North Lanarkshire Council
Report

Adult Care and Social Work Committee

Does this report require to be approved? ☐ Yes ☒ No

Ref CR/SF **Date** 18/02/25

Adult Social Care Performance Report – Quarter 2 2024/25

From Claire Rae, Chief Officer, North Lanarkshire HSCP

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Executive Summary

The purpose of the report is to provide an update to the Committee on the performance of key areas of activity within Adult Health & Social Care for the period 01st July 2024 to 30th September 2024 (Quarter 2 2024/25).

Recommendations

It is recommended that the Adult Care and Social Work Committee:

(1) Endorse the improvement actions included within Appendix 2 of the report; and
(2) Acknowledge the performance of key areas of activity within Appendix 1 of the report.

The Plan for North Lanarkshire

Priority	Improve the health and wellbeing of our communities
Ambition statement	(25) Ensure intelligent use of data and information to support fully evidence based decision making and future planning
Programme of Work	Resilient People

1. Background

1.1 The Chief Officer has joint quarterly performance review meetings with the Chief Executive of NHS Lanarkshire and the Chief Executive of North Lanarkshire Council. These meetings are supported by a Chief Executive Performance Framework comprising a range of performance measures from across both health and social work systems, including relevant targets and trajectories.

1.2 Based on a traffic-light system there are areas for improvement identified within the performance framework each quarter for those that are flagged as Red or Amber. The performance review meetings are used as a means for jointly agreeing corrective actions.

1.3 Information from these performance reviews has been supplemented with additional performance information below to offer the committee a wider overview of performance across some key areas of adult social care delivery.

2. Report

2.1 The purpose of the report is to provide an update to the Committee on wider performance of key areas of adult social care delivery, in addition to the performance areas for improvement which have been identified as part of the Chief Executive Quarterly Performance Review for the period 01st July 2024 to 30th September 2024 (Quarter 2 2024/25).

2.2 The performance data for Quarter 2 and associated trend information is included as Appendix 1.

2.3 Areas for improvement and planned actions are agreed and developed on an exception basis (i.e., for those indicators which are amber or red, based on tolerance thresholds). These are detailed as Appendix 2 of this report.

3. Measures of success

3.1 Measures of success are contained within Appendix 1 of this report.

4. Supporting documentation

4.1 Appendix 1: Adult Social Care Dashboard

4.2 Appendix 2: Areas for Improvement 01st July 2024 to 30th September 2024 (Quarter 2 2024/25)

Claire Rae
Chief Officer North HSCP

5. Impacts

5.1	**Public Sector Equality Duty and Fairer Scotland Duty** Does the report contain information that has an impact as a result of the Public Sector Equality Duty and/or Fairer Scotland Duty? Yes ☐ No ☒ If Yes, please provide a brief summary of the impact? If Yes, has an assessment been carried out and published on the council's website? https://www.northlanarkshire.gov.uk/your-community/equalities/equality-and-fairer-scotland-duty-impact-assessments Yes ☐ No ☐
5.2	**Financial impact** Does the report contain any financial impacts? Yes ☐ No ☒ If Yes, have all relevant financial impacts been discussed and agreed with Finance? Yes ☐ No ☐ If Yes, please provide a brief summary of the impact?
5.3	**HR policy impact** Does the report contain any HR policy or procedure impacts? Yes ☐ No ☒ If Yes, have all relevant HR impacts been discussed and agreed with People Resources? Yes ☐ No ☐ If Yes, please provide a brief summary of the impact?
5.4	**Legal impact** Does the report contain any legal impacts (such as general legal matters, statutory considerations (including employment law considerations), or new legislation)? Yes ☐ No ☒ If Yes, have all relevant legal impacts been discussed and agreed with Legal and Democratic? Yes ☐ No ☐ If Yes, please provide a brief summary of the impact?
5.5	**Data protection impact** Does the report / project / practice contain or involve the processing of personal data? Yes ☐ No ☒ If Yes, is the processing of this personal data likely to result in a high risk to the data subject? Yes ☐ No ☐ If Yes, has a Data Protection Impact Assessment (DPIA) been carried out and e-mailed to dataprotection@northlan.gov.uk Yes ☐ No ☐
5.6	**Technology / Digital impact** Does the report contain information that has an impact on either technology, digital transformation, service redesign / business change processes, data management, or connectivity / broadband / Wi-Fi? Yes ☐ No ☒ If Yes, please provide a brief summary of the impact?

