation to quality and cost of services | 01 - Service level agreements and contracts 02 - Quality assurance officers monitoring of care homes and home care provision 03 - Large scale investigation protocol involving multi-agency investigation of risk of harm within services and risk management planning. 04 - Monitoring of Care Inspectorate Reports and reporting performance across the sector including exception reports. 05 - Quarterly care home, care at home and day care providers forum to ensure good communication and partnership working with commissioned services 06 - Service Managers role with responsibility for monitoring of commissioned services 07 - Ensuring regular review of cases in accordance with level of risk and designated team leader responsibilities. 08 - Commissioning processes to ensure robust decision-making. | **Risk Cause: P**roviders have a lack of capacity to deliver contracted service<br><br>**Risk Event:** Shortfall in service volume and or quality<br><br>**Risk Effect: D**elivering poor quality care that places service users at risk of harm. Unable to meet the increasing demands for provision particularly in relation to care at home. Ceasing trading due to financial difficulties creating risks around service provision for large groups of very vulnerable people. | ⚠️ | A review of the continuing difficulties in the provision of services by one of the Care at Home providers is being undertaken to determine whether a new Provider should be commissioned<br><br>Workforce Plan is being developed to address long term sustainability of services. This work includes the involvement of MVA, Council and NHS Lothian. | |  | 12 |

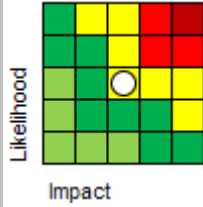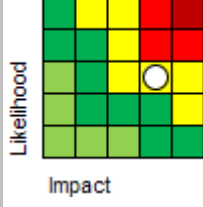| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| ASC.RR.01–05 Meeting growing demands with constrained /reduced budgets, especially from external funders. | 01 - Eligibility criteria; fair access to care policy etc, 02 - Performance reporting 03 - Service transformation programme 04 - Capacity planning and commissioning LD and complex needs 05 - Monitoring and reporting waiting times 06 - Developing performance indicators for reviewing policy 07 - Monitoring performance to meet contractual requirements 08 - Budget monitoring | **Risk Cause:** Increasing ageing population of over 75's Increasing numbers of adults with disabilities and complex needs Rising customer expectations Insufficient budget<br><br>**Risk Event:** Change programme does not meet future years projected budget gaps<br><br>**Risk Effect:** Inability to deliver against strategic priorities | ⚠️ | In preparation for the 72 hour Delayed Discharge target the expansion of key services including Merrit intermediate care and re-ablement will be undertaken through the new Social Care Monies | |  | 12 |
| ASC.RR.01–06 Capacity of communities to meet changing requirements of them to support social inclusion within local communities | 01 - Role of MVA in supporting the voluntary sector 02 - Voluntary Sector Compact agreement 03 - Day Opportunities Review for Older people 04 - Day Service Modernisation Programme LD 05 - Change fund programme 06 - FSF Programme 07 - Developing capacity of Community Councils 08 - Neighbourhood planning 09 - Community planning processes | In the current financial climate service users and family carers will become increasing dependent on support from local communities to ensure that their needs for meaningful activities and social interaction are met. Significant investment of resources and skills will be required to ensure that communities are able to respond to these needs.<br><br>**Risk Cause:**<br><br>**Risk Event:**<br><br>**Risk Effect:** | ⚠️ | | |  | 9 |

| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| ASC.RR.01–07 Property risks in terms of maximising the property asset to the benefit of service delivery and accessibility including DDA compliance | 01 - Regular dialogue with Asset Management re needs of service. 02 - Divisional Business Continuity Plan advises on crises management situations. 03 - Development of community assets through regeneration 04- Strategic Capital Programme Board 05- Development of IJB Property Strategy | **Risk Cause:** Insufficient Capital Resources. <br><br>**Risk Event:** Failure to maintain and modernise existing building stock <br><br>**Risk Effect:** People are supported in environments of poor quality | ⚠️ | | |  | 9 |
| ASC.RR.01–08 Harm by offenders to members of the public | 01 - Risk management authority for serious violent and sex offenders is now established and is able to provide guidance. 02 - Various risk assessment tools and associated training mandatory for relevant Criminal Justice staff. 03 - Partnership working with other agencies around the management of risk in individual cases well established. 04 - Standards forms and procedures for staff to follow with relevant training. 05 - Multi-agency Risk Panels (MARP) meet monthly 06 - MAPPA which is a process for managing Registered Sex Offenders . | This is the risk of despite having comprehensive procedures and systems in place but one offender may commit a serious crime, causing harm to a member of the public and the council reputation damage. Risk Score likely to remain medium (low likelihood but high impact = medium). <br><br>**Risk Cause:** Offender committing a serious crime <br><br>**Risk Event:** Offence incident occurs. <br><br>**Risk Effect:** Harm to member of the public Reputational damage to the Council | ⚠️ | | |  | 9 |

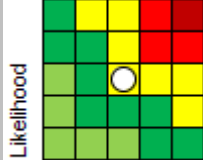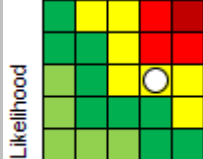| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| | 07 - Integration of group work programme with probation supervision<br>08 - Monitoring of staff compliance with National Outcomes and Standards through client review system.<br>09 - Access to Visor database of sex offenders linked to MAPPA.<br>10 - Offender Management Group established | | | | | | |
| ASC.RR.01–09<br>Adult Protection | 01 - Public Protection Committee<br>02 - Adult Protection Procedures<br>03 - Large scale investigation protocol<br>04 - IRD Review Group established (and links with the Police)<br>05 - Adult protection training programme<br>06 - Case file governance arrangements<br>07 - Adult Protection Lead Officer<br>08 - Training Programme<br>09 - Development of Adult Protection Team within Fieldwork | **Risk Cause:** Failure to identify the risk to the individual.<br>Failure of adult protection procedures when invoked to adequately assess and manage the risk.<br><br>**Risk Event:** Adult at risk of harm.<br><br>**Risk Effect:** Reputational Damage to the Council. Harm to vulnerable service user. | ⚠️ | | |  | 9 |

| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| ASC.RR.01–10 Capacity to manage scale of transformational change | 01 - Project management approach adhered to<br>02 - Business Transformation Board and reporting arrangements.<br>03 - New posts to support implementation of IRF, Dementia Demonstrator site and Change Fund<br>04 - Support for service review from Business Transformation Section.<br>05 - Project Plans agreed.<br>06 - 2 new Project Officers | A major programme of service review and transformation is currently underway. Failure to manage this programme will lead to risks in not achieving coherent arrangements for the continuing delivery of sustainable public services in the new financial climate.<br><br>**Risk Cause:**<br><br>**Risk Event:**<br><br>**Risk Effect:** | ⚠ | Business Transformation is supporting the transformation of Learning Disability services . Additional capacity is also being put in place to support the redesign of Highbank and the relocation of services from Liberton Hospital. | |  | 9 |
| ASC.RR.01–13 Capacity of Workforce | 01- Workforce Plan<br>02- Learning and Development Team | **Risk Cause:** Employees not suitably trained/development for the roles required of them. Challenges around maximising attendance Limited availability of staff in certain sectors Ageing workforce<br><br>**Risk Event:** Inadequate staffing levels/skills.<br><br>**Risk Effect:** Low morale. Inability to deliver services. | ⚠ | In recognition of the changing role of Newbyres and in response to the recent internal review a new staffing structure has been developed. | |  | 9 |

| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| ASC.RR.01–14 Information Management and Data Protection | 01 - Action Plan to improve information management and data protection. This is being controlled through covalent. | All Heads of Service are mandated to monitor compliance with the Data Protection Act.<br><br>**Risk Cause:**<br><br>**Risk Event:**<br><br>**Risk Effect:** | ⚠ | Data sharing<br><br>The frameworki system has been upgraded to Mosaic and arrangements are being finalised to enable local staff to use the Information Exchange portal. | |  | 9 |
| ASC.RR.01–16 Legislative requirement for health and community care to integrate | 01 - Business Transformation Board and an NHS Lothian Project Group regularly review progress with arrangements in Midlothian<br>02 - NHS Lothian and Midlothian Council have both conducted Internal Audit reviews<br>03- The Joint Management Team chaired by the Joint Director maintains an overview of the implementation of the new arrangements | This is viewed as a major change that will require huge investment in time and buy-in from stakeholders<br><br>**Risk Cause:**<br><br>**Risk Event:**<br><br>**Risk Effect:** | ⚠ | | |  | 9 |
| ASC.RR.01–17 COVID 19 | 1. Communication systems and processes have been put in place.<br>2. Daily conferences have been set up to appraise evolving situation.<br>3. COVID-19 Control Team established.<br>4. A system set up to share information through | There is a risk that due to the ongoing pandemic, Midlothian Health and Social Care Partnership may suffer from continued disruption in providing services: This may lead to:<br>-shortages of staff due to contraction of COVID or being identified as a close contact | ⚠ | | |  | 12 |

| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| | Directors to all Midlothian staff.<br>5. Signage on front door of all premises advising people not to enter any of our buildings if they are suffering from COVID-19 symptoms.<br>6. Signage up across all buildings advising of good handwashing routines and the necessity of ensuring frequent handwashing taking place.<br>7. In reception areas staff have been provided with masks and alcohol gel.<br>8. Staff updated regularly on NHS Lothian and National Guidelines.<br>9. Resilience plans in place across the Partnership.<br>10. Staff briefings to discuss responses to COVID-19 have been actioned with a focus on personal resilience plans to ensure attendance at work.<br>11. Asked staff to consider unnecessary face to face contact with patients is replaced by telephone contact.<br>12. Homeworking in place where appropriate.<br>13. Absence reporting and monitoring in place | -additional workload for those staff still able to attend work<br>-increased pressure on other parts of the health and social care system<br>-reduction of care provided to patients due to reduced staffing levels with a move to focus on essential work only | | | | | |

| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| | highlighting COVID related absence.<br>14. Midlothian Health and Social Care Partnership 'Remobilisation Plan' sets out a four-phased approach and recovery priorities. | | | | | | |
| CCP08–CSP.08 Community Safety & Justice – Negative media impact | - Other communications plans in place e.g. MAPPA<br>- Communication monitored | Risk that negative media coverage impacts on community safety & justice communication and engagement activity<br><br>**Risk Cause:** Communication with the public could be poor or an event or incident has negative outcome.<br>**Risk Event:** Failure to have in place a robust Communications Strategy and scenario planning<br>**Risk Effect:** Potential for tremendous effort but without knowing whether the effort has been successful against negative effects. | ⚠️ | | |  | 9 |
| SRP.RR.07 Care at Home | 1. Care at Home improvement action plan in place and near compaction<br>2. Appointment to Team Lead posts to support Complex care to enhance local leadership at operational level | **Risk cause** Internal and External providers of Care at Home services unable to meet service and quality requirements as a result of a lack of capacity. | ⚠️ | Independent review of adult and social care | **Q1 22/23:** NCS Bill published June 2022. Consultation at Stage 1, concludes in Sept. See separate risk on NCS for further information. |  | 12 |

| Code & Title | Risk Control Measure | Risk Identification | Risk Evaluation | Related Action | Related action latest note | Current Risk Matrix | Risk Score |
|---|---|---|---|---|---|---|---|
| | 3. New Framework agreement in place with significant improvement in quality from Providers<br>4. Flow management planning in development to maximise Care at Home capacity going forward<br>5. Weekly provider meetings in place<br>6. Additional locum team members recruited to for contingency cover<br>7. New Leadership model in place<br>8. Daily discharge meeting with Multidisciplinary and Multi-agency team planning to plan and coordinate discharge to ensure care at hone support in place | **Risk event**<br>Capacity of Community Support outstripped by demand<br><br>**Risk effect** There is a risk that patients will have their discharge delayed because there is insufficient community supports to enable timely discharge leading to deterioration in their health, beds being blocked and elective operations potentially being cancelled. | | | | | |

