

# Annual Performance Report 2022/23

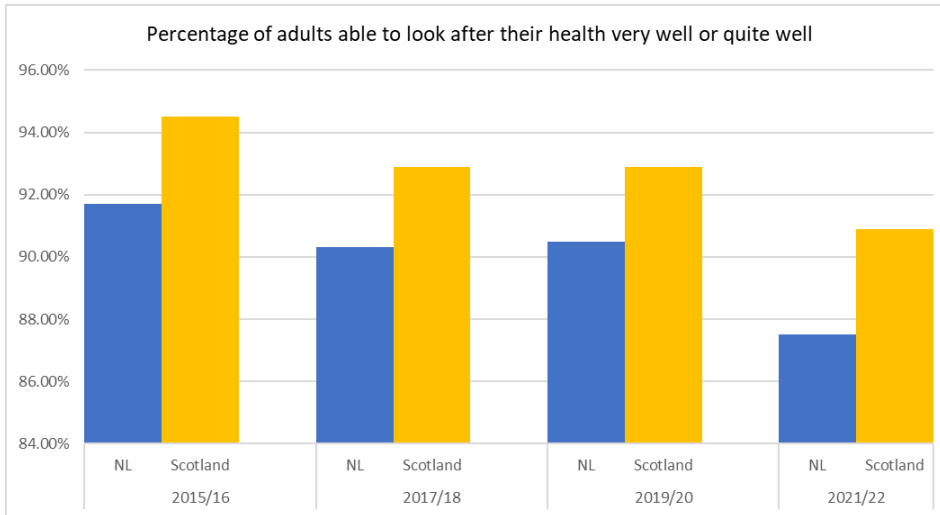
Adult Care & Social Work Committee  
14/11/2023

*Stephen Forrest*  
*Performance Manager*  
*Graeme Cowan*  
*Senior Manager, Strategy & Performance*

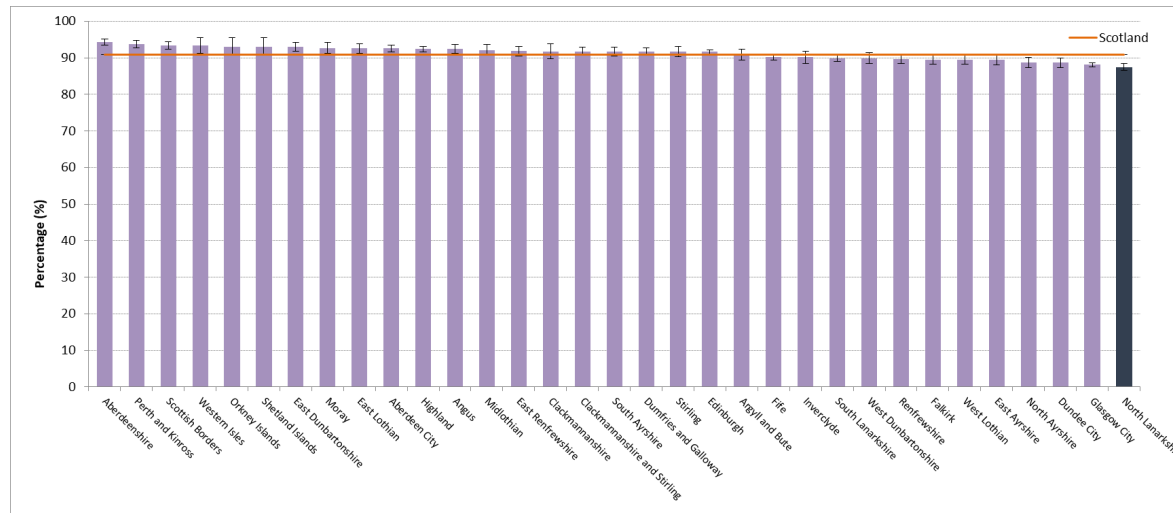
- Sets out “an assessment of performance in planning and carrying out the integration functions for which they are responsible”
- “produced for the benefit of Partnerships and their communities”
- Publication date = no later than four months after the end of the reporting year (i.e. by end of July)

- Layout
- Content
  - Assessing performance in relation to the National HWB Outcomes
  - Set of Core Integration indicators
  - MSG indicators
  - Finance Performance & Best Value
  - Inspection of Services
  - Evolving format

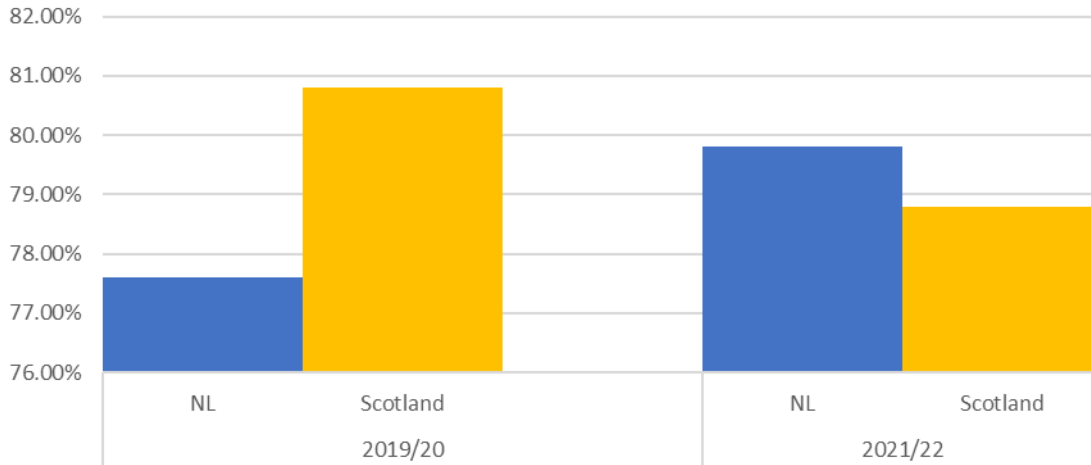
# Core Indicators 1-9



- Downward trend since 2015/16
- Lowest percentage in Scotland



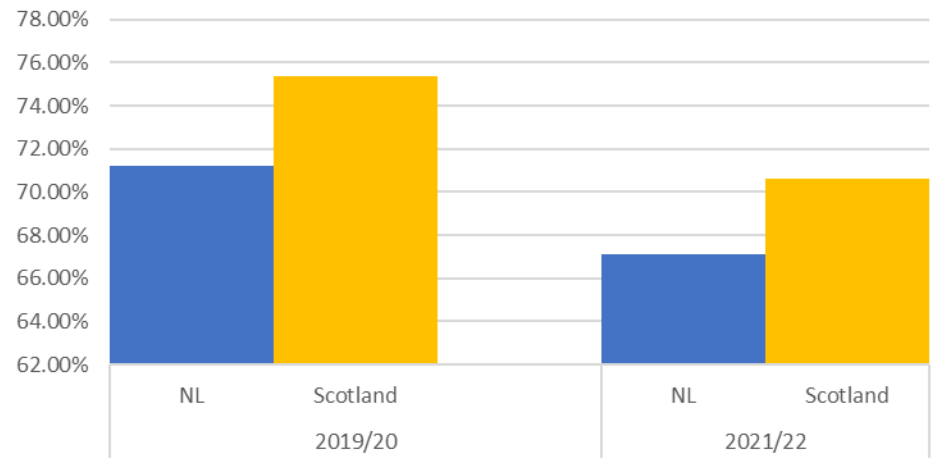
Percentage of adults supported at home who agreed that they are supported to live as independently as possible

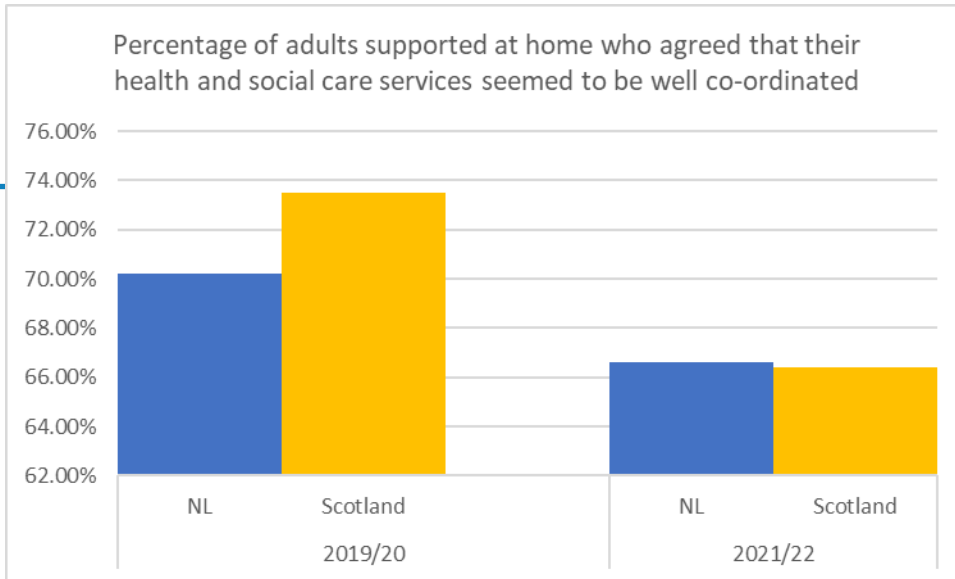


- Small percentage increase in recent period
- Reverse of national trend

- Small percentage decrease in recent period
- In line with overall national trend
- NL in third quartile

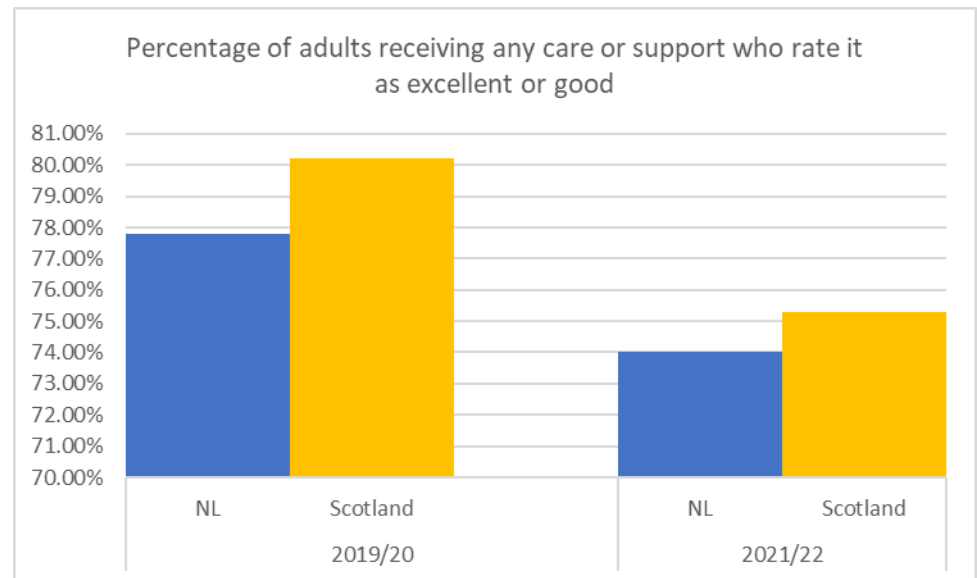
Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided



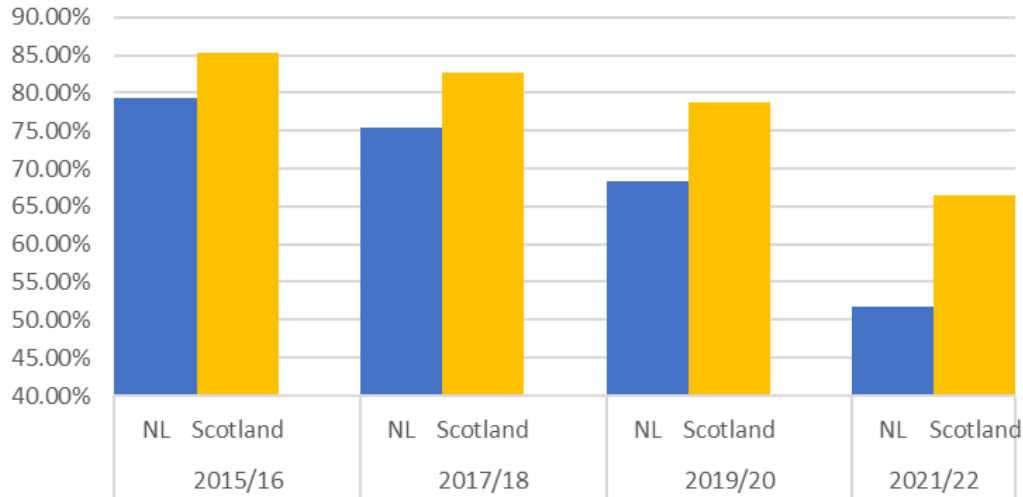


- Decrease since 2019/20, albeit smaller than the national trend
- Currently sitting very slightly above the national position

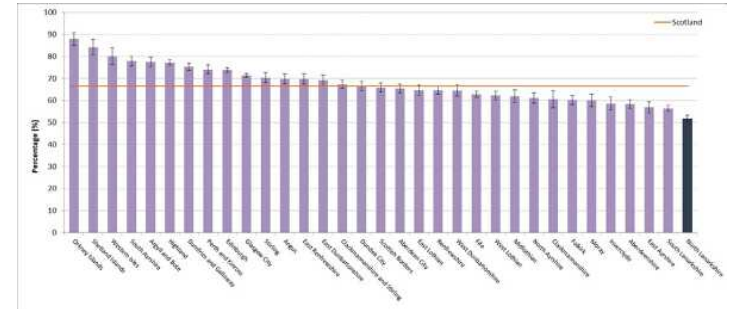
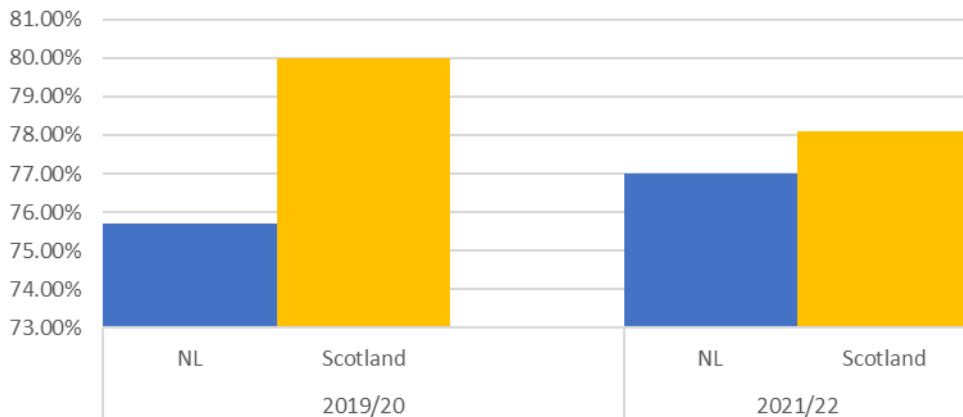
- National trend is downwards, with a slight narrowing in gap with Scottish position