	Where the impact identifies a requirement for significant technology change, has an assessment been carried out (or is scheduled to be carried out) by the Enterprise Architecture Governance Group (EAGG)? Yes ☐ No ☐
5.7	**Environmental / Carbon impact** Does the report / project / practice contain information that has an impact on any environmental or carbon matters? Yes ☐ No ☒ If Yes, please provide a brief summary of the impact?
5.8	**Communications impact** Does the report contain any information that has an impact on the council's communications activities? Yes ☐ No ☒ If Yes, please provide a brief summary of the impact?
5.9	**Risk impact** Is there a risk impact? Yes ☐ No ☒ If Yes, please provide a brief summary of the key risks and potential impacts, highlighting where the risk(s) are assessed and recorded (e.g. Corporate or Service or Project Risk Registers), and how they are managed?
5.10	**Armed Forces Covenant Duty** Does the report require to take due regard of the Armed Forces Covenant Duty (i.e. does it relate to healthcare, housing, or education services for in-Service or ex-Service personnel, or their families, or widow(er)s)? Yes ☐ No ☒ If Yes, please provide a brief summary of the provision which has been made to ensure there has been appropriate consideration of the particular needs of the Armed Forces community to make sure that they do not face disadvantage compared to other citizens in the provision of public services.
5.11	**Children's rights and wellbeing impact** Does the report contain any information regarding any council activity, service delivery, policy, or plan that has an impact on children and young people up to the age of 18, or on a specific group of these? Yes ☐ No ☒ If Yes, please provide a brief summary of the impact and the provision that has been made to ensure there has been appropriate consideration of the relevant Articles from the United Nations Convention on the Rights of the Child (UNCRC). If Yes, has a Children's Rights and Wellbeing Impact Assessment (CRWIA) been carried out? Yes ☐ No ☐

Appendix 1 – Adult Social Care Dashboard

PLEASE NOTE FOR ALL INDICATORS UPWARDS ARROWS DENOTE POSITIVE PERFORMANCE

Ref.	KPI	Target 2023-24	2023/24 Q1	2023/24 Q2	2023/24 Q3	2023/24 Q4	2024/25 Q1	Performance Compared to Previous Quarter	Performance Compared to Same Quarter Previous Year	Current Performance
2.15	Assistive Technology - Number Of People With Technology (0-17 yrs)	1,452	28	31	31	35	*Data not available*	↑	↑	GREEN
2.16	Assistive Technology - Number Of People With Technology (18-64yrs)		631	618	624	632	*Data not available*	↑	↔	
2.17	Assistive Technology - Number Of People With Technology (65+)		825	856	858	905	*Data not available*	↑	↑	
2.18	Reablement - Number Of People Completing Reablement Process	2000 (500 per quarter)	816	1355	2011	527	444	↓	↓	AMBER
2.19	Reablement - % Of New or Increased Home Support Packages Which Are Reablement	70%	70.3%	70.0%	60.8%	61.1%	57.1%	↓	↓	RED
2.20	Reablement - % Of People With No or Reduced Home Support Service Required At End Of Process	70%	48.0%	58.8%	58.5%	62.6%	58.1%	↓	↑	RED
2.21	Balance Of Care - % Of People (Age 65+)	45%	36.7%	34.0%	36.4%	37.1%	37.0%	↓	↑	RED
2.22	IEAS - % Deliveries Achieved Within 7 Working Days Quarterly	80%	49.9%	53.5%	63.4%	87.1%	*Data not available*	↑	↑	...
4.2	Complaints Processed Within Timescale (NLC)	85%	76.5% (Stage 1) 57.1% (Stage 2)	81.3% (Stage 1) 100% (Stage 2)	92.9% (Stage 1) 100% (Stage 2)	81.1% (Stage 1) 87.5% (Stage 2)	84.6% (Stage 1) 63.6 (Stage 2)	↑	↑	GREEN
4.3	Care Home Placements At End Of Quarter - Per 1000 Popn 65+	24	22.0	21.9	22.0	22.1	22.2	↑	↑	GREEN
4.4	Care Home Placements At End Of Quarter - Per 1000 Popn 75+	50	45.8	45.6	45.9	46.3	46.6	↓	↓	GREEN
4.5	Care Home - Average Length of Stay	865	891	835	834	708	789	↓	↑	GREEN
4.6	Number Of People With Self Directed Support	1,000	2093	2092	2089	2054	2114	↑	↑	GREEN
4.7	Number Of People With A Direct Payment	240	342	357	379	355	365	↑	↑	GREEN
6.1	Community Alarm Service Users 75 Years And Over Per 1000 Population	**Under Review**	193.9	196.5	195.8	196.7	195.0	...	...	...
7.21	% Of Adult Protection Referrals Passed To Care Team For Investigation	20%	14.8%	12.7%	20.1%	24.7%	30.6%	↑	↑	GREEN
7.22	% Of Adult Protection Investigations Going To Initial Case Conference	20%	10.4%	19.2%	11.9%	12.3%	6.9%	↓	↓	RED
7.23	Adult Protection - % Of Referrals With Decision Within 5 Days	60%	77.8%	76.3%	81.7%	80.3%	83.6%	↑	↑	GREEN

7.24	% of Adult Protection Referrals Which Did Not Go On To Investigation Or Other Service	50%	74.2%	75.9%	71.5%	66.0%	57.4%	🡻	🡻	GREEN
9.4	Breakeven Position - Projected Outturn (NLC)	>=0	4.304m Underspend	3.112m Underspend	£3.331m underspend	£0.059m underspend	£1.270m underspend	...	...	...
9.6	Sickness Absence (NLC) - days lost per person	9.22	6.93	10.29	13.74	3.48	6.34	🡻	🡹	GREEN

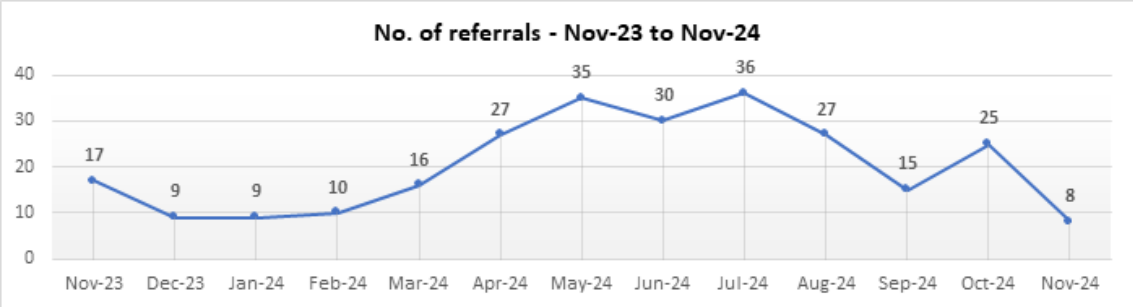
Appendix 2 – Areas for Improvement

1.	Reablement and Rehabilitation	Target 2024/25	2023/24 Q4	2024/25 Q1	Performance Compared to Previous Quarter	Performance Compared to Same Quarter Previous Year	RAG Status
	Reablement - % Of New or Increased Home Support Packages Which Are Reablement	70%	61.1%	57.1%	↓	↓	RED
	Reablement - % Of People With No or Reduced Home Support Service Required At End Of Process	70%	62.6%	58.1%	↓	↑	RED
	Balance Of Care - % Of People (Age 65+)	45%	37.1%	37.0%	↓	↑	RED

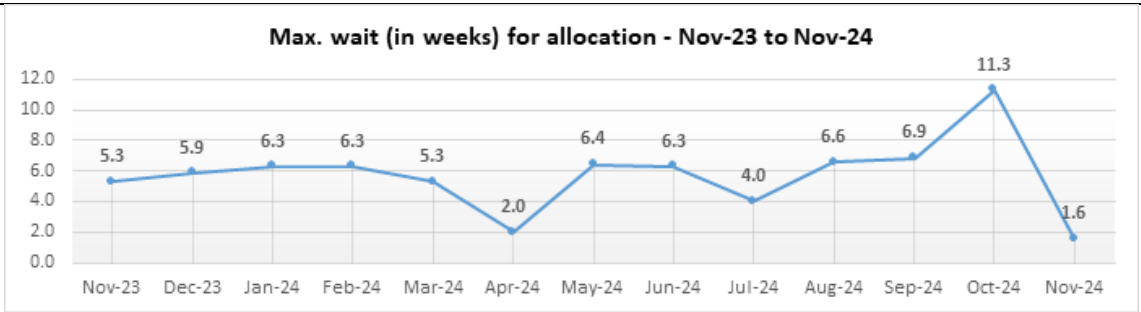
Narrative & Corrective Action

During 2023/24, the number of people completing the Reablement process increased, however in 2024/25 there has been a reversal of this trend. The percentage of new or increased HS packages that are Reablement is relatively stable but below the targeted level of 70%. However, the percentage of people with no, or reduced Home Support at the end of the Reablement process has failed to meet the targeted level of performance for some time, with no trend supporting a trajectory toward achieving the targeted level.

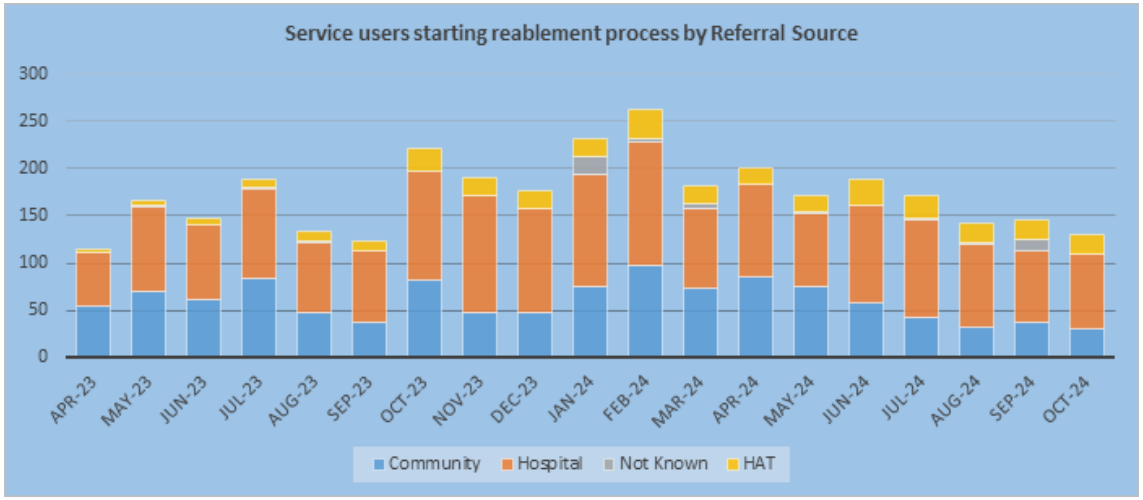
Additional data/information on Reablement is available from the IRT dataset. Throughout 2024/25, the overall number of IRT/Reablement referrals has decreased, however it should be noted that this decrease follows a notable and significant increase at the start of the financial year. There is no target set for this metric, however it complements the Reablement information presented above and should be considered in the context of a wider system of Reablement, Rehabilitation and Home Support.

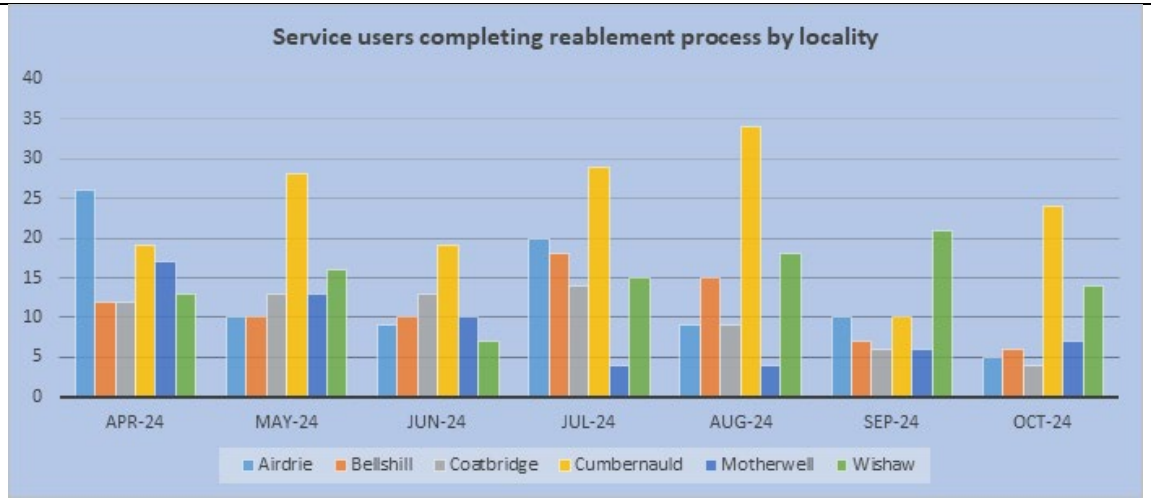


As the volume of IRT/Reablement referrals decreased, there was a corresponding increase in waits, which is contrary to expectation.



Additional data/information on Reablement is available from the Home Support dataset and is presented below. Throughout 2024/25, the overall number of people starting a HS/Reablement has decreased, however it should be noted that this decrease follows a notable and significant increase during the winter period. There is no target set for this metric, however again complements the other information presented above and should be considered in the context of a wider system.

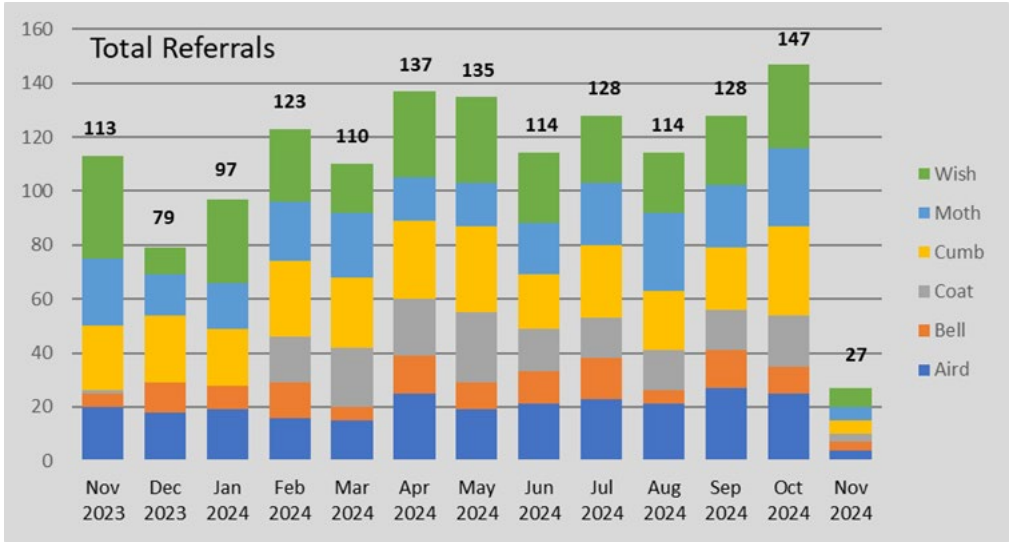




ANALYSIS OF HOME ASSESSMENT TEAM DATA TRENDS – POSITION AS OF HAT REPORT DATED 8TH NOVEMBER 2024

Referrals

Overall Referral Volume: Since its inception, HAT has accepted 2,645 referrals, with October 2024 recording a peak of 147 accepted referrals. This marks the tenth month within the past year where accepted referrals exceeded 100, and the ninth consecutive month of such volume.



Geographical Distribution: Wishaw and Cumbernauld each contributed 22% of the total referrals over the past year, while Motherwell and Airdrie accounted for 18% and 17% respectively. Bellshill and Coatbridge have shown increases in recent months, now contributing 9% and 12% respectively to the total overall volume of referrals.

Hospitals of Origin: University Hospital Wishaw has 50% of referrals, University Hospital Monklands in Airdrie at 47%. A small proportion (3%) falls under "Other," which is mostly older cases with unspecified sources and incomplete data.

Monthly Referral Trends

Seasonal Variations: The average number of referrals per month over the past year is 119, with notable declines in December and January, likely attributable to holiday periods. October 2024 saw the highest monthly total with 147 referrals.

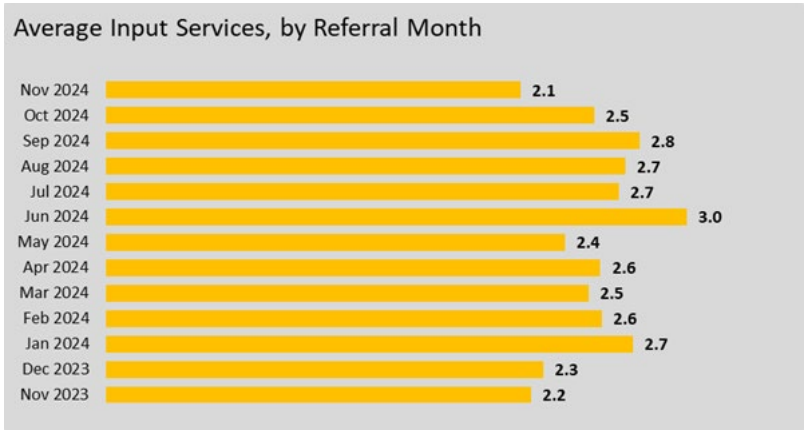
Weekly Inconsistencies: Weekly referral rates have averaged around 30, with recent weeks showing an increase, peaking at 42 during the week of 20th November 2023, likely due to the “Firebreak”.

Demographics

Age and Gender: The majority of referrals (60%) are female, with 40% aged 75-84 years. Only 10% of referrals are for individuals under 65, and none for those under 18. A recent data clean-up has ensured that no unknown ages are recorded.

Input Services

Service Allocation: 2% of referrals had no input services, which is a slight decrease; data cleansing is identifying older and those cases where there is incomplete data. The majority of referrals (59%) had 1 or 2 services, while 40% had 3 or more services, an increase from the previously reported 35%.



Service Utilisation: Home Support remains the most utilised service (86%), followed by Occupational Therapy (62%). Physiotherapy services have notably increased from 20% to 27%.

Outcomes

Re-admission Rates: Re-admission to hospital at the end of the HAT process remains a concern, with 14% of individuals being re-admitted. This is an unfavourable outcome, indicating potential issues in initial service suitability or adequacy.

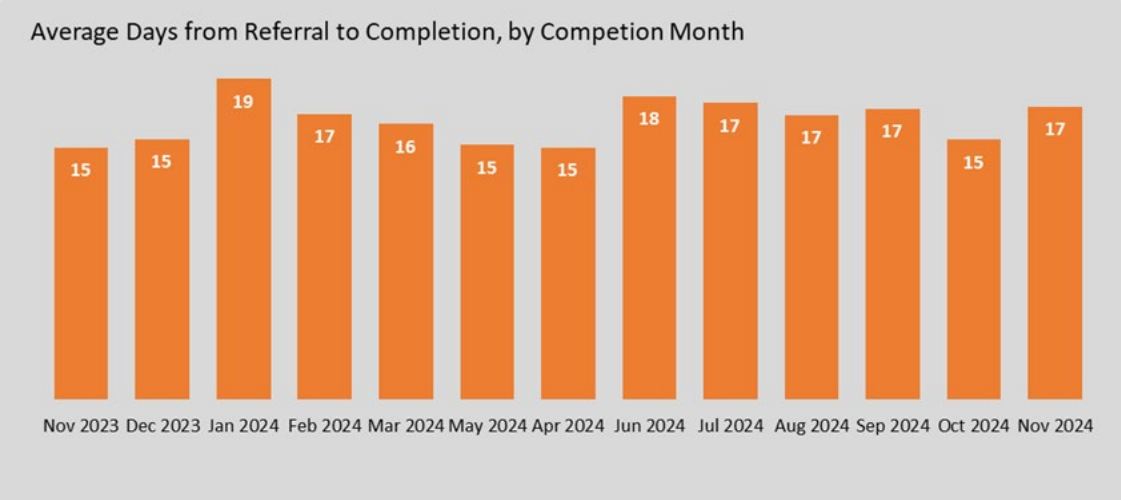
Service Requirement at Completion: Upon completion of the HAT process, 64% of individuals required no further service, while 36% needed at least one additional service. Of those needing further services, 74% required one service, and 26% needed two or more.

Completion Rates

Completion Statistics: A total of 2,504 individuals (95% of total referrals) completed HAT services. Wishaw led with 27% of total completions, followed by Cumbernauld (23%), Motherwell (19%), and Airdrie (19%).

Timescales

Process Duration: The average time from referral to completion remains at 15.6 days. However, 52% of cases took over 14 days, and 5% exceeded 31 days. While shorter timescales are generally favourable, excessively short durations may indicate inappropriate referrals or premature case closures.



Summary

Referral Acceptance: There has been a substantial and sustained increase in accepted referrals, particularly from Wishaw, possibly reflecting the development of HAT services in these localities.

Service Utilisation: An upward trend in the number of services per referral suggests increasing case complexity. Ensuring appropriate service allocation, potentially through the development and scaling of B2B/Enabling, should be considered.

Outcomes and Re-admissions: The stable re-admission rate of 14% should be investigated. Reducing re-admissions by ensuring appropriate initial service allocation and addressing complex needs through B2B/enabling may be a consideration.

Completion Times: While shorter completion times are generally positive, a view on whether premature case closures are a factor in re-admission, or have an effect in the wider system should also be considered.

Overall, the data shows positive trends in referrals, alongside ongoing challenges in managing and fully understanding completion timescales.

ALTERNATE INDICATORS

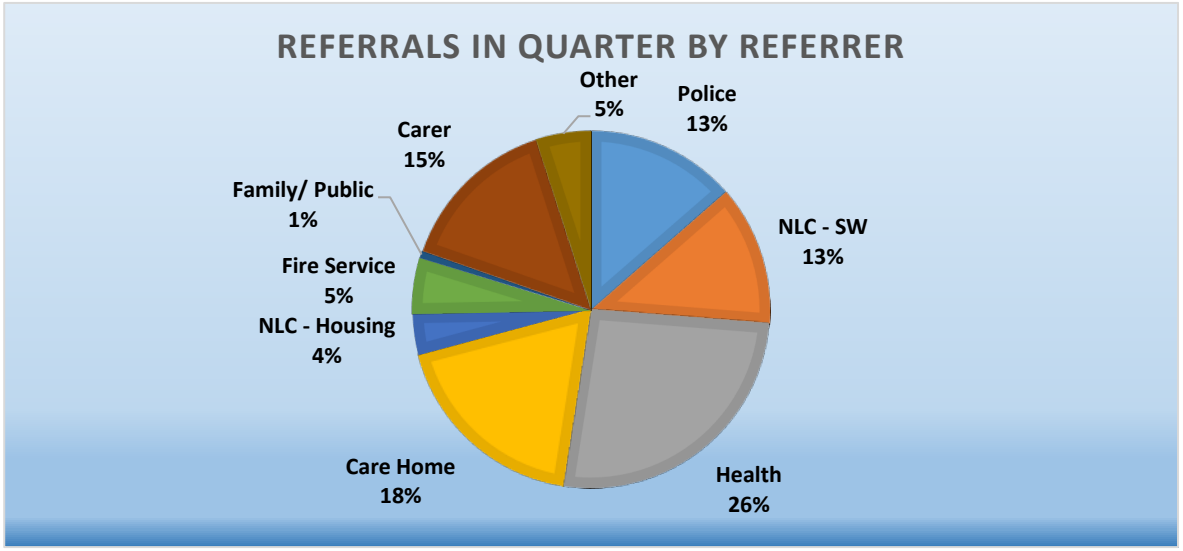
A wide variety of indicators that complement and supplement the Reablement position are available. Consideration should be given to the indicator set presented and whether targets should be reset, particularly in the context of B2B/Enabling. The Balance of Care indicator in the Scorecard reflects the number of people aged over 65, receiving more than 10 hours of Home Support (65+), against the number of older adults in HBCCC and Care Homes. Given the focus on moving support arrangements for

	older adults to individual budgets, if the figure were to include the older adults who previously received home support from the independent sector and have since moved to individual budgets, the performance improves significantly. However, the current metric does not reflect this shift and consideration of alternatives may be useful for Executive Leaders.

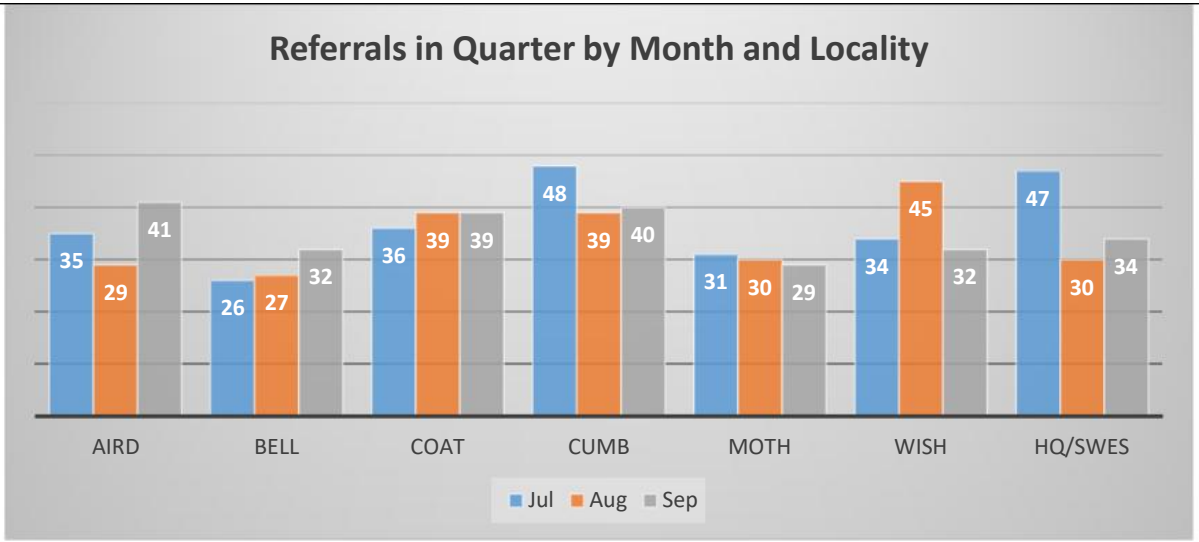
2.	**Adult Social Work**	**Target 2024/25**	**2023/24 Q4**	**2024/25 Q1**	Performance Compared to Previous Quarter	Performance Compared to Same Quarter Previous Year	**RAG Status**
	% Of Adult Protection Investigations Going To Initial Case Conference	20%	12.3%	6.9%	🡻	🡻	RED

Narrative & Corrective Action

In Quarter 2 of 2024/25, North Lanarkshire Social Work Services received fewer Adult Support and Protection (ASP) referrals than during the same period last year. However, there was a notable increase in the number of Police 'Adult Concern' reports when compared with the same quarter in the previous year. The general increase in volume of Police Adult Concern reports is indicative of the developing role of Police Scotland as a key partner to Social Work Services, however may also represent an unmet need or changing demand within the community.

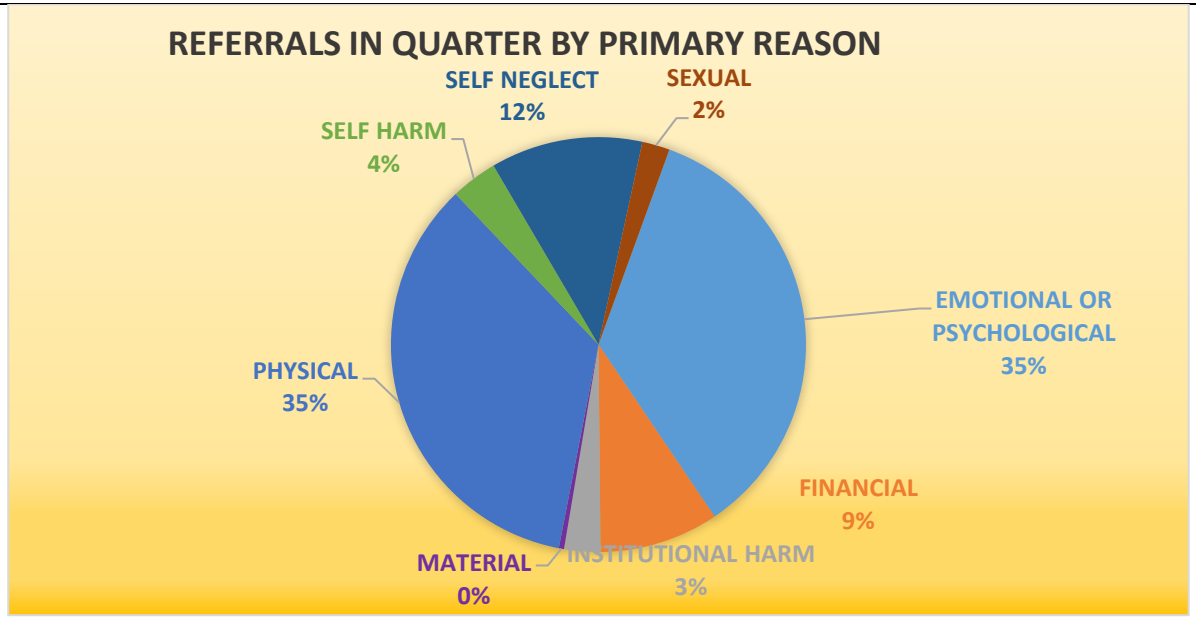


There was significant variation in the monthly referral rates across the six localities. Notably, Cumbernauld saw a 9% increase in referrals from the previous year, while Coatbridge and Bellshill saw significant decreases of 44% and 31%, respectively. Care Home referrals dropped significantly, likely due to collaborative efforts with local care homes to reassess reporting thresholds and provide alternative support options.



Locality	Police Adult Concern reports Q2 24/25	ASP Referral (all sources) Q2 24/25	Total activity to keep adults safe
Airdrie	165	105	**270**
Bellshill	102	85	**187**
Coatbridge	204	114	**318**
Cumbernauld	295	127	**422**
Motherwell	139	90	**229**
Wishaw	226	111	**337**
Totals	**1131**	**632***	**1874****

Emotional/Psychological and Physical harm were the most common reasons for referral during Q2, with a notable increase in Self-neglect and Self-harm referrals received.



Out of the 743 ASP referrals received, 10% (72) were redirected to other services, while 27% (206) progressed to investigation. 50% (373) were recorded as No Further Action (NFA) under ASP procedures, although many of these cases still required interventions to promote welfare. The number of ASP investigations carried out this quarter rose significantly to 206, a 76% increase compared to 117 investigations in the same period last year. However, only 6% (13) of these investigations progressed to an initial case conference, a slight decrease from last year's 10%.

Key Insights for Q2 2024/25:

- There was a decrease in total ASP referrals compared to last year.
- There was a notable increase in the number of Police 'Adult Concern' reports.
- There is a rise in the number of referrals for Self-neglect and Self-harm.
- Despite a significant increase in the number of investigations, fewer progressed to case conferences.