EAST RENFREWSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP

East Renfrewshire COUNCIL

NHS Greater Glasgow and Clyde

Meeting of East Renfrewshire Health and Social Care Partnership **Held on**	Performance and Audit Committee 22 November 2023
Agenda Item	6
Title	Mid-Year Performance Update 2023-24

Summary

This report provides the Performance and Audit Committee with an update on key performance measures relating to the delivery of the strategic priorities set out in the HSCP Strategic Plan 2022-2025. Where mid-year data is available for strategic performance indicators this is included. The report includes exception reporting for two Performance Indicators, providing more detailed discussion of performance for these measures.

Exception reports are reports delving further into the performance of specific measures and mitigation or reasoning for current performance. They look at projected information on how to maintain or improve on current performance.

Presented by	Steven Reid Policy, Planning and Performance Manager

Action Required

Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2023-24.

EAST RENFREWSHIRE INTEGRATION JOINT BOARD

PERFORMANCE AND AUDIT COMMITTEE

22 November 2023

Report by Chief Officer

MID-YEAR PERFORMANCE UPDATE 2023-24

PURPOSE OF REPORT

1. This report provides the Performance and Audit Committee with an update on key performance measures relating to the delivery of the strategic priorities set out in the HSCP Strategic Plan 2022-2025. Where mid-year data is available for strategic performance indicators this is included. The report also includes more detailed exception reports for two key performance indicators.

RECOMMENDATION

2. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2023-24.

BACKGROUND

3. The Performance and Audit Committee (PAC) regularly reviews performance reports in order to monitor progress in the delivery of the strategic priorities set out in the HSCP Strategic Plan. These reports provide data on the agreed performance indicators in our performance framework and are presented quarterly and at mid and end-year.

4. We continue to work with members of the PAC to improve the format and content of our performance reports including the introduction of 'exception' reporting format in line with recommendations from our working group. For this current report, in addition to our full report on progress against our key performance indicators (Appendix One), we have included two exception reports (Appendix Two) giving more detailed discussion on performance trends for the following measures:
    - Percentage of people whose care need has reduced following reablement
    - Total number of Alcohol Brief Interventions (ABIs) delivered

5. The exception reports cover:
    - Purpose of the indicator – *explanation and how we use it to improve*
    - What does good look like? – *long-term objective for this area of activity*
    - Current status of measure – *current position including visualisation of data*
    - Reason/explanation for current performance – *understanding why performance is an exception*
    - Mitigating action – *approaches (with timescales) that will improve performance*
    - Investment – *current / required resources to deliver expected performance*
    - Context and benchmarking – *relevant comparative data if available*

6. For all indicators in our reporting, we aim to show clear visualisation of performance trends against targets with charts. As we develop our reporting (and particularly for our core/exception indicator set) we intend to incorporate future performance projections against forward targets to show intended trajectories in our charts.

REPORT

7. As expected, the mid-year performance update provides a smaller number of data updates compared with end-year. The report includes data for mid-year and any updated end-year data for indicators from our Strategic Plan that have not previously been reported to the Committee. The report provides charts for all measures. Each measure is presented with a RAG status in relation to the target for the reporting period (where a target is set), along with trend arrows (showing 'up' for improvement) and commentary on performance. Many of the data trends continue to reflect the unique circumstances faced by local health and social care services since the Covid-19 pandemic. Explanations of any notable shifts in performance are included in the commentary text.

8. The report contains data updates and commentary relating to the performance measures set out under the strategic priorities in the HSCP Strategic Plan 2022-25:
   - Working together with children, young people and their families to improve mental and emotional wellbeing
   - Working together with people to maintain their independence at home and in their local community
   - Working together to support mental health and wellbeing
   - Working together to meet people's healthcare needs by providing support in the right way, by the right person at the right time
   - Working together with people who care for someone ensuring they are able to exercise choice and control
   - Working together on effective community justice pathways that support people to stop offending and rebuild lives
   - Working together with individuals and communities to tackle health inequalities and improve life chances
   - Working together with staff across the partnership to support resilience and wellbeing
   - Working together to protect people from harm

9. The final section of the data report contains a number of organisational indicators relating to our staff and customers.

10. The HSCP continues to operate at a high level of performance across service areas, including many that continue to face significant challenges and pressures. During the current period of reporting, staff have continued to deliver services to support the residents of East Renfrewshire.

11. Performance highlights include:
   - We are continuing to see very positive performance on **CAMHS waiting times.** At mid-year, 99% of all children had been waiting less than 18 weeks, improving from 98% in the previous 6 months, and continuing to exceed our target (90%). The longest waiting times have been steadily reducing and we are now meeting our target for the period.
   - Supporting **independence** - a high proportion of service users (90%) continue to report that 'living where/as you want to live' needs are being met – up from 89% for the previous 6 months
   - In the last 6 months, **Reablement** performance has improved significantly with 63% of care needs reduced following period of reablement – up from 47% and now ahead of target (60%). This improvement has followed a challenging period with significant demand pressures and staffing issues for the service. More detail on this measure is given in the exception report at Appendix Two.
   - We are continuing to see improving performance on waiting times for **psychological therapies** with the percentage of people waiting no longer than 18 weeks increasing from 83% to 91% in the reporting period. This follows successful recruitment into the service.

- We are also seeing positive performance on waiting times for **drug and alcohol recovery** services - with 97% of people seen within three weeks – up from 96% (target 90%).
- The delivery of **Alcohol Brief Interventions** (ABIs) in community settings have increased and we are ahead of target following investment in a local pilot project. More detail on this measure is given in the exception report at Appendix Two.
- Minimising hospital **discharges with delay** (and bed days lost to delays) continue to be an area of focused activity for the partnership and we have seen improved performance compared with the previous 6 months. However, delays can rise to levels higher than acceptable during the year and we remain focused on supporting people to return home or into alternatives in the community.
- We continue to perform very well for completion of **Community Payback Orders** with 100% completed in within court timescales in the last 6 months. However, commencement timescales declined during the period.
- Latest data for **breastfeeding** rates in our most disadvantaged neighbourhoods (2022/23) shows that rates have improved for the second year running, following significant challenges in delivering support during the pandemic.
- Our support for women and children affected by **domestic violence** continues with high numbers of support users (90%) reporting improved personal safety and wellbeing outcomes.
- The results of our iMatter staff survey show improved scores in relation to support for learning, involvement in decisions and support for **staff health and wellbeing** from managers.
- We have seen significant improvement in **absence rates** for our Council-employed staff and are now ahead of our target for the 6 month period thanks to targeted support and improved absence among Care at Home staff. NHS staff absence has improved slightly but remains higher than expected.

12. Areas that remain challenging include:
- Unplanned **hospital admissions** and **A&E attendances** have both increased in the 6 month period, and A&E attendances are now exceeding our target. We are also continuing to see an increase in attendances and admissions from our care homes. In response, we are working closely with local care home to embed a Care Homes Falls Pathway and developing the alignment of OTs, physios and other Allied Health Professionals with our care homes.
- The number of people accessing support through **Self-directed Support** (SDS) Options 1 and 2 has reduced in the past 6 months. However, the overall trend is stable and latest data shows that the proportion of our social care spend going through SDS has been increasing and is in line with the national average. Supporting choice and control remains a strategic priority for the HSCP.
- We continue to see declining performance in our measure of satisfaction for **unpaid carers** during the period. This is reflecting the pressures that our unpaid carers are experiencing.
- Latest data (2022/23) shows a decline in **palliative care** performance as measured by the proportion of last 6 months of life spent at home or in a community setting.

RECOMMENDATION

13. Performance and Audit Committee is asked to note and comment on the Mid-Year Performance Update 2023-24.

REPORT AUTHOR AND PERSON TO CONTACT

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9 November 2023

Chief Officer, IJB: Julie Murray

BACKGROUND PAPERS

27.09.2023 - Performance and Audit Committee, Performance Update – Quarter 1, 2023/24
https://www.eastrenfrewshire.gov.uk/media/9545/PAC-Item-10-27-September-2023/pdf/PAC_Item_10_-_27_September_2023.pdf?m=638306523822170000

26.06.2023 - Performance and Audit Committee, HSCP Annual Performance Report 2022/23
https://www.eastrenfrewshire.gov.uk/media/9264/PAC-Item-09-26-June-2023/pdf/PAC_Item_09_-_26_June_2023.pdf?m=638227830052970000

Appendix One

HSCP Strategic Plan – 2023-24 Mid-Year

Report Author: Ian Smith / Steven Reid
Generated on: November 2023

Key:

Green	performance is at or better than the target
Amber	Performance is close (approx 5% variance) to target
Red	Performance is far from the target (over 5%)

Trend arrows point upwards where there is _improved_ performance (incl. where we aim to decrease the value).
* INCREASE/DECREASE in PI description gives the _intended_ direction of travel for the indicator

1. Working together with children and their families to improve mental well-being
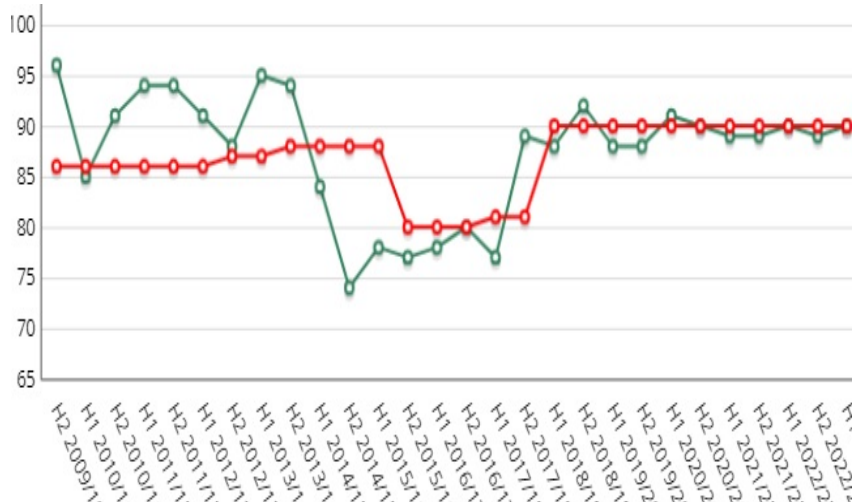
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Children and young people starting treatment for specialist Child and Adolescent Mental Health Services within 18 weeks of referral	H1 2023/24	99%	90%	Green	(improving)		Weekly average for first six months of 2023/24. An increase in performance from the previous six months (98%)

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - Child & Adolescent Mental Health - longest wait in weeks at month end	H1 2023/24	18	18	Red	(improving)		Average longest wait in first six months of 2023/24 was 18 weeks, which is a significant improvement on the same period last year (33 weeks)
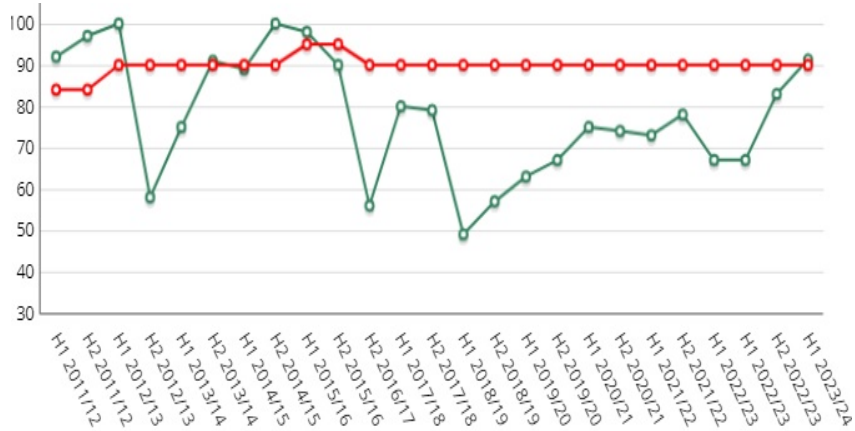
2. Working together with people to maintain their independence
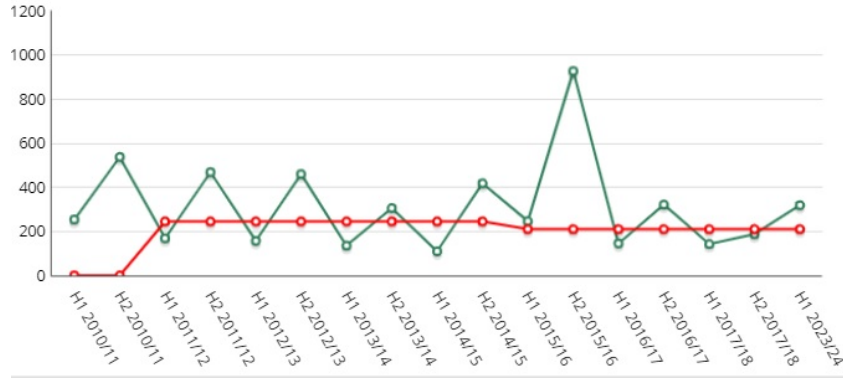
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Number of people self-directing their care through receiving direct payments and other forms of self-directed support.	H1 2023/24	458	600	Red	(declining)		Data calculated from the Social Care returns. Quarterly average for first six months of 2023/24 against an annual target of 600. This is down slightly on the previous six months outturn of 479.

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Percentage of those whose care need has reduced following re-ablement / rehabilitation	H1 2023/24	63%	60%	Green	(improving)		In the first six months of 2023/24 a total of 53 of 87 clients were discharged with reduced needs. This is up from 47% in the previous period.
INCREASE - Percentage of people aged 65+ who live in housing rather than a care home or hospital	2022/23	96.7%	97%	Green	(improving)		Data to March 2023 released June 2023. (Source: Scottish Government MSG, June 2022). Target reviewed with no change being required (97%) as agreed by Head of Adult Services, Communities and Well-Being July 2023.

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - People reporting 'living where you/as you want to live' needs met (%)	H1 2023/24	90%	90%	Green	(improving)		In the first six months of 2023/24 of the total 388 valid responses 350 reported their needs met.
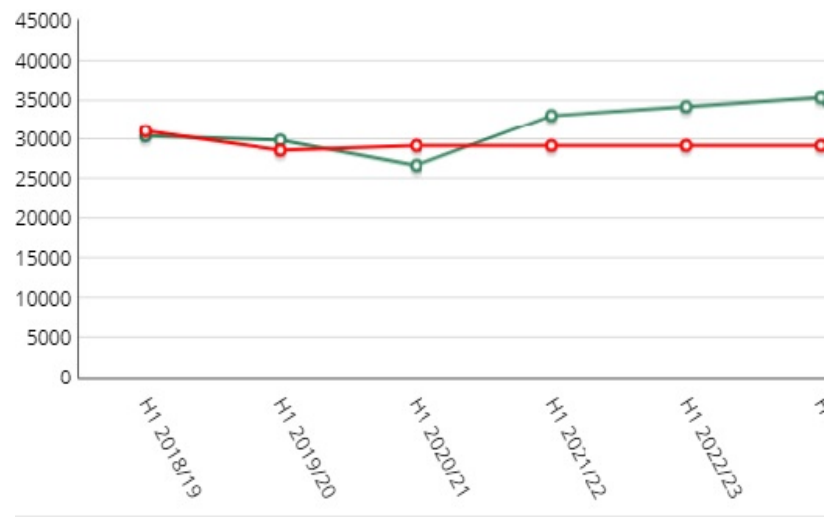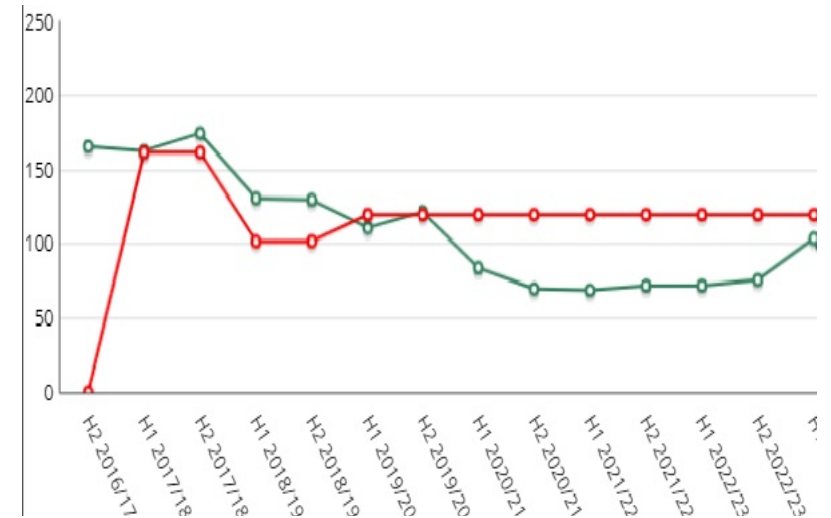
3. Working together to support mental health and well-being							
Description	Data Period	Current Value	Target	Traffic Light	Trend		Latest Note
INCREASE - Percentage of people waiting no longer than 18 weeks for access to psychological therapies	H1 2023/24	91.3%	90%	Green	(improving)		Team is showing an increase and an average of 91.3% against the 90% wait time to treatment target since 1 April 23. The target is monitored weekly and target has been met except on 6 individual weeks, during high staffing absences

Description	Data Period	Current Value	Target	Traffic Light	Trend		Latest Note
INCREASE - Percentage of people with alcohol and/or drug problems accessing recovery-focused treatment within three weeks.	H1 2023/24	97%	90%	Green	(improving)		At end of quarter 2 (half year) East Renfrewshire has 97% of people with alcohol and drug problems accessing recovery focused treatment within three weeks. Our recording covers Glasgow Council on Alcohol and RCA Trust
INCREASE – Total number of alcohol brief interventions delivered in community settings, in line with SIGN 74 guidelines.	H1 2023/24	319	210	Green	(improving)		The number of Alcohol Brief Interventions undertaken in East Renfrewshire has increased significantly as Glasgow Council on Alcohol has been commissioned to deliver a 12 month pilot programme of community outreach and events - activity has focused on leisure centres, libraries, food banks, community centres and Voluntary Action East Renfrewshire. Part of the pilot will also include training local staff to undertake ABIs to increase local capacity. Quarter 1 saw 171 Alcohol Brief Interventions being completed and Quarter 2 had 148 making half yearly total of 319 completed ABI's delivered within East Renfrewshire.

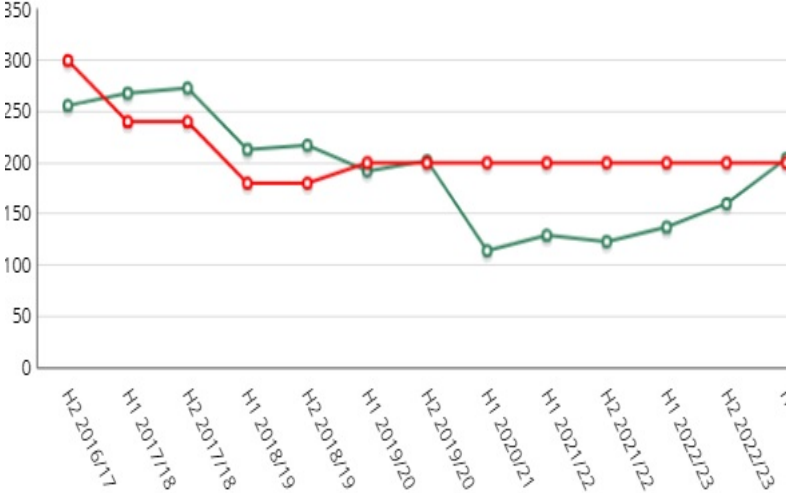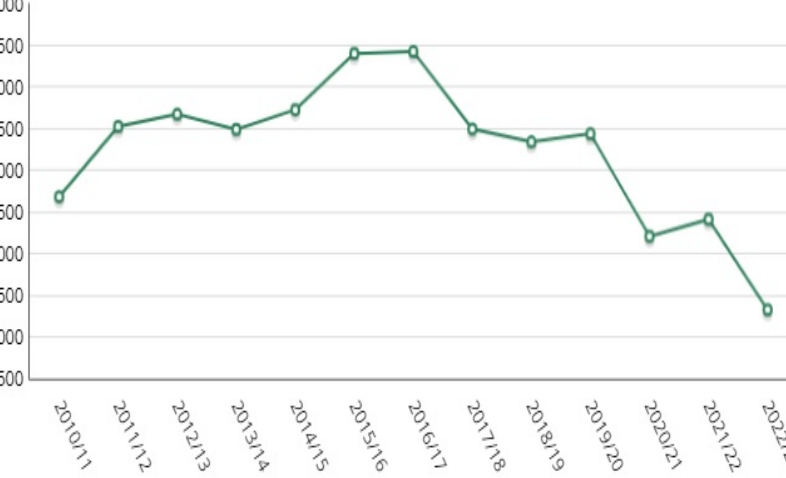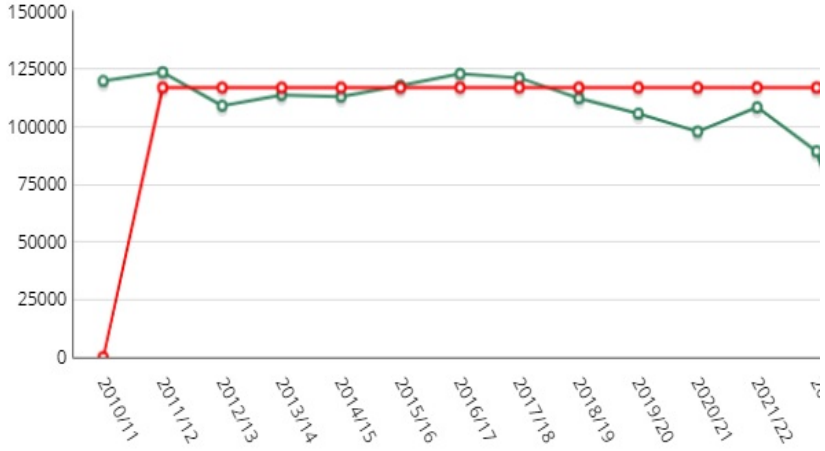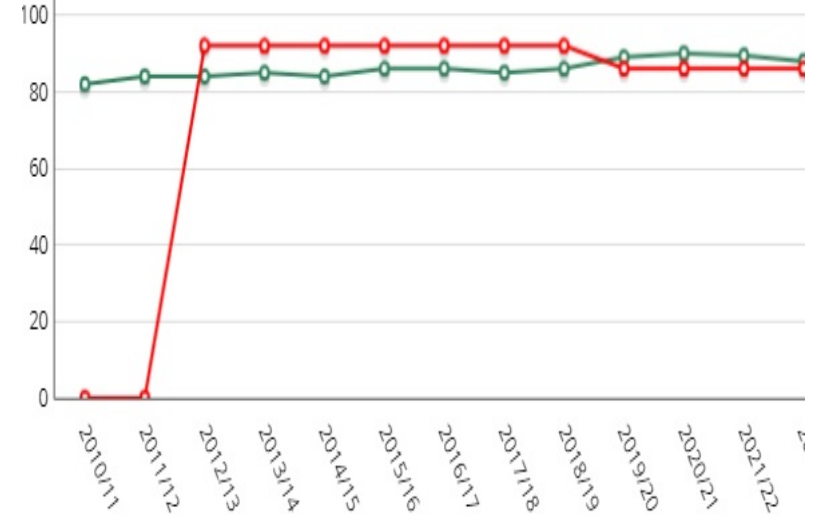| 4. Working together to meet people's healthcare needs						
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - Delayed discharge: people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting. (Ave number delayed NHSGGC Acute & MH weekly data)	H1 2023/24	5	0	Red	⬆ (improving)		Weekly average over the first six months of 2023/24. Compares to an average of ten in the previous six months (i.e. the last six months of 2022/23)
DECREASE - Delayed discharges bed days lost to delayed discharge (PHS)	H1 2023/24	2,064	946	Red	⬆ (improving)		Latest data to September 2023. Down from 2,680 bed days in the previous six months. (Source: PHS, November 2023)
DECREASE - people (18+) waiting more than 3 days to be discharged from hospital into a more appropriate care setting including AWI (PHS data)	H1 2023/24	10	0	Red	⬆ (improving)		Figure relates to the annual monthly average in first six months of 2023/24. This has fallen from 13 in the previous six months. (Source: PHS November 2023)

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - Number of Emergency Admissions: Adults (NHSGGC data)	H1 2023/24	3,294	3,564	Green	⬇ (declining)		Admissions in the first six months of 2023/24 have increased on the previous period (3,126) though still remain below target.
DECREASE - No. of A&E Attendances (excl MIU) (NHSGGC data)	H1 2023/24	11,316	9,166	Red	⬇ (declining)		Data from the first six months of 2023/24 is up from (10,921) in the previous period and is significantly up on the corresponding period last year (5,868).

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - Occupied Bed Days (Adult – non-elective) (NHSGGC data)	H1 2023/24	35,320	29,110	Red	⬇ (declining)		The figure for the first six months of 2023/24 has increased on the same period last year (34,117) Source: NHSGGC, Sep 2023. Target reviewed for 2023/24 with no change required (58,220) as agreed by Head of Adult Services, Communities and Well-Being July 2023.
DECREASE - Emergency Admissions from Care Homes (NHSGGC data)	H1 2023/24	104	120	Green	⬇ (declining)		Hospital admissions from Care Homes have increased significantly in the first six months of 2023/24, up from 76 in the previous period.

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - A & E Attendances from Care Homes (NHSGGC data)	H1 2023/24	204	200	Amber	(declining)		In the first six months of 2023/24 there were 204 attendances at A&E from Care Homes, this is up from 160 in the previous six months and is marginally above target.
DECREASE - Health and Social Care Integration - Core Suite of Indicators NI-12: Emergency admission rate (per 100,000 population) for adults	2022/23	2,161		Data Only	(improving)		Latest available data May 2023. Down from 9,414 in 2021/22. Annual outturn calculated with interim data for Qtr 3 and 4. (Source: Public Health Scotland)

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - Health and Social Care Integration - Core Suite of Indicators NI-13: Emergency bed day rate (per 100,000) for adults	2022/23	89,287	117,000	Green	(improving)		Latest available data at May 2023, annual outturn calculated with interim data for Qtr 3 and 4 (Source: Public Health Scotland)
INCREASE - Health and Social Care Integration - Core Suite of Indicators NI-15: Proportion of last 6 months of life spent at home or in a community setting	2022/23	88%	86%	Green	(declining)		Latest data at May 2023, annual outturn calculated on interim data for Qtr 3 and 4. Down from 89.5% in 2021/22. (Source: Public Health Scotland)

5. Working together with carers to be able to exercise choice and control
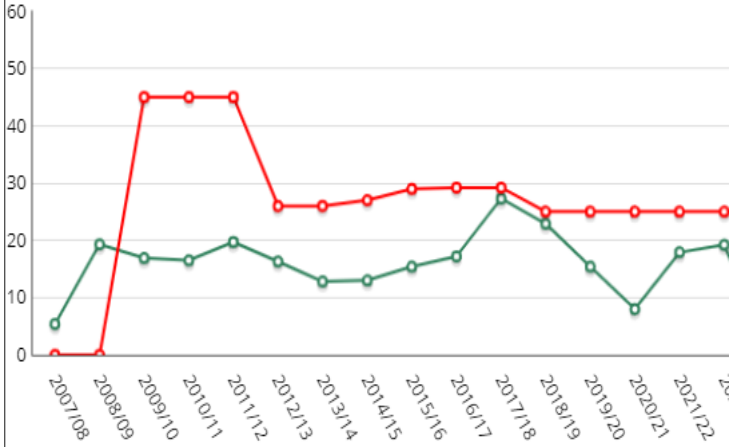
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - People reporting 'quality of life for carers' needs fully met (%)	H1 2023/24	74%	73%	Green	(declining)		In the first six months of 2023/24 of the total 81 valid responses 60 reported their needs met. Down from 79.5% in the previous six months.

6. Working together with our partners to support people to stop offending
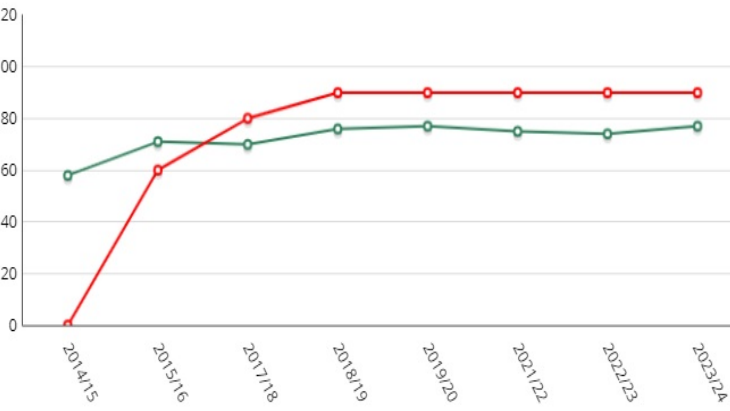
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Community Payback Orders - Percentage of unpaid work placements commencing within 7 days	H1 2023/24	77%	80%	Amber	(declining)		In the first six months of 2023/24 thirty of thirty nine work placements commenced within 7 days. This is down from 88% in the previous six months.
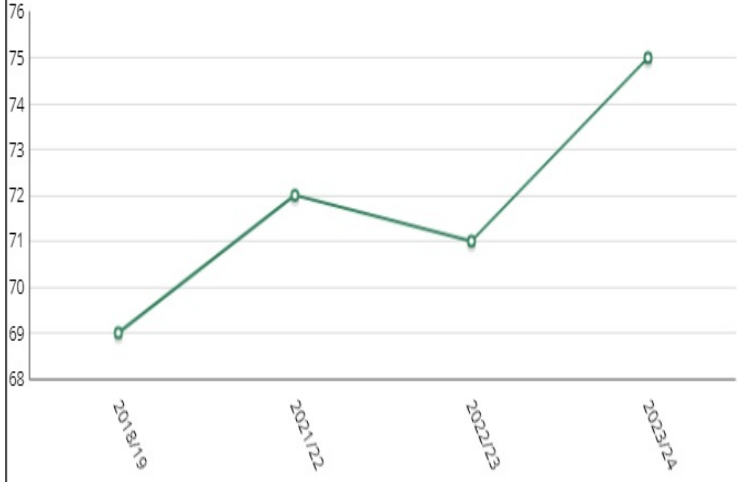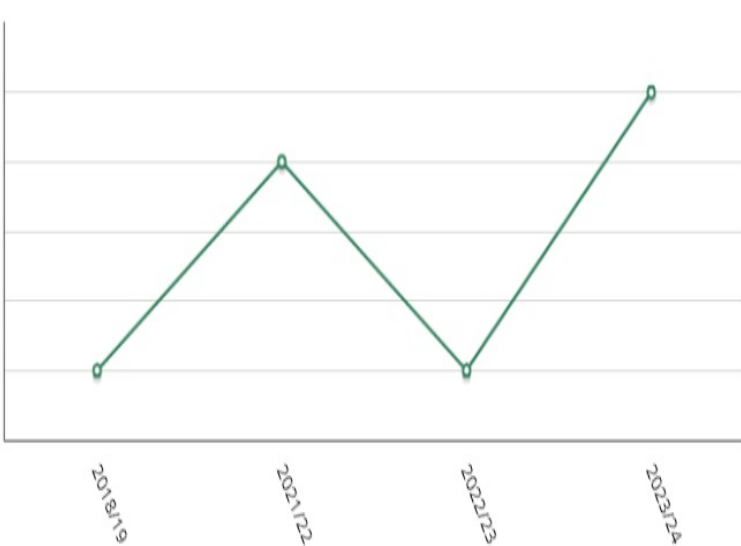
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Community Payback Orders - Percentage of unpaid work placement completions within Court timescale.	H1 2023/24	100%	80%	Green	(improving)		All unpaid work placements were completed within Court timescales in the first six months of the year. Up from 91% in the previous six months
INCREASE - Criminal Justice Feedback Survey - Did your Order help you look at how to stop offending?	H1 2023/24	100%	100%	Green	(no change)		In the first six months of 2023/24 of the four Survey forms returned all said their Orders had helped them to look at how to stop offending

7. Working together with individuals and communities to tackle health inequalities

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Breastfeeding at 6-8 weeks in 20% most deprived (SIMD 1) data zones.	2022/23	19.2%	25%	Red	(improving)		This is an increase for the second year running, though this measure applies to a very small population so is highly sensitive. The drop off rate between first visit and 6-8 weeks is very low. Our comparator authority, East Dunbartonshire continues to see a higher rate in SIMD 1, with 26.3%, however East Renfrewshire continues to be higher in SIMD 2, with 29.3%. The gap between the most affluent (SIMD 5) and the most deprived (SIMD 1) areas, has decreased for the third year in a row from 36.6% in 2019/20 to 25.7% in 2022/23. (Source: Public Health Scotland Infant Feeding Dashboard, Nov 2023)

8. Working together with staff across the partnership to support resilience and well-being

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - % Staff who report 'I am given the time and resources to support my learning growth' in iMatter staff survey.	2023	77%	90%	Red	(improving)		Average score based on 655 responses, iMatter Survey Report 2023. Although we are missing target for this measure, performance was consistent with the previous surveys.

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - % Staff who report "I feel involved in decisions in relation to my job" in iMatter staff survey.	2023	75%		Data Only	(improving)		Based on 655 responses, iMatter Survey Report 2023. This is consistent with performance in 2022 (71%)
INCREASE - % Staff who report "their manager cares about my health and well-being" in iMatter survey	2023	89%		Data Only	(improving)		Based on 655 responses, iMatter Survey Report 2023. This continues to be a very positive score and is the same as pre-pandemic levels. Health & Wellbeing continues to be a focussed priority.
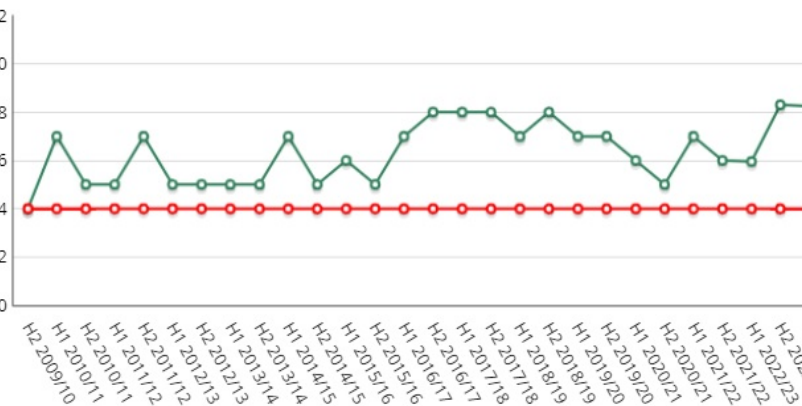
9. Protecting people from harm						
Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart / Latest Note
INCREASE - Domestic abuse - % change / improvement in women's safety and wellbeing outcomes	H1 2023/24	90%	85%	Green	(no change)	In total 553 women and children were supported compared to 593 in the same period last year. Following significant increase in helpline calls and drop-in post pandemic the service is now seeing a move back to levels experienced pre-Covid. Women's Aid report significant change and improvement across all reported outcomes 98 reviews were completed with 90% of women assessed noting improvement in progress in their outcomes. Reduction in risk is reflected in the significant increases in the areas of safety with 90% improvement, health & wellbeing 82%, and empowerment and self-esteem 82%
INCREASE - People agreed to be at risk of harm and requiring a protection plan have one in place	H1 2023/24	100%	100%	Green	(no change)	All people who are identified as being at risk of harm have a protection plan in place where required. This has been the historically consistent position.
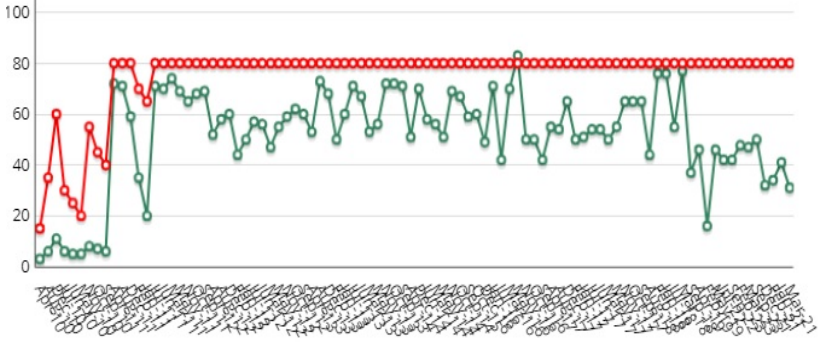
10. Organisational outcomes

10.2 Efficiency

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
INCREASE - Payment of invoices: Percentage invoices paid within agreed period (30 days)	H1 2023/24	86.8%	90%	Amber	(improving)		Of the 9,745 invoices paid in the first six months of the year 8457 were paid within 30 days.

10.3 Our people

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - Percentage of days lost to sickness absence for HSCP NHS staff	H1 2023/24	8.25%	4.0%	Red	(improving)		Average of available data for the first six months of 2023/24. This represents a slight improvement on the previous six months (8.31%)

Description	Data Period	Current Value	Target	Traffic Light	Trend	Chart	Latest Note
DECREASE - Sickness absence days per employee - HSCP (LA staff)	H1 2023/24	5.9	6.2	Green	(improving)		In the first six months of 2023/24 absence was 5.9 days lost per employee (Qtrly average) this is down from 7.64 in the previous six months.
INCREASE - Percentage of NHS staff with an electronic Knowledge and Skills Framework review recorded on TURAS Appraisal System	Sept 2023	50%	80%	Red	(declining)		Due to the pressures of the pandemic KSF became lower priority over the past 2 years. The KSF Lead sends out monthly communications to managers to increase compliance. Additional training has also been made available as refresher courses for reviewers. Increasing steadily over previous 4 months. Aiming for 60% reduced target by 31st December 2023.
INCREASE - iMatter Response Rate - HSCP	July 2023	57%		Data Only	(declining)		iMatter response rate at July 2023, down from 67% in 2022/23.

Appendix Two – Exception Reports

Reablement indicator - Percentage of people whose care need has reduced following reablement

Purpose of the indicator
The measure sets a standard of 60% of all service users who receive input from the Reablement service to be rehabilitated where the level of support required after discharge from the service has reduced. It is used to measure how successful the service is at using Occupational Therapy input and care workers using Reablement methods to allow service users to be more independent in elements of daily living and personal care.

What does good look like?
As many people as possible, after a period of intense reablement input, require little or no support which means that the need for ongoing care at home services is greatly reduced. This allows people of East Renfrewshire to remain as independent as possible in their own home upon discharge from hospital or a period of need when referred to the service.

Current status of measure
This exception report is based on the level of need following discharge from the Reablement service. Currently the target is that 60% of people will require less support upon discharge from the service. Overall performance for 2022/23 was 48%, significantly missing target, however we have seen performance improve for the latest mid-year reporting period. At the point of reporting at the end of September 2023 the current status of the service is 61% of discharges have reduced or no service. The target rate has been achieved for the last two quarters.
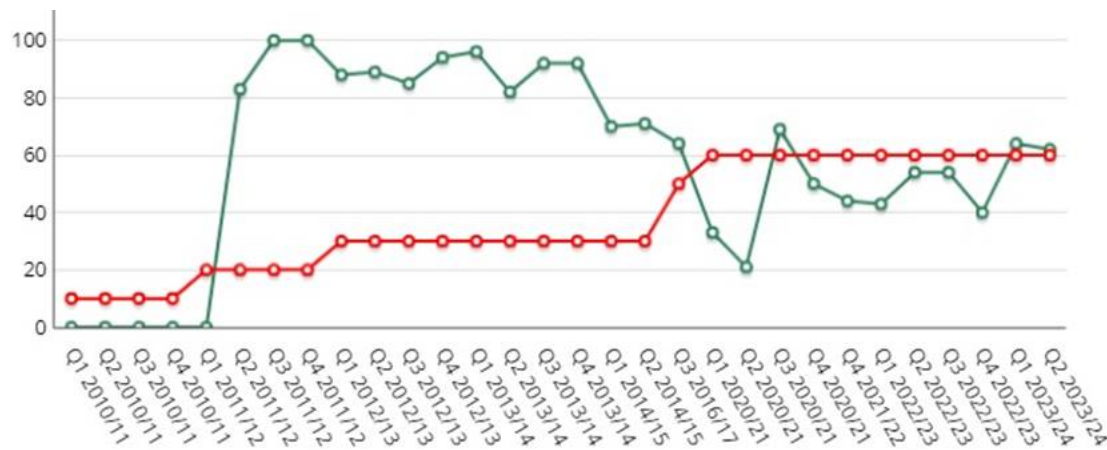
Reason/explanation for current performance
As the reablement service was initially established, the number of service users who accessed support was limited. Service users were screened for suitability to the service and whether there was potential for the person to be re-abled. During this period, performance was consistently ahead of target as the service was focused on service users with higher levels of suitability and potential for successful outcomes. As the service developed, reablement has been made available to a wider group of people with varying levels of potential for successful outcomes. Over the period since the start of the pandemic, the annual number of reablement service users (closed cases) dropped significantly from 300 in 2019/20 to 126 in 2022/23. Last

year, of the 126 total cases, 61 (48%) were closed with the service user requiring a reduced or withdrawn care package. This compares with 2021/22 where, of 156 reablement cases, 94 (60%) were closed with reduced or no care package.

In the last few years, East Renfrewshire care at home service has experienced unprecedented demand pressures with higher levels of care need and complexity among the people we work with. Between March 2020 and March 2023, the average size of care at home packages increased from just over 7 hours to nearly 8.5 hours per week. 14% of our service users now require support from two or more carers; up from 9% in February 2020. At the same time, the service has experience issues with recruitment and retention and pressures as a result of staff absence. This was particularly the case during quarter 3 of 2022/23 where staffing issues were so significant that we had to reduce service levels to some existing care at home clients and were limited in our ability to accept new packages of care. These issues significantly impacted our capacity to accept reablement referrals during the year.

In addition, we are seeing that as a result of higher levels of complexity and need, and increased pressure to discharge people as early as possible, people are leaving hospital with higher levels of frailty and less potential for successful outcomes through reablement.

In summary, increased pressures on care at home services through higher demand and staff capacity issues, and higher levels of frailty and complexity among people return to the community from hospital, have reduced our capacity to deliver reablement and we have not been able to achieve the level of outcomes for individuals seen in previous years.

Mitigating action

The service is working hard to address capacity issues and we are seeing improved performance in the first six months of 2023/24. Care at home staff on long-term absence have returned to work and we successfully recruited to our Band 3 Health Care Assistant within the team. For the half year April to September 2023/24 our performance was at 63%. Of the 87 reablement service users discharged during the period, 53 were discharged with no or reduced service. This is up from 47% in the previous six month period and projected to sustain the measure above target of 60% in the coming year.

Although the measure has maintained at above the target level, the number of service users going through the service has reduced over the last quarter with increased absence of Occupational Therapists reducing the capacity of service users that are able to be assessed through the service.

Investment

Investment of recruitment of two Band 3 Healthcare Assistants has allowed more intense rehabilitation to take place with more visits taking place with service users. This in turn has helped to reduce timescales between referral to the service and initial visits which makes the reablement process a more positive experience and stops services being embedded before the input of rehabilitation and stops service users becoming dependent on services.

Context and benchmarking

This is a local measure and we do not have directly comparable data from other partnerships or nationally. The pressures that the service has faced in relation to demand and workforce pressures have been experienced across the social care sector in Scotland since the pandemic.

Recovery indicator - Total number of Alcohol Brief Interventions (ABIs) delivered in community settings

Purpose of the indicator The mandatory reporting requirement and performance measure for the Alcohol Brief Intervention Local Delivery Plan standard (HEAT Target) is the total number of alcohol brief interventions (ABIs) delivered by setting. East Renfrewshire HSCP is responsible for delivering ABIs in "wider community settings". Alcohol Brief Interventions are a short, evidence-based, structured conversation about alcohol consumption with a patient/client that seeks in a non-confrontational way to motivate and support the individual to think about and/or plan a change in their drinking behaviour in order to reduce their consumption and/or their risk of harm.
What does good look like? East Renfrewshire's annual target for this measure is 419 Alcohol Brief Interventions per year. This equates to a quarterly target of 105. East Renfrewshire's delivery of ABIs contributes to overall health board targets. Alcohol Brief Interventions are an evidence-based early intervention tool that encourages adults to keep their alcohol consumption below harmful levels. Ultimately we want this type of low level intervention available to as many residents as possible as part of a community-wide approach to prevent alcohol-related harm.
Current status of measure For the half year period 1 April to 30 September 2023, East Renfrewshire recorded 319 ABIs delivered. 76% of the annual target has been achieved to date.
Reason/explanation for current performance In order to improve performance on this PI, and address any potential increases in alcohol consumption and harm due to the impact of the pandemic, the East Renfrewshire Alcohol and Drug Partnership (ADP) allocated funding to a 12 month pilot with Glasgow Council on Alcohol (GCA). GCA deliver ABIs in community settings as well as alcohol counselling. The service targets adults aged 16 and over in community settings such as supermarkets, libraries and other public buildings. During the 12 months of the contract to end September 2023, GCA rapidly increased the numbers of ABIs delivered and are now exceeding East Renfrewshire's ABI target, as shown below.
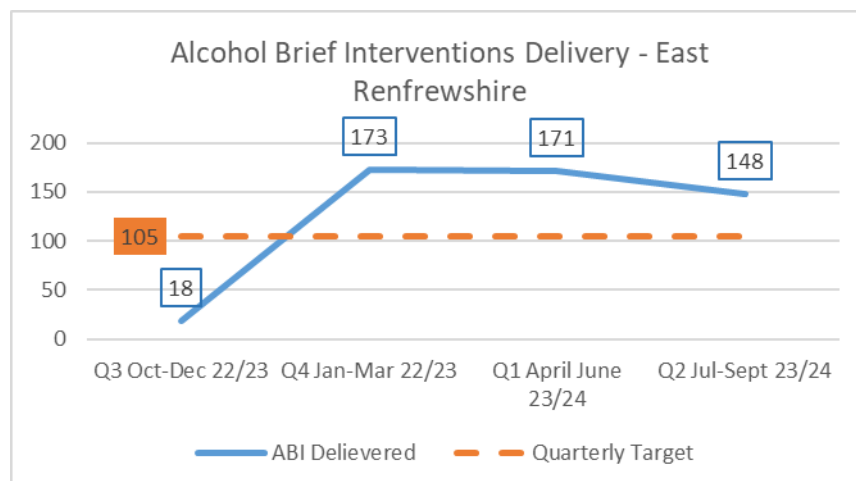
Mitigating action

The Glasgow Council on Alcohol pilot has led to significant improvement in performance against this PI and has now been extended for a further six months to the end of March 2024. This level of ABI delivery is expected to be maintained or exceeded. There is currently no funding to continue the service in 2024-25 and there is a risk of a future decline in performance.

To mitigate this, part of the GCA contract has included training for staff on the delivery of ABIs within key settings, such as community link workers within GP practices, social work, health improvement and third sector services. Key officers have also received "Training for Trainers" and will continue to deliver ABI training to staff groups.

Support is also available and being accessed from NHSGGC health improvement team responsible for ABI delivery, including sharing good practice and effective models of delivery.

HSCP lead officers are developing plans for maintaining local delivery of ABIs via training provision, upskilling of staff, and coordination of delivery in community settings. Details of this will be included in the Alcohol and Drug Strategy 2023-26.

Investment

Investment in the contract with GCA (£67,000 over 18 months) has led to improvements in ABI delivery. This investment has also funded local capacity building and upskilling of staff to enable local staff to deliver ABIs.

Context and benchmarking

East Renfrewshire last met this target in 2016-17. For the period 2017-18 to 2020-21 East Renfrewshire performance dropped to low levels, due to a reduction in capacity to undertake ABIs in community settings. In 2020-21, no ABIs were undertaken due to the Covid pandemic and associated restrictions.

East Renfrewshire is performing well relative to the other HSCPs within the health board area as shown below:

HSCP/ADPs	No. ABIs - Wider Settings	Target for Year	Percentage (of target) Achieved
East Dunbartonshire	198	487	41%
East Renfrewshire	319	419	76%
Glasgow City	5686	5066	112%
Inverclyde	0	612	0%
Renfrewshire	0	1116	0%
West Dunbartonshire	287	688	42%

Each HSCP area uses different delivery models that may be commissioned or delivered by HSCP services.