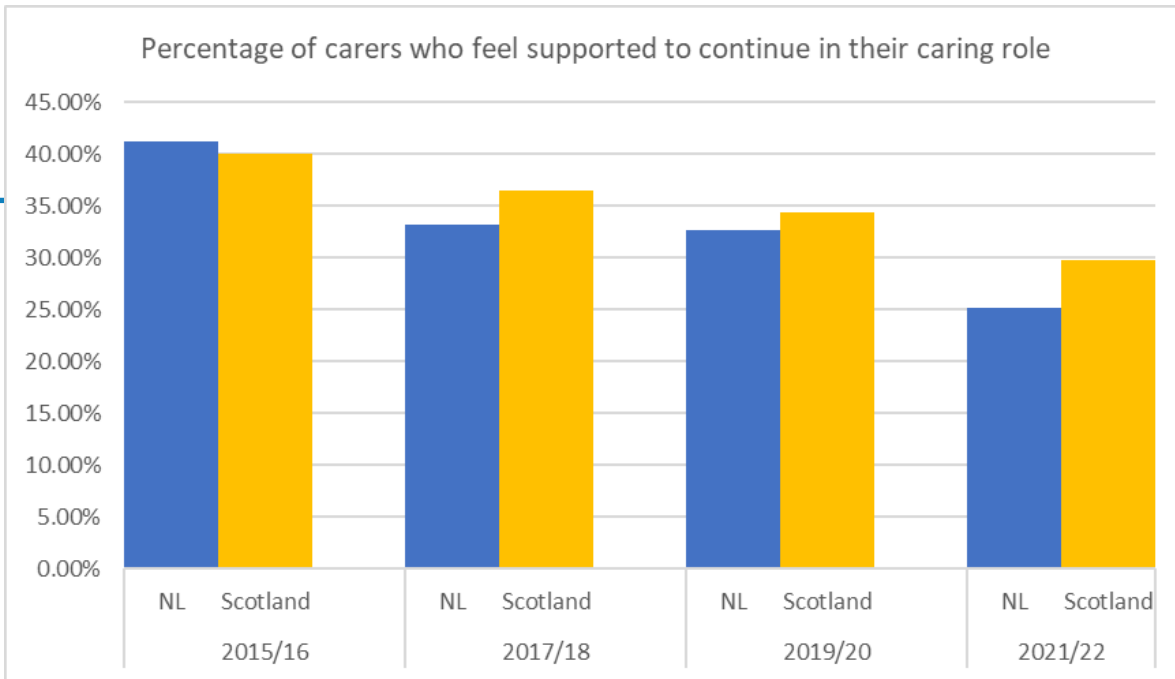
Percentage of people with positive experience of care at their GP practice



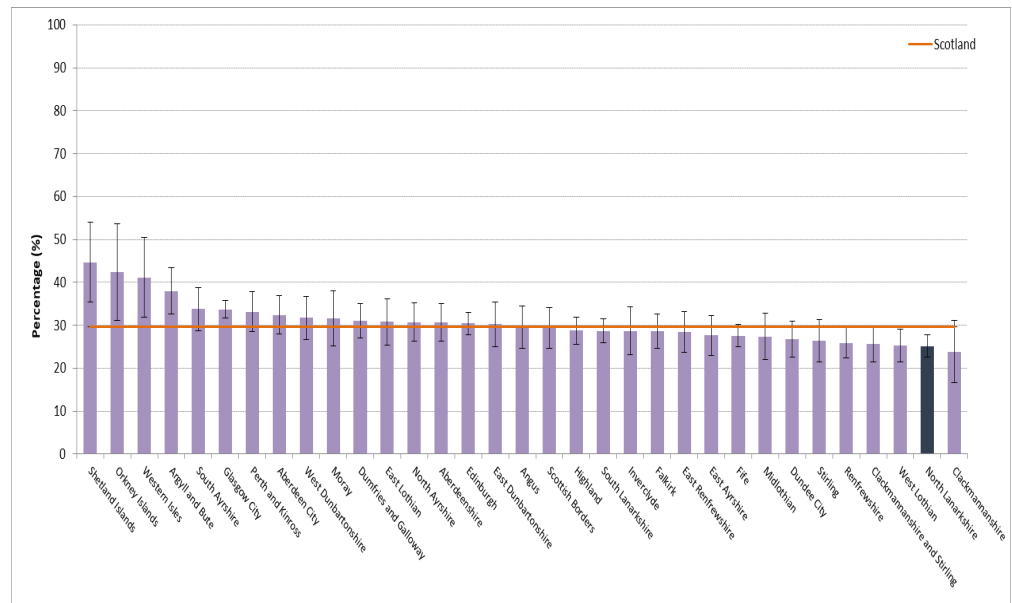
Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life



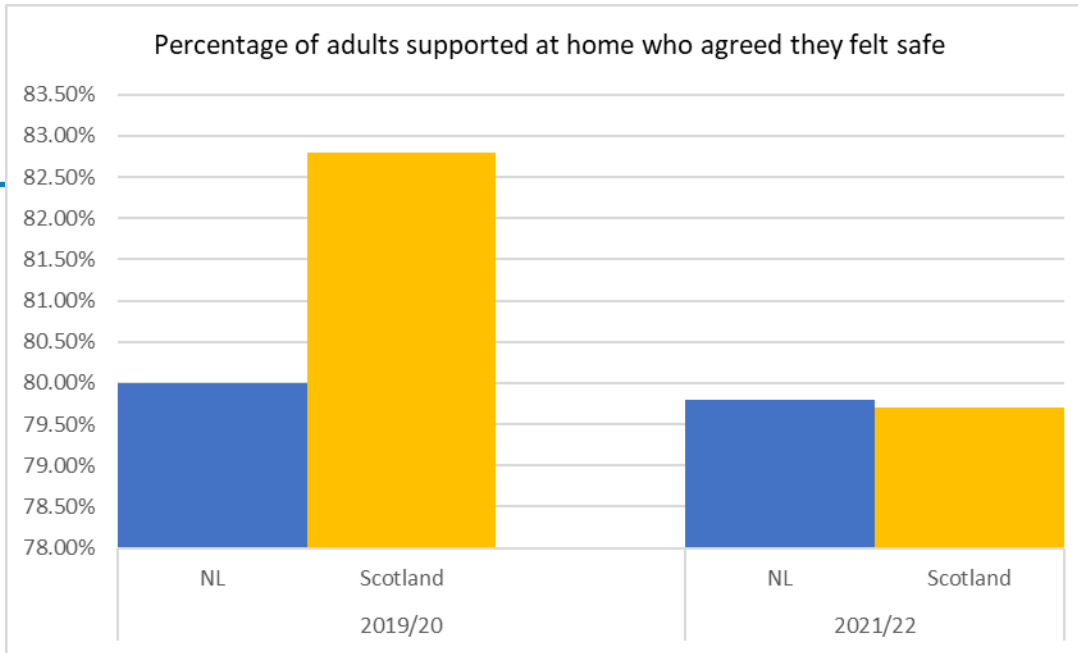
- Percentage of people with positive experience of care at GP practice has fallen in each of the last three years
- Similar trend nationally
- NL and SL have the lowest percentages in Scotland
- Impact on improving/maintaining quality of live – percentage increase for NL, but decreasing at a national level.



- Percentage of carers who feel supported in their caring role has decreased since 2015/16, similar trend nationally
- Second lowest percentage in Scotland

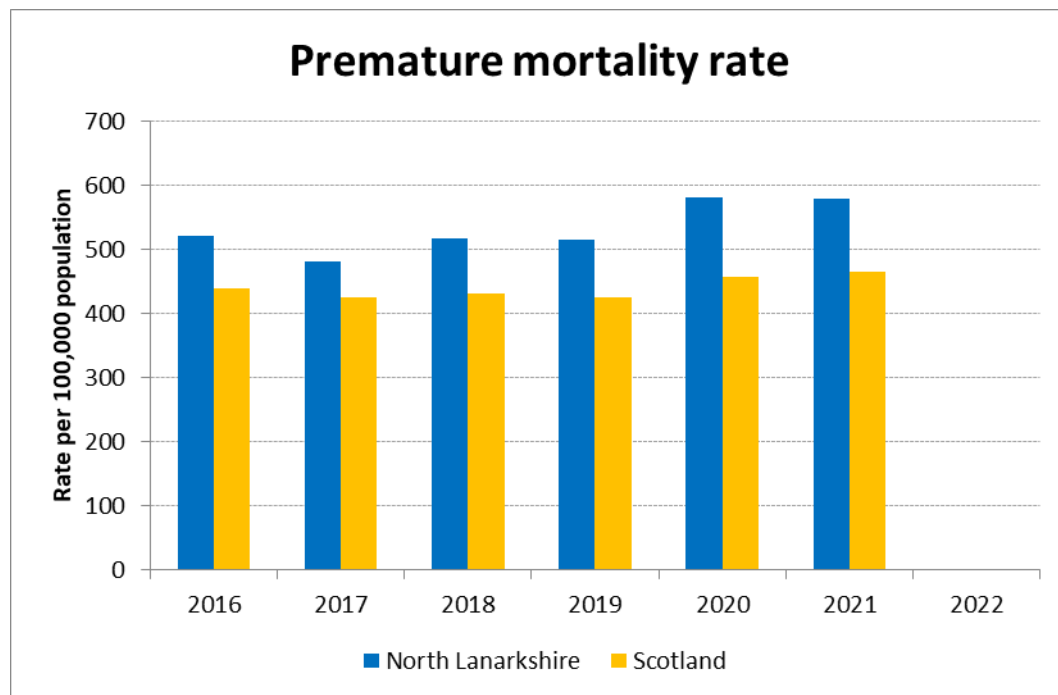






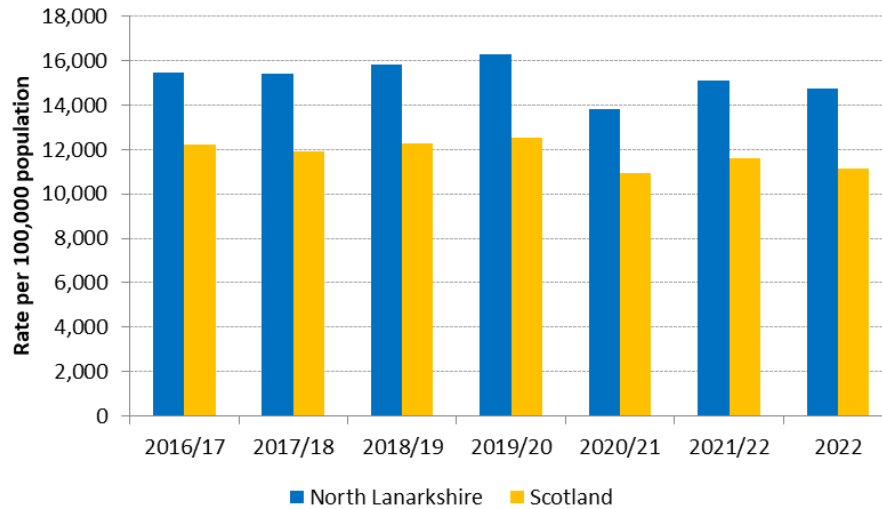
- Percentage of adults supported who agreed they felt safe remained virtually the same since 2019/20
- National position has decreased since 2019/20

# Core Indicators 11-19



- Premature mortality rate is the fourth highest in Scotland
- Rate levelled off in 2021
- Gap with Scottish rate is widening

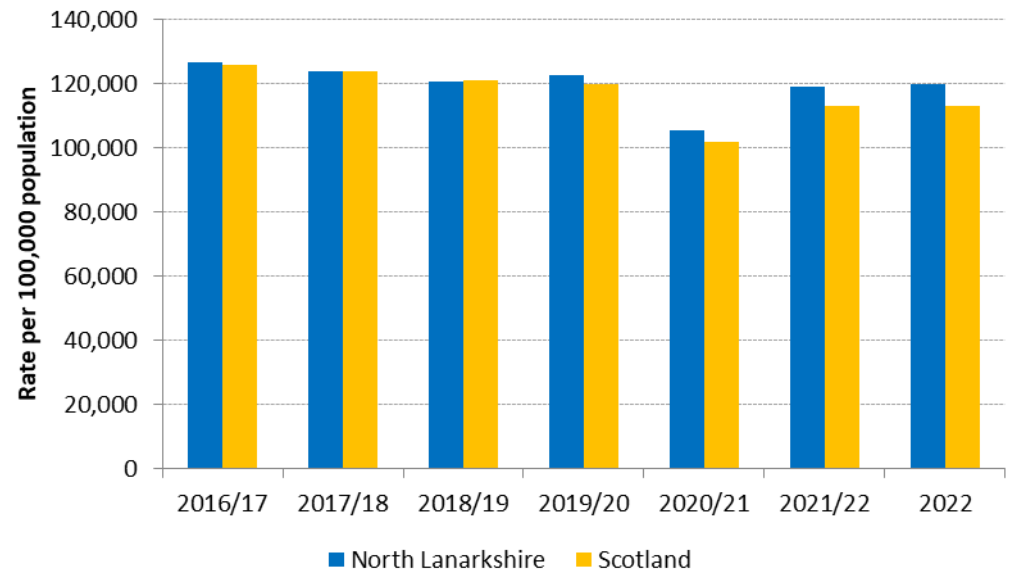
### Emergency admission rate



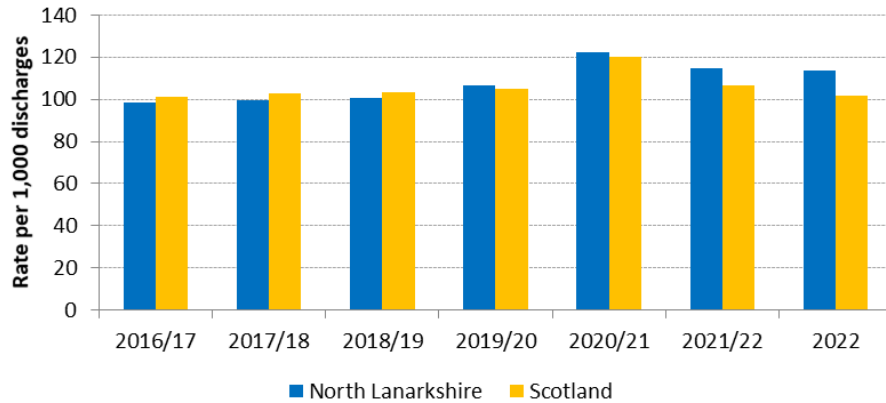
- Second highest rate in Scotland in 2022 (calendar year)
- Ongoing impact of C-19

- Relative position for bed day rate more positive than admission rate (20/33), reflecting lower length of stay

### Emergency bed day rate



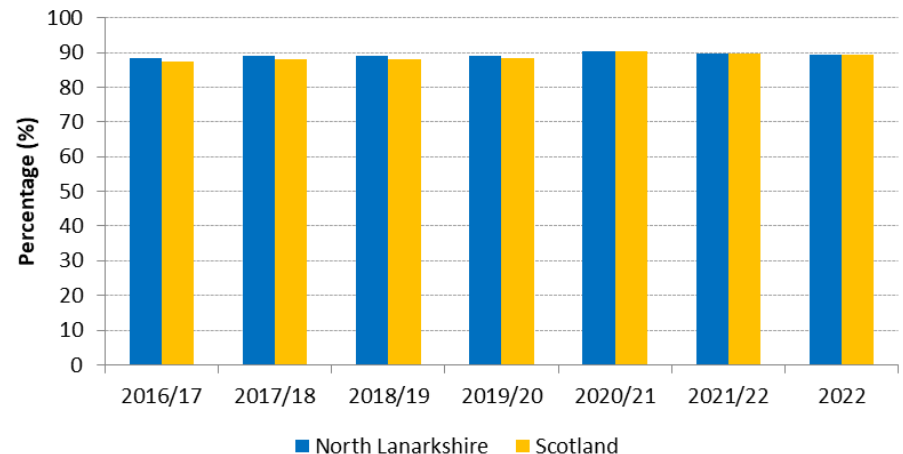
### Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges)



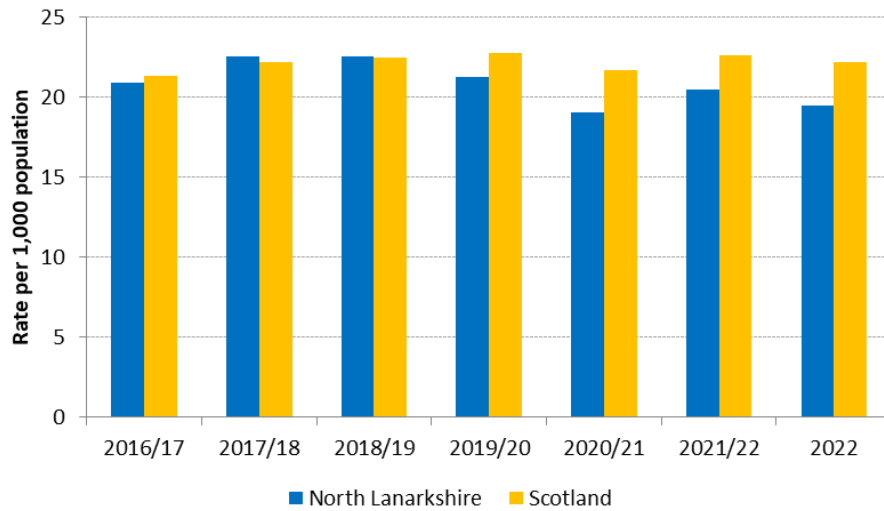
- NL position remains higher than national position (24/33), despite historically lower levels
- C-19 impact

- Percentage of last 6 months of life spent at home or in a community setting remains very close to 90%, and in line with the Scottish average

### Proportion of last 6 months of life spent at home or in a community setting



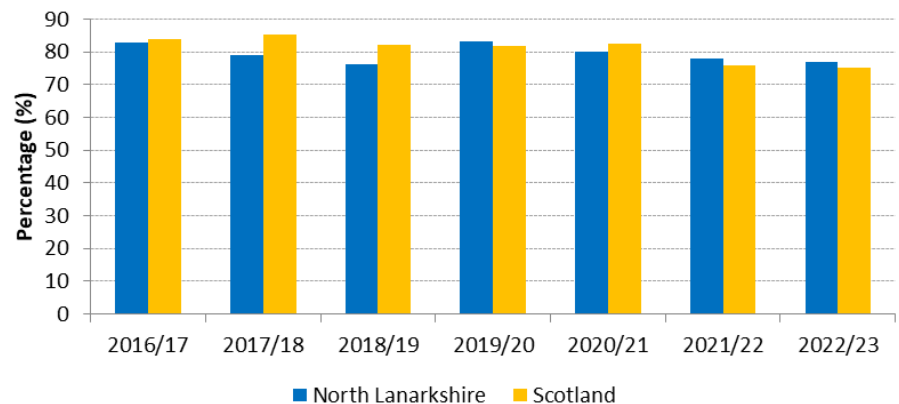
### Falls rate per 1,000 population aged 65+



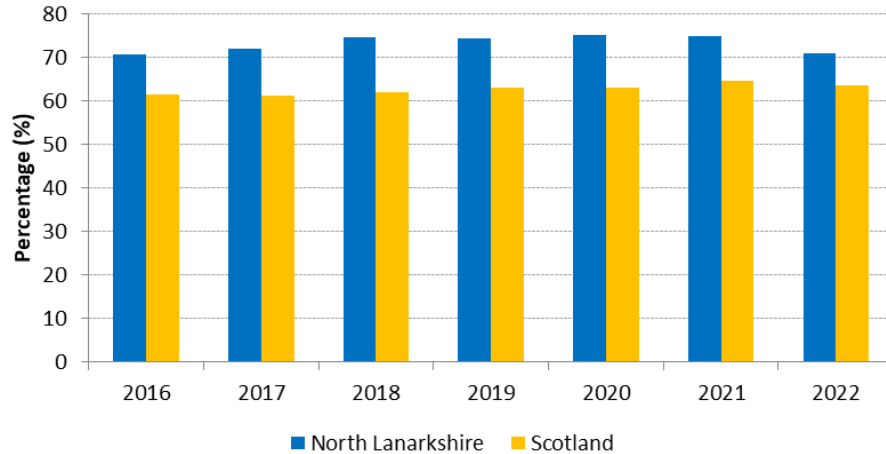
- Falls rate reduced significantly in 2020/21, and while there was an increase in 2021, the rate remains below the Scottish average (10/33)

- Proportion of care services is slightly higher than the Scottish position in 2022/23, continued from 2021/22

### Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections



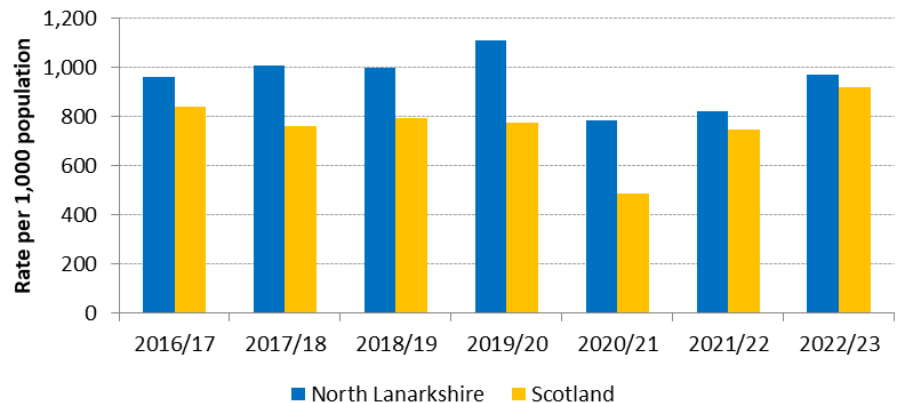
### Percentage of adults with intensive care needs receiving care at home



- Seventh highest rate in Scotland, reflective of positive balance of care

- Relative position to Scottish average has improved
- Overall number closer to pre-C19 levels, however relative position to Scottish average retained.

### Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)



- Highlights & Service Developments
- Publication of the Strategic Commissioning Plan 2023-36
- Development of the Programme of Work
- Review of Annual Performance Reports and Supporting Guidance

# Future developments – CE Scorecard



Observer	Comment	Indicator ref	Action	Act
LM	(1.8 – 1.10) Many of the indicators are numbers focused rather than capturing outcomes, e.g. the number of people referred onto Addiction alcohol/ drug programmes, but not actually capturing attendance or completing of the programme	1.10	Suggest new indicator for "completion" of addiction program	ADD
LB	ABI expecting changes nationally but need to keep as	1.1	Review ABI	REVIEW
AM	Alcohol Brief Interventions	1.1	Review targets and indicators	REVIEW
LM	Is the indicator reported in another context? E.g. 1.4 and 1.11 reported in The Plan for NL (albeit the breastfeeding is the opposite measure)	1.11	Link the indicators and change the breastfeeding to the "opposite"	REVIEW
LM	Is the indicator reported in another context? E.g. 1.4 and 1.11 reported in The Plan for NL (albeit the breastfeeding is the opposite measure)	1.4	Link the indicators and change the breastfeeding to the "opposite"	REVIEW
LB	Breastfeeding – is this right target? Is there the capacity within hospitals to set the fore e.g. within midwifery. Data group led by Trudi.	1.4	Review Breastfeeding	REVIEW
LB	Cervical needs to stay.	1.5	Review Cervical screening, check target	REVIEW
LB	Chief Exec – need to have dialogue on IMS	1.6	Review Immunisations targets and indicators	REVIEW
LB	IMS needs to stay.	1.6	Review Immunisations targets and indicators	REVIEW
AM	Immunisations.	1.6	Change immunisation target to national standard/target	REVIEW
LM	(1.8 – 1.10) Many of the indicators are numbers focused rather than capturing outcomes, e.g. the number of people referred onto Addiction alcohol/ drug programmes, but not actually capturing attendance or completing of the programme	1.8	Keep one waiting indicator for addictions	RETAIN

## NHS Lanarkshire CMT Performance Scorecard

PROGRESS

- ▲ Performance Improving
- ▶ Performance Staying About The Same
- ▼ Performance Declining

Area	Ref	PERFORMANCE INDICATORS	Tolerance	Current Performance					Vs Previous 4 week period	Task & Finish				Overall Trajectory	Trajectory Progress	Corporate Risk
				WEEK ENDING 7th May	WEEK ENDING 14th May	WEEK ENDING 21st May	WEEK ENDING 28th May	WEEK ENDING 4th June		April	May	June	July			
Unscheduled Care Director of Adult Services	1a	Overall 4 hour waits weekly (% 4hr Compliance)	50%	54%	57%	61%	59%	61%			55%	62%	67%	70%	On Track	Risk 2218 Score: 20
	1b	Overall 8 hour waits weekly (n)		669	601	503	566	385				502		377	Slipping	
	1c	Overall 12 hour waits weekly (n)		290	295	189	200	113				152		76	Slipping	
	1d	Overall Weekly Average LoS - NHS		5.22	5.61	5.93	5.91	7.08								
	1e	Overall Weekly Average LoS - Medical		4.2	4.7	4.4	0							TBC	Slipping	
	1f	Overall Weekly Average LoS - Surgical		4.1	4.4	4.5	0							TBC	Slipping	
	1g	Overall Weekly Average LoS - CoTE		13.2	13.2	17.2	0							TBC	Slipping	
	1h	Overall Weekly Average LoS - Ortho		6.8	7.9	6.6	0							TBC	Slipping	
	1i	Overall Site Occupancy	95%	101%	102%	100%	100%	100%				95%		90%	Slipping	
	Planned Care Director of Adult Services	2a	Patient TTG <= 52 weeks (n) (Chart = Number of Patients Waiting > 52 Weeks)		3163	3168	3165	3124					2698		98%	
2b		Patient TTG <= 78 weeks (n) (Chart = Number of Patients Waiting > 78 Weeks)		1800	1813	1814	1805					1184		46	Slipping	
2c		Patient TTG <= 104 weeks (n) (Chart = Number of Patients Waiting > 104 Weeks)		988	998	1010	1003					372		0	Slipping	
2d		Outpatients (n) (Chart = Number of Outpatients per Month)		61964	62711	64064	64794					55027		53276	Slipping	
2e		Cancer 31 day DTT											98%	95%	98%	
2f		Cancer 62 day RTT											80%	85%	95%	



- Mosaic SWIS replacement
- BI Hub approach
- Data Management Team / Data Custodian Model
- Integrated HSC data

# Future developments – Power BI – JII

North Lanarkshire Council were involved in the pilot project for the new process for the Scottish child interview model for JII.

- Developed a spreadsheet to record the data
- Covers both North and South Lanarkshire, so we were not able to use SWIS to record the data.

Report using pivot tables in the spreadsheet to pull figures which are then transferred into a larger report.

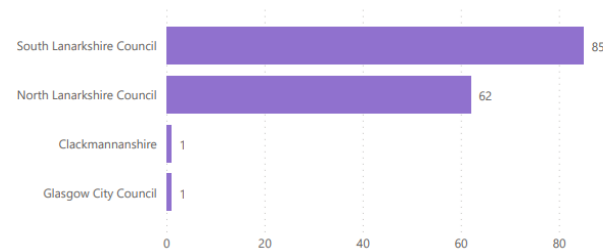
Planning the move towards reporting this data via power BI

- allow data to be more interactive and achieve better visualisation
- cut down on the need for transferring data from the existing excel spreadsheet pivot tables to another document for reporting purposes.

This will be the first project we will be using power BI with

- chosen due to the discreet data set available
- assistance offered from Aberdeenshire Council who have started reporting their data in this way.

Local Authority - number of children



Locality - number of children

