

Perth and Kinross Community Mental Health and Wellbeing Strategic Delivery Plan Key Performance Indicator Report 11 December 2023

Outcome RAG Summary	GREEN	AMBER	RED	N/A
Outcome 1: "People receive the right support at the right time" and "Reduced stigma and inequalities in relation to people with mental health and substance use issues."	4	0	0	2
Outcome 2: "Improved access to a range of mental health and wellbeing supports and services by fully embedding the principle of person-centred care and support" and "People can make informed choices about their health and social care support."	4	0	1	0
Outcome 3: "Support pathways will be clear and robust, with a system of joined-up communication that: i) supports staff working across community and statutory mental health and wellbeing services" and "Support pathways will be clear and robust, with a system of joined-up communication that ensures that service users, their families and carers receive the best possible support."	3	1	1	0
Outcome 4: "Through collaboration and co-production, we will deliver more effective services and enhance the mental health and wellbeing across our communities" and "Health and Social Care workforce feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide."	1	1	1	0
Outcome 5: "Ensure that statutory services delivering help and support to our communities have adequate resources including staffing and training needs."	3	0	0	0
TOTAL	15	2	3	2

RAG KEY

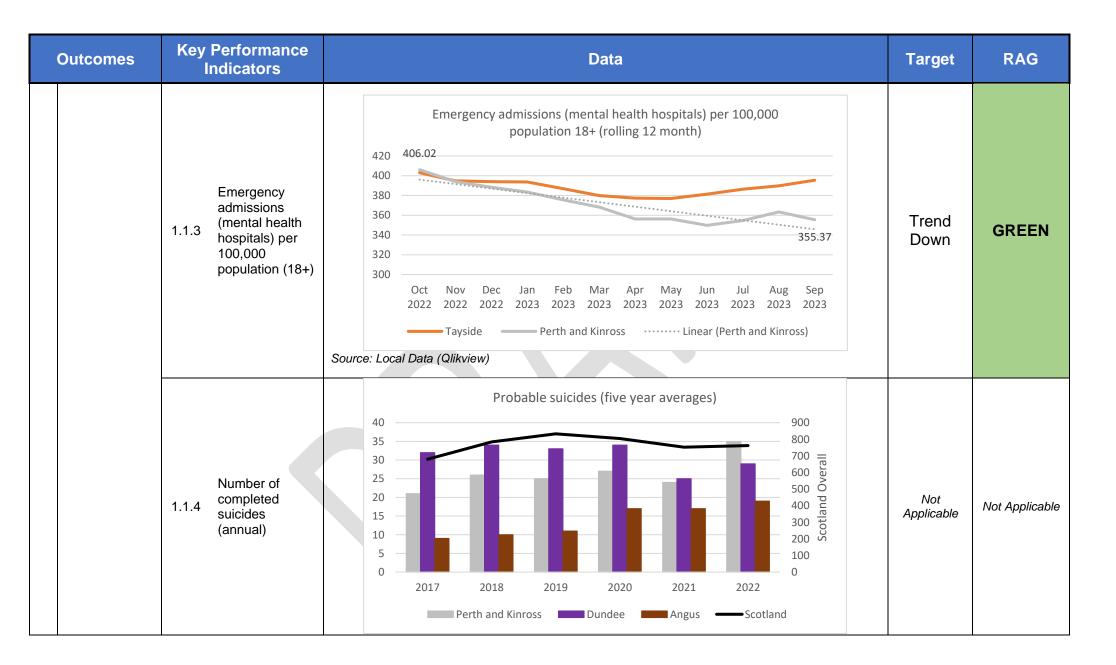
Within 3%, or are meeting of	r
exceeding our target	

Between 3% and 6% away from meeting our target

More than 6% away from meeting our target

PMF KPI Report

	Outcomes	Key	Performance ndicators				Data			Target	RAG
1	1) People receive the	1.1.1	to look after their own health	percei	100% ———————————————————————————————————	97% 2021/22 Service User who responde	d: Were you supported to look health well? 53% 2022/23 Yes No and Patient Experience Survey. ed, omitting unsure and blanks. It is a continuous to blank	100% 2023/24 Q2 (rolling 12 month) Results are calculated as a For more details see Appendix	¢ 2.	80%	GREEN
	right support at the right time.	1.1.2	People feel their service supported them to manage their condition so that it does not get worse	Source	100% ———————————————————————————————————	Question as con 94% 2021/22 Service User who responde	sked: Were you supported to dition so that it doesn't get very set with the set of the s	n manage your vorse? 100% 2023/24 Q2 (rolling 12 month) Results are calculated as a For more details see Appendix	¢2.	80%	GREEN



Outcomes	Key Performance Indicators	Data	Target	RAG
		Probable suicides (five year averages) by gender 40 35 30 25 20 15 10 5 0 2017 2018 2019 2020 2021 2022 Female Male Total Source: National Records Scotland		
	Percentage of patients who are followed up within a 3-day period of discharge	Data not yet available.	N/A	N/A

Outcomes	Key Performance Indicators	Data	Target RAC	G
2) Reduