THIS PAPER RELATES TO ITEM 4 ON THE AGENDA

CLACKMANNANSHIRE COUNCIL

Report to Performance and Partnership Committee

Date of Meeting: 29 August 2019

Subject: Health and Social Care Partnership

Report by: Locality Manager

1.0 Purpose

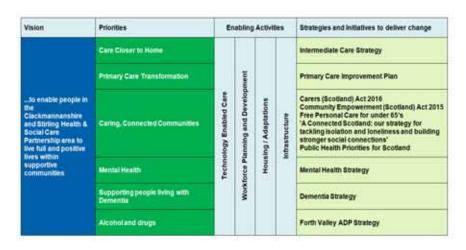
1.1. This report provides a summary on the work being undertaken within the Health and Social Care Partnership and raises awareness of any issues which have implications for the Clackmannanshire locality. The report provides an up-date on the overall performance of the Partnership.

2.0 Recommendations

- 2.1. Note this paper and the continuing work being undertaken to develop services
- 2.2. Note the financial sustainability considerations
- 2.3. Note the performance of the Partnership

3.0 Transforming Care and Strategic Planning

3.1. The Strategic Commissioning Plan 2019-22 was approved at the Integration Joint Board on 27 March 2019, and outlines the strategic priorities of the Health and Social Care Partnership for the next 3 years. These priorities are set out graphically below, aligned to the vision that people are enabled to live well within supportive communities:



- 3.2. The 6 core priorities identified above indicate a whole system model of care which aims to support people within their communities, supported by 4 enabling activities. It is the enablers which will be core to the success of the Strategic Commissioning Plan, as they will ensure that the appropriate infrastructures are embedded into services and communities.
- 3.3. To ensure delivery of these priorities, a Transforming Care Programme Board has been approved, which will monitor and oversee progress of each programme area.
- 3.4. The Transforming Care Board will also monitor the delivery of savings and efficiencies. The Chief Officer and Chief Finance Officer will undertake fortnightly meetings to review progress until the point at which the Transforming Care Board is fully established and functioning.
- 3.5. The Board will provide governance and strategic direction to programme leads, and will be chaired by the Chief Officer. There will be representation on the Board from the senior levels of the constituent authorities, ensuring shared and collaborative leadership in agreeing progress and monitoring performance and change activities.
- 3.6. It is recognised that there needs to be shift in focus to place based and preventative supports, while developments in housing and technology enabled care should be exploited in all care groups. This requires a change in approach from our first points of contact, and proactive promotion of alternatives to communities, to the assessment decisions that professionals make with individuals and families.
- 3.7. Meaningful locality plans are also required with full engagement from local communities. This will include consideration of what services people expect to experience in their communities to meet their personal outcomes, while effectively supporting self-management and personal resilience.

4.0 Ministerial Strategic Group for Health and Social Care Review of Progress of Integration – Self-evaluation

- 4.1. On 25 March 2019, the now Director General of Health and Social Care and Chief Executive of NHS Scotland, Malcolm Wright, wrote to all Integration Joint Boards, and constituent bodies to advise that they should prepare a self-evaluation of their organisation against the proposals outlined in a report on progress of integration, published in February 2019:https://www.gov.scot/publications/ministerial-strategic-group-health-community-care-review-progress-integration-health-social-care-final-report/
- 4.2. A co-ordinated response to this was prepared utilising outputs from an online survey, and a series of workshop sessions. Following a consensus session, the self-evaluation was agreed and submitted via a template provided by Scottish Government.
- 4.3. The self-evaluation found that in most areas, the organisation was Partly Established in terms of progress across the 6 identified themes. There were 5 proposals where the evaluation was found to be Established.

- 4.4. Following submission of the self-evaluation to the IJB on 17 July 2019, the Chief Officer now intends to develop a detailed action plan which will be monitored by the Audit Committee of the IJB. Progress of action plans will also be provided to Scottish Government.
- 4.5. The Partnership will also be supported in this development by the Director of Delivery for Health and Social Care Integration at the Scottish Government, David Williams.

5.0 Financial Sustainability

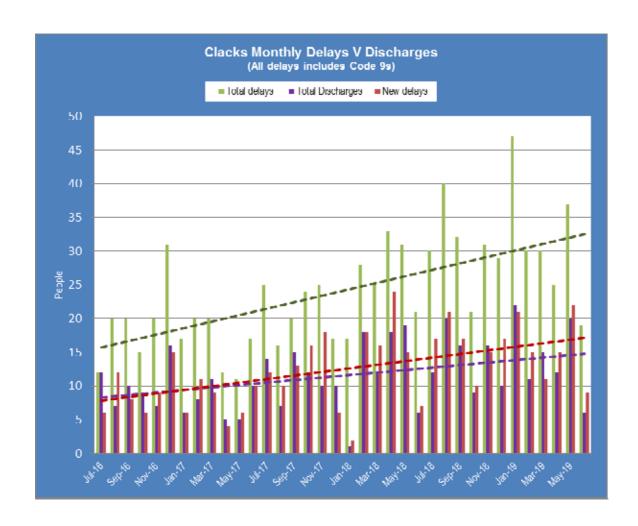
- 5.1. The IJB accepted an initial unbalanced budget in March 2019 and considered further options for sustainable service delivery in July 2019.
- 5.2. As part of these considerations the Integration Joint Board agreed an approach to balance the Integrated Budget over the lifespan of the 2019-22 Strategic Commissioning Plan.
- 5.3. The report to the IJB in July identified a gap of c£6.3m with further options being developed, as part of developing the Transforming Care Programme and aligned to Strategic Commissioning Plan priorities, to close this gap.
- 5.4. This achievement of the aims set out above will continue to be challenging and collaborative partnership working is critical to addressing these challenges.

6.0 Performance

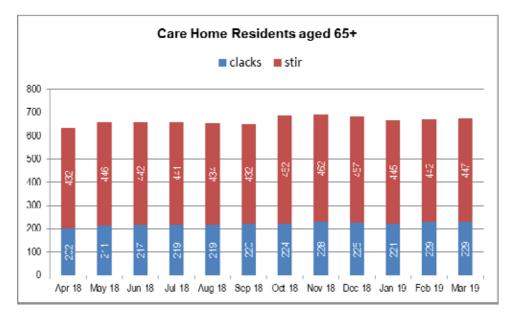
INDICATOR TYPE	_	V	*	1	Data Only	TOTAL
Self Management Outcome Indicators	1	3	0	0	0	4
Live Independently Outcome Indicators	3	3	0	0	0	6
Improvement Outcome Indicators	3	2	2	0	0	7
Safe Outcome Indicators	0	0	0	0	2	2
Resources Outcome Indicators	3	3	0	0	0	6
National Core Indicators	5	1	1	0	0	7
National MSG Indicators	1	5	0	1	0	7

- 6.1. The table above shows the year end summary performance for the Partnership. This information was reported to the last IJB (<u>link to full report</u>) and highlighted the following:
 - The Strategic Risk Register was last reviewed by the Joint Management Team 23 May 2019 and was reviewed by Audit Committee June 2019. There are 14 high level risks, 4 of which have been scored high.

- Locality based performance reporting is available for Clackmannanshire and in line with the wider Partnership performance is monitored by both the Joint Management Team and the multi agency Strategic Planning Group (SPG).
- The Partnership published it's <u>Annual Performance Report</u> on 31st July. This is a statutory document with a statutory deadline. Overall performance is not as good as last year but still within tolerance. This document will be updated in several months time once completedness reaches 100% for several of the indicators highlighted. Narrative gives a good summary of work undertaken throughout the year in delivery of the Strategic Plan for the Partnership. It also details actions and progress against any inspections throughout the year.
- 6.2. It is the responsibility of the IJB to take action against increasing numbers of attendances in ED. Through developing Health and Social Care initiatives the aim is to meet the Scottish Government's 2020 vision to deliver the highest standard of care which is preventative, anticipatory and promoting self management. Through signposting to more appropriate services it may no longer be necessary for patients to present directly to ED, the anticipated benefit being to reduce how long patients are waiting to be seen and facilitate more efficient hospital flow to improving the overall patient experience.
- 6.3. The average monthly Emergency Department attendance rate in Forth Valley has increased from 1,774 in 2017/18 to 1,847 per 100,000 population 2018/19. This is highlighted as a 4% increase. The Partnership position increased by 4%, 1,211 rate per 100,000 2017/18 in comparison to 2018/19 at 1260, 100,000 population. However, CS Partnership attendances are below the Forth Valley average by 46%.
- 6.4. A delayed discharge is experienced by a hospital inpatient who is clinically ready to move on to a more appropriate care setting but is prevented from doing so for various reasons. Delays can occur for a variety of reasons, but are usually due to a lack of appropriate care or services available within the community. For example, there may not be a place available in a local care home, or a person's house may need altered to help them get around. In March 2019 the number of standard delays for Forth Valley is 48 Clackmannanshire and Stirling accounts for 17 or 35.4% of all standard delays. The average monthly standard delays throughout 2017/18 were 12, for 2018/19 this has increased by 46% to an average of 19 per month. 41% (7/17) C&S delays are waiting to over 2 weeks at the March 2019 census point. These C&S patients account for 29% (6/24) of Forth Valley waits over 2 weeks attributing to 228/291 occupied bed days.
- 6.5. The chart below shows total activity over the month for Clackmannanshire and not just at the census snapshot. The data includes all delays (standard and code 9) reflecting more of the work undertaken by health and social care within a monthly period. It shows the relationship between those entering hospital (new delays) and those leaving (discharges). The March 19 position shows the overall numbers (total delays) are rising, with the number of new admissions continuing to be higher than the number of people being discharged.



6.6. This data is discussed in detail within the Joint Management Team, and Operational Management meetings. Work is also undertaken through the Discharge Improvement Plan monitored by the Delayed Discharge Steering Group which aims to reduce the number of new admissions (new delays) and speed up the number leaving hospital (discharges) through a range of interventions and tests of change.



6.7. The number of care home residents aged (65+) has risen since the beginning of the year, and continues to be higher than the number budgeted for. When

compared to national and other similar partnerships, the number of residents is below the Scottish and comparator averages. The proportion of local authority funded nursing homes is far higher in Clackmannanshire, with fees reflecting the high level of health and personal care.

6.8. Appendix 1 and 2 shows a summary of a range of Health and Social Care data for the Partnership and Clackmannanshire.

7.0	Sustainability Implications	
7.1.		
8.0	Resource Implications	
8.1.	Financial Details	
8.2.	The full financial implications of the recommendations are set out in the report This includes a reference to full life cycle costs where appropriate.	
	appropriate. Yes	· ^
8.3.	Finance have been consulted and have agreed the financial implications a set out in the report. Yes	
8. <i>4</i> .	Staffing	
9.0	Exempt Reports	
9.1.	Is this report exempt? Yes \square (please detail the reasons for exemption below) No	χ
7.0	Declarations	
	The recommendations contained within this report support or implement of Corporate Priorities and Council Policies.	ur
(1)	Our Priorities (Please double click on the check box ☑)	
	The area has a positive image and attracts people and businesses Our communities are more cohesive and inclusive People are better skilled, trained and ready for learning and employment Our communities are safer	
	Vulnerable people and families are supported	X
	Substance misuse and its effects are reduced	Χ
	Health is improving and health inequalities are reducing	Χ
	The environment is protected and enhanced for all	
	The Council is effective, efficient and recognised for excellence	Ш

Not applicable

8.0 Equalities Impact

8.1	Have you undertaken the required equalities impact assessment to ensure
	that no groups are adversely affected by the recommendations?

Yes ☐ No X

9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes X

10.0 Appendices

10.1 Please list any appendices attached to this report. If there are no appendices, please state "none".

Appendix 1 – Performance Summary Report

Appendix 2 – HSCP Balanced Scorecard

11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes \Box (please list the documents below) No X

Author(s)

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Carol Johnson	Senior Analyst	

Approved by

NAME	DESIGNATION	SIGNATURE
Annemargaret Black	Chief Officer	

Appendix 1 – Section 1 Performance Summary Report

The Partnership focus is across the national outcomes as well as current local outcomes, with work on-going to support a balanced approach to measurement and reporting. It should be noted that work is required in terms of developing a balanced scorecard to provide a broader range of measures and build upon qualitative and quantitative data which will enable and support quality improvement and assurance.

Direction of travel relates to previously reported position						
▲ Improvement in period						
∢ ▶	Position maintained					
▼	Deterioration in period					
No comparative data						

The tables below highlight local data for a rolling 12 month average as at March 2019 against the average as at March 2018, and Delayed Discharges as at March 2019 census. National data is reported at Q3 December 2018 (delays are around validation and completedness of NHS FV data for SMR01s¹). Performance data pertain to adults aged 18 and over. National data includes use of all relevant NHS services across Scotland, local data only includes those residents attending Forth Valley NHS services.

At a glance summary:

INDICATOR TYPE	_	V	4	_	Data Only	TOTAL
Self Management Outcome Indicators	1	3	0	0	0	4
Live Independently Outcome Indicators	3	3	0	0	0	6
Improvement Outcome Indicators	3	2	2	0	0	7
Safe Outcome Indicators	0	0	0	0	2	2
Resources Outcome Indicators	3	3	0	0	0	6
National Core Indicators	5	1	1	0	0	7
National MSG Indicators	1	5	0	1	0	7

¹ 100% completedness on SMR01 up to Nov 18. Dec 18 (99%), Jan 19 (31%), Feb 19 (4%), Mar 19 (2%) as at May 29th 2019.

TABL	TABLE 1 Outcome 1 - People are able to look after and improve their own health and wellbeing and live in good health for longer.								
Ref	Local Measure	15/16	16/17	17/18	18/19	Direction of travel	Exception Report	Note	
24	Emergency department attendances per 100,000 Forth Valley population	1,731	1,747	1,774	1,847	_	1		
25	Emergency department attendances per 100,000 Clackmannanshire & Stirling population	1,145	1,166	1,211	1,260	•	4		
26	Number of patients with an Anticipatory Care Plan in Forth Valley	n/a	n/a	15,522	16,178				
27	Number of patients with an Anticipatory Care Plan in Clackmannanshire & Stirling	n/a	n/a	8,315	8,295	•		Figures reduced due to annual ISD cull of records.	

Source: NHS Forth Valley

TABLE 2 Outcome 2 - People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably
practicable, independently and at home or in a homely setting in their community.

Ref	Local Measure	15/16	16/17	17/18	18/19	Direction of travel	Exception Report	Note
28	Emergency admission rate per 100,000 Forth Valley population	1,007	1,007	968	927	A		
29	Emergency admission rate per 100,000 Clackmannanshire & Stirling population	865	865	831	796	•		
30	Key Information Summary as a percentage of the Board List size for Forth Valley	n/a	n/a	4.9%	5.0%	A		Target 1.5%
31	Key Information Summary as a percentage of the Board List size for Clackmannanshire & Stirling	n/a	n/a	5.7%	5.7%	•		Target 1.5% Figures reduced due to annual ISD cull of records to remove those no longer eligible through change in demographics or patient being deceased.
32	Standard delayed discharges census data (total for year)	145	200	160	233	▼	1	
33	Delayed discharges over 2 weeks census data (total for year)	54	82	51	74	•	\	
34	Number of Care Home residents aged 65+ (as at March)	701	n/a	634	676	Data Only	1	Budget

Source: NHS Forth Valley, Social Care

	TABLE 3 Outcome 4 - Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.							
Ref	Local Measure	15/16	16/17	17/18	18/19	Direction of travel	Exception Report	Note
35	Acute emergency bed days per 1,000 Forth Valley population	767	637	784	743			
36	Acute emergency bed days per 1,000 Clackmannanshire & Stirling population	707	712	701	663			
37	Bed days occupied by delayed discharges (monthly total for year)	5,805	7,160	6,331	7,855	•	\	
38	Number of code 9 delays as at March	13	10	5	5	◆ ▶	>	
39	Number of code 100 delays as at March	n/a	n/a	5	5	◆ ▶	>	
40	Discharge Delays – including code 9 and Guardianship as at March	17	23	24	22	A	-	
41	Registered social Care Services graded 5 or above	n/a	n/a	80%	53%	▼	~	Details in APR – Improvement areas

Source: NHS Forth Valley, Care Inspectorate

TABL	TABLE 4 Outcome 7 - People who use health and social care services are safe from harm.							
Ref	Local Measure	15/16	16/17	17/18	18/19	Direction of travel	Exception Report	Note
42	Number of Adult Support Protection referrals	513	719	805	744	Data Only	1	Timescales
43	Number of Adult Support Protection investigations	85	52	147	169	Data Only	\	Outcomes