# Published Local Government Benchmarking Framework - Adult Social Care

Midlothian

## Adult, Social Care

| Code | Title | 2010/11 Value | 2011/12 Value | 2012/13 Value | 2013/14 Value | 2014/15 Value | 2015/16 Value | 2016/17 Value | 2017/18 Value | 2018/19 Value | 2019/20 Value | 2020/21 Value | External Comparison |
|------|-------|------|------|------|------|------|------|------|------|------|------|------|---------------------|
| SW1 | Corporate Indicator - Older Persons Home Care Costs per Hour (Over 65) (LGBF) | £20.26 | £20.89 | £15.02 | £28.06 | £32.89 | £30.00 | £27.40 | £41.06 | £38.12 | £20.82 | £25.45 | 20/21 Rank 11 (Second Quartile) 19/20 Rank 6 (Top Quartile) 18/19 Rank 27 (Bottom Quartile). 17/18 Rank 29 (Bottom Quartile). 16/17 Rank 21 (Third Quartile). |
| SW2 | Corporate Indicator - Self Directed Support (Direct Payments + Managed Personalised Budgets) spend on adults 18+ as a % of total social work spend on adults 18+ (LGBF) | 2.76% | 2.18% | 2.4% | 2.78% | 2.69% | 3.95% | 6.11% | 4.75% | 4.49% | 5.06% | 4.31% | 20/21 Rank 21 (Third Quartile) 19/20 Rank 16 (Second Quartile) 18/19 Rank 18 (Third Quartile). 17/18 Rank 13 (Second Quartile). 16/17 Rank 8 (Top Quartile). |
| SW3 | Percentage of people aged 65 and over with long-term care needs receiving personal care at home (LGBF) | 61.14% | 63.91% | 65.76% | 65.37% | 60.11% | 66.67% | 66.98% | 68.04% | 50.4% | 52.54% | 53.6% | 20/21 Rank 29 (Bottom Quartile) 19/20 Rank 32 (Bottom Quartile) 18/19 Rank 32 (Bottom Quartile). 17/18 Rank 5 (Top Quartile). 16/17 Rank 6 (Top Quartile). |
| SW4b | New - Percentage of adult supported at home who agree that their services and support had an impact in improving or maintaining their quality of life. (data based on respondents whose care was funded by the council or health board) (LGBF) | | | | | 81.73% | 85.7% | | 73.05% | | 67.57% | N/A | 19/20 Rank 32 (Bottom Quartile). 17/18 Rank 31 (Bottom Quartile). 15/16 Rank 15 (Second Quartile). 14/15 Rank 28 (Bottom Quartile) |