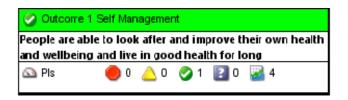
Source: Social Care

TABL	E 5 Outcome 9 - Resources are used effectively and efficiently in the	provis	ion of I	health a	and soc	ial care serv	/ices.	
Ref	Local Measure	15/16	16/17	17/18	18/19	Direction of travel	Exception Report	Note
44	Emergency department 4 hour wait Forth Valley	93.4%	93.2%	88.0%	84.2%	_	/	
45	Emergency department 4 hour wait Clackmannanshire & Stirling	93.9%	94.3%	88.9%	85.4%	▼	<	
46	Readmission rate within 28 days per 1,000 Forth Valley population	1.84	1.24	0.68	0.59	A		
47	Readmission rate within 28 days per 1,000 Clackmannanshire & Stirling population	1.57	1.09	0.56	0.48	A		
48	Readmission rate within 28 days per 1,000 Clackmannanshire & Stirling 75+ population	1.42	1.12	1.13	1.0	A		
49	Number of Social Care referrals	n/a	n/a	4,921	4,534	Data Only	1	Demand
50	Number of Social Care assessments completed	n/a	n/a	7,105	5,468	▼	1	Capacity

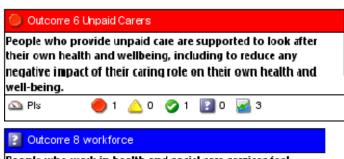
Source: NHS Forth Valley, Social Care

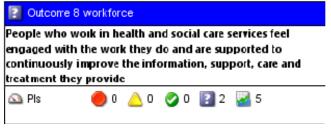
Appendix 2 - HSCP Balanced Scorecard

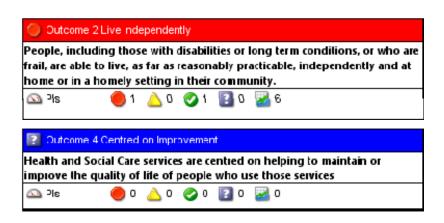
Performance for Clackmannanshire Locality



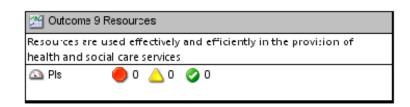












EXCEPTIONS

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	Septembe r 2018	Q2 2018 /19	October 2018	November 2018	December 2018	Q3 2018 /19	January 2019	February 2019	March 2019	Q4 2018 /19	2018/	19			2015 /16	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Long Trend	Value	
ADC ADA 008	Standard delayed patients waiting in hospital for more than 2 weeks for discharge to appropriate settings	0	0	3	3	4	6	3	13	3	3	10	16	3	3	2	8	40	0		-	12	
ADC ADA 008b	Number of Clackmannanshire people waiting for discharge to appropriate settings for standard and code 9. Quarter and annual figure are an average.	11	9	11	10	13	12	12	12	9	9	16	11	10	12	5	9	10.5	7		•	8.25	
ADC CUS 06b	Adult stage 1 complaint upheld/partially upheld for Clackmannanshire locality of HSCP.	1	0	0	1	0	0	2	2	0	0	0	0	1	0	1	2	5			?		1 upheld and 1 part upheld
ADC CUS 09b	Adult complaint stage 1 not complete within timescale for Clackmannanshire locality of HSCP.	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1			?		
ADC ADA 011	% of Adult Support Plans for carers completed in Adult Social Care				20.4 3%				42.5 9%				28.5 7%				39.3 9%	30.0 8%	39%		1	9.86 %	
HSC FTE GOV	Establishment – FTE (Health & Social Care Partnership)	155. 09	153. 88	151. 71	153. 83	149. 89	148	145. 68	148. 13	144. 8	144. 8	142. 62	142. 71	140. 97	139. 12	135. 76	138. 02	135. 76			1		This corporate indicator averages the year end. I put in the March 19 figure.
ADC SAB 001A	Headcount number of staff in HSCP Clacks locality. Includes relief staff.	235	238	239	239	244	242	238	238	236		233	233	232	229	226	225. 5	219			•		
ADC SAB 002A	Number of new staff in HSCP Clacks locality.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					17/18- 0 new starts in the year
ADC SAB 002B	Number of staff leaving service (non-FTE) in HSCP Clacks locality.	2	1	2	5	2	4	2	8	0	4	3	7	2	3	8	14	37					17/18 - 36 leavers in the year

National Outcome 1 Self Management

People are able to look after and improve their own health and wellbeing and live in good health for longer

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	Septemb er 2018	Q2 2018 /19	October 2018	Novembe r 2018	Decembe r 2018	Q3 2018 /19	January 2019	February 2019	_	Q4 2018 /19	2018/	19			2015/16	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Long Trend	Value	
ADC ADA 01a	% of Clackmannanshire people aged 65 and over with intensive care needs who receive 10 hours or more of home care per week	47%	47%	46%	46%	46%	47%	46%	46%	50%	49%	49%	49%	49%	51%	51%	50%	48%	45%	S	1	48%	
ADC ADA 002c	Number of clients who went home from intermediate care with a package of care in the quarter.				0				2	0	1	0	1	1	0	1	2	5			1	3	
ADC ADA 01m	Number of hours care at start of reablement in Clackmannanshire				481				317.25				372.75				340.75	377.94			•	517.69	
ADC ADA 01p	% of clients with reduced care hours at the end of reablement period in Clackmannanshire				48%				30%				31%				34%	36%			•	25%	
ADC ADA 01s	Number of clients who have received a reablement service (i.e. been enabled). in Clackmannanshire				33				27				39				29	128			?•	196	
ADC ADA 002d	Number of clients who went home from intermediate care with no package of care in the quarter.				2				0	0	0	0	0	0	0	0	0	2			-	0.25	

National Outcome 2 Live Independently

People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practical, independently and at home or in a homely setting in their community

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	Septembe r 2018	Q2 2018 /19	October 2018	November 2018	December 2018	Q3 2018 /19	January 2019	February 2019	March 2019	Q4 2018 /19	2018/	19			2015 /16	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Long Trend	Value	
ADC ADA 008	Standard delayed patients waiting in hospital for more than 2 weeks for discharge to appropriate settings	0	0	3	3	4	6	3	13	3	3	10	16	3	3	2	8	40	0		-	12	
ADC ADA 002c	Number of clients who went home from intermediate care with a package of care in the quarter.				0				2	0	1	0	1	1	0	1	2	5				3	
ADC ADA 01mb	% of reablement double up (staff) hours of clients who completed the service				15%				13.5%				19.31				26.28	18.52		***	?		
ADC ADA 01pb	% of clients with increased care hours at end of reablement				%90.9				3.7%				20.51%				10.34%	10.15%			?		
ADC ADA 002a	Total number of intermediate beds occupied by clients in period.				11				10	6	6	7	19	2	4	6	12	52			?		Please note that service users will over lap through the months. (i.e. one service user could have occupied a bed in all 3 months). 4 admitted and discharged in Q4. 1 admitted in Q3 and discharged Q4. 4 service users occupied in Q3 and 3 still ongoing.
ADC ADA 002b	Number of clients who moved from intermediate to long term care in the quarter.				6				2	1	0	0	1	0	1	0	1	10			?	13	

ADC ADA 002k	% (of population) people age 75+ in care homes who have been placed by the local authority.								4.48 %								4.75 %	4.65 %	-	4.65 %	
ADC ADA 008b	Number of Clackmannanshire people waiting for discharge to appropriate settings for standard and code 9. Quarter and annual figure are an average.	11	9	11	10	13	12	12	12	9	9	16	11	10	12	5	9	10.5 7	-	8.25	
ADC ADA 01n	Number of hours care post reablement (after 6 weeks) in Clackmannanshire				381.5				239.5	72.75	119.25	136.5	328.5				276.5	1,226	1	3,063.6	
ADC ADA 01q	% of clients receiving no care after reablement in Clackmannanshire		Ų.		24%				52%				23%				28%	32%	<u></u>	38%	

National Outcome 3 Positive Experience

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

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	Septembe r 2018	Q2 2018 /19	October 2018	Novembe r 2018	Decembe r 2018	Q3 2018 /19	January 2019	February 2019	March 2019	Q4 2018 /19	2018/	19			2015 /16	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Long Trend	Value	
ADC CUS 01b	3	Not m Month		ed for		Not m Month	neasure ns	ed for		Not m Month		ed for	1.5	Not m Month	neasure ns	ed for	0	1	0		-	0	
ADC CUS 01a	Adult complaint stage 2 concluded	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	1			?		
ADC CUS 02a	Adult stage 2 complaint complete within timescale.	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	1			?		
ADC CUS 03a	Adult complaint, stage 2 not complete within timescale.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			?		

ADC CUS 04a	Stage 2 Adult complaints not complete within period for Clackmannanshire locality of HSCP.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	?	
ADC CUS 04b	Adult stage 1 complaint received for Clackmannanshire locality of HSCP.	2	1	0	3	0	2	4	6	0	0	1	1	1	0	1	2	12		?	2 complaints in Provision Service
ADC CUS 05b	Adult complaint stage 1 concluded for Clackmannanshire locality of HSCP	2	1	0	3	0	2	4	6	0	0	0	0	1	0	1	2	11		?	
ADC CUS 06b	Adult stage 1 complaint upheld/partially upheld for Clackmannanshire locality of HSCP.	1	0	0	1	0	0	2	2	0	0	0	0	1	0	1	2	5		?	1 upheld and 1 part upheld
ADC CUS 07b	Adult stage 1 complaint, not upheld for Clackmannanshire locality of HSCP.	1	1	0	2	0	2	2	4	0	0	0	0	0	0	0	0	6	***	?	
ADC CUS 08b	Adult complaint stage 1 complete within timescale for Clackmannanshire locality of HSCP.	2	1	0	3	0	2	4	6	0	0	0	0	1	0	1	2	11		?	
ADC CUS 09b	Adult complaint stage 1 not complete within timescale for Clackmannanshire locality of HSCP.	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1		?	
ADC CUS 10b	Adult stage 1 complaint not complete for Clackmannanshire locality of HSCP.	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1	-	?	
ADC CUS 11b	Adult complaint, stage 2 received in period for Clackmannanshire locality of HSCP.	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	1	*	?	

National Outcome 6 Unpaid Carers

People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and wellbeing

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	Septembe r 2018	Q2 2018 /19	October 2018	November 2018	December 2018	Q3 2018 /19	January 2019	February 2019	March 2019	Q4 2018 /19	2018/	19			2015 /16	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target		Long Trend	Value	
ADC ADA 011B	Number of Adult Support Plans for carers offered in Clackmannanshire locality HSCP				220				171				192				135	718		Y	>		
ADC ADA 011C	Number of Adult Support Plans for carers accepted in Clackmannanshire locality.				93				54				56				33	236		V	?		
ADC ADA 011D	Number of eligible Adult Support plans for carers completed.				19				23				16				13	71		*	*	79	
ADC ADA 011	% of Adult Support Plans for carers completed in Adult Social Care				20.43%				42.59%				28.57%				39.39%	30.08%	39%		1	%98.6	
ADC ADA 021	% annual reviews completed within timescale iin Adult Care Clacks Social Services																				?	44.5 2%	

National Outcome 7 (Clacks Locality BSC)

People using health and social care services are safe from harm

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	September 2018	Q2 2018 /19	October 2018	November 2018	December 2018	Q3 2018 /19	January 2019	February 2019	March 2019	Q4 2018 /19	2018	/19		2015/16	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Status	Long Trend	Value	
ADC ADA 019	% of Adult Protection discussions held within 24 hours of referral	100 %	100 %	100 %	100 %	88%	67%	33%	75%	85%	93%	95%	91%	94%	100 %	100 %	98%	92%		4	87%	
ADC MHO 001	Number of Emergency Detention Certificates (Mental Health) Section 36	2	1	2	5	1	2	4	7	4	2	1	7	2	4	1	7	26		-	5	
ADC MHO 002	Number of Short Term Detention Certificates (Mental Health) Section 44	7	3	7	17	0	5	4	9	3	4	2	9	4	5	4	13	48	**	-	28	
ADC MHO 003	Number of Compulsory Treatment Orders (existing)	24	25	27	27	26	25	23	23	24	25	25	25	24	25	22	22	22	*	1		
ADC MHO 004	Number of Compulsory Treatment Orders (new applications)	4	4	6	14	5	3	1	9	3	3	4	10	3	2	3	8	41	*	1	1	
ADC MHO 007	Total number of Existing Guardianships (private and local authority)	117	119	120	120	122	128	129	129	128	132	132	132	132	132	135	135	135		-		
ADC MHO 023	Number of Compulsion Orders (new)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		?		
ADC MHO 024	Number of Compulsion Orders with Restriction Order	0	1	0	1	0	0	0	0	0	0	0	0	1	0	0	1	2		?		
IJB.02.clac_ASP1	Number of Adult Support and Protection referrals to Clackmannanshire Adult Social Care	4	6	12		8	9	6		20	14	21		16	13	14		143	***	?		

Number of Adult Support and Protection investigations to Clackmannanshire Adult Social Care	2	1	2		3	2	3		2	4	4		4	2	1		30	×	2.	
Total number of new Private & Local Authority Guardianship Orders	3	1	2	6	7	1	0	8	4	1	1	6	1	4	2	7	27	<u> </u>	?	

National Outcome 8 Workforce

People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	September 2018	Q2 2018 /19	October 2018	November 2018	December 2018	Q3 2018 /19	January 2019	February 2019	March 2019	Q4 2018 /19	2018/19			2015/16	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value Target	Status	Long Trend	Value	
HSC AB1 GOV	Average FTE Days Sickness Absence (Health & Social Care Partnership)	0.5	0.8	1.0	3.7	1.4	1.8	1.3	4.2	1.3	1.2	1.0	3.9	1.5	1.3	0.9	3.7	17.3		1		
HSC AB2 GOV	% Sickness Absence (Health & Social Care Partnership)		4.93 %	4.84 %	5.67 %		6.77 %	5.61 %	5.67 %	5.91 %	5.49 %	4.75 %		5.99 %	6.27 %	4.23 %	5.40 %	6.39 7.00 %		1		
HSC FTE GOV	Establishment – FTE (Health & Social Care Partnership)		153. 88		153. 83	149. 89	148	145. 68	148. 13	144. 8	144. 8	142. 62	142. 71	140. 97	139. 12	135. 76	138. 02	135. 76		•		This corporate indicator averages the year end. I put in the March 19 figure.
ADA TRN GOV	Staff turnover (HSCP - Assessment Care Management)	2.14 %	0%	3.7%	5.81 %	0%	0%	0%	0%	0%	0%	0%	0%	0%	3.89 %	0%		9.68		?		Council average 13.69%
APR TRN GOV	Staff turnover (HSCP - Adult Provision)	0.91 %	0%	1.06 %	1.96	1.28 %	0%	2.28 %	3.6%	0%	0.81 %	2.02 %	_	1.44 %	1.4%	1.12 %		11.8		?		
ADC SAB 001A	Headcount number of staff in HSCP Clacks locality. Includes relief staff.	235	238	239	239	244	242	238	238	236		233	233	232	229	226	225. 5	219		-		

National Outcome 9 Resources

Resources are used effectively and efficiently in the provision of health and social care services

PI Code	Description	April 2018	May 2018	June 2018	Q1 2018 /19	July 2018	August 2018	Septemb er 2018	Q2 2018 /19	October 2018	Novembe r 2018	Decembe r 2018	Q3 2018 /19	January 2019	February 2019	March 2019	2010	2018/	/19			2015/1	Latest Note
		Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Value	Target	Status	Lon g Tren d	Value	
HSC TRN GOV	Staff turnover (Health & Social Care Partnership)	0.85 %	0.37 %	1.21 %	2.81	1.33	1.21 %	1.22 %	3.76 %	0%	0.97 %	2.1%	3.65 %	0.71 %	1.44	1.3%	3.49	13.04 %			-		
ADC CUS 05a	Stage 3 complaint to SPSO for Clackmannanshire locality of HSCP	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			?		
ADC SAB 002A	Number of new staff in HSCP Clacks locality.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		•			17/18- 0 new starts in the year
ADC SAB 002B	Number of staff leaving service (non-FTE) in HSCP Clacks locality.	2	1	2	5	2	4	2	8	0	4	3	7	2	3	8	14	37		•			17/18 - 36 leavers in the year
ADC ADA 002d	Number of clients who went home from intermediate care with no package of care in the quarter.				2				0	0	0	0	0	0	0	0	0	2			•	0.25	
ADC ADA 002f	Average length of stay in intermediate care bed in quarter. Adult SS Clackmannanshire.				9				7				5				7	7			?	46.92	
ADC ADA 01k	Number of people in Clackmannanshire aged 75+ in care home.	190	189	182	182	174	178	190	542	190	192	190	572	188	193	194	575	1,87 1			1	174	