| Code | Title | 2010/11 Value | 2011/12 Value | 2012/13 Value | 2013/14 Value | 2014/15 Value | 2015/16 Value | 2016/17 Value | 2017/18 Value | 2018/19 Value | 2019/20 Value | 2020/21 Value | External Comparison |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| SW4c | New - Percentage of adults supported at home who agree that they are supported to live as independently as possible (data based on respondents whose care was funded by the council or health board) (LGBF) | | | | 82.61% | | 77.96% | | 86.28% | | 80.05% | N/A | 19/20 Rank 20 (Third Quartile). 17/18 Rank 3 (TOP Quartile). 15/16 Rank 30 (Bottom Quartile). 13/14 Rank 19 (Third Quartile). |
| SW4d | New - Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided (data based on respondents whose care was funded by the council or health board) (LGBF) | | | | 84.9% | | 84.44% | | 79.68% | | 66.95% | N/A | 19/20 Rank 32 (Bottom Quartile). 17/18 Rank 6 (TOP Quartile). 15/16 Rank 1 (TOP Quartile). 14/15 Rank 8 (TOP Quartile) |
| SW4e | New - Percentage of carers who feel supported to continue in their caring role (data based on respondents whose care was funded by the council or health board) (LGBF) | | | | 44.48% | | 39.43% | | 32.1% | | 31.54% | N/A | 19/20 Rank 27 (Bottom Quartile). 17/18 Rank 31 (Bottom Quartile). 15/16 Rank 21 (Third Quartile). 13/14 Rank 11 (Second Quartile). |
| SW5 | Corporate Indicator - The Net Cost of Residential Care Services per Older Adult (+65) per Week (LGBF) | £438.64 | £470.12 | £471.25 | £462.66 | £440.32 | £453.99 | £404.02 | £462.20 | £469.47 | £483.83 | £457.19 | 20/21 Rank 17 (Third Quartile) 19/20 Rank 19 (Third Quartile) 18/19 Rank 20 (Third Quartile). 17/18 Rank 19 (Third Quartile). 16/17 Rank 12 (Second Quartile). |
| SW6 | Rate of readmission to hospital within 28 days per 1,000 discharges (LGBF) | 93.79 | 105.81 | 105.82 | 101.45 | 107.11 | 104.49 | 109.36 | 114.39 | 108.89 | 108.77 | 125.67 | 20/21 Rank 22 (Third Quartile) 19/20 Rank 17 (Third Quartile) 18/19 Rank 20 (Third Quartile). 17/18 Rank 26 (Bottom Quartile). 16/17 Rank 24 (Third Quartile). |
| SW7 | Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections (LGBF) | | 76.6% | 80% | 82.98% | 81.13% | 84.96% | 75.68% | 89% | 87.04% | 83.33% | 81.5% | 20/21 Rank 24 (Third Quartile) 19/20 Rank 18 (Third Quartile) 18/19 Rank 7 (Top Quartile). 17/18 Rank 7 (Top Quartile). 16/17 Rank 29 (Bottom Quartile). |
| SW8 | Number of days people spend in hospital when they are ready to be discharged, per 1,000 population (75+) (LGBF) | | | | 917.12 | 1059.24 | 834.91 | 971.19 | 1422.02 | 1323.32 | 965.62 | 665.47 | 20/21 Rank 26 (Bottom Quartile) 19/20 Rank 24 (Third Quartile) 18/19 Rank 29 (Bottom Quartile). 17/18 Rank 30 (Bottom Quartile). 16/17 Rank 23 (Third Quartile). |

## Children's Services

| Code | Title | 2010/11 Value | 2011/12 Value | 2012/13 Value | 2013/14 Value | 2014/15 Value | 2015/16 Value | 2016/17 Value | 2017/18 Value | 2018/19 Value | 2019/20 Value | 2020/21 Value | External Comparison |
|------|-------|------|------|------|------|------|------|------|------|------|------|------|---------------------|
| CHN17 | Percentage of children meeting developmental milestones (LGBF) | | | | 83.84% | 87.73% | 89.22% | 91.48% | 93.65% | 92.13% | 93.02% | 90.95% | 20/21 Rank 4 (Top Quartile) 19/20 Rank 4 (Top Quartile) 18/19 Rank 5 (Top Quartile) 17/18 Rank 2 (Top Quartile) 16/17 Rank 3 (Top Quartile) |

## Culture and Leisure

| Code | Title | 2010/11 Value | 2011/12 Value | 2012/13 Value | 2013/14 Value | 2014/15 Value | 2015/16 Value | 2016/17 Value | 2017/18 Value | 2018/19 Value | 2019/20 Value | 2020/21 Value | External Comparison |
|------|-------|------|------|------|------|------|------|------|------|------|------|------|---------------------|
| C&L1 | Corporate Indicator - NET Cost per attendance at Sports facilities   (LGBF) | £4.59 | £3.11 | £4.05 | £3.28 | £3.48 | £3.90 | £4.02 | £4.78 | £3.70 | £3.33 | £91.81 | 20/21 Rank 27 (Bottom Quartile) 19/20 Rank 22 (Third Quartile) 18/19 Rank 26 (Bottom Quartile). 17/18 Rank 29 (Bottom Quartile). 16/17 Rank 23 (Third Quartile). |
| C&L5d | Corporate Indicator - Percentage of adults satisfied with leisure facilities (LGBF) | 79.7% | 84.7% | 77% | 77.93% | 75.33% | 73.67% | 74% | 74.33% | 70.87% | 63.2% | N/A | 19/20 Rank 29 (Bottom Quartile) 18/19 Rank 18 (Third Quartile). 17/18 Rank 16 (Second Quartile). 16/17 Rank 19 (Third Quartile). 15/16 Rank 25 (Bottom Quartile). 14/15 Rank 21 (Third Quartile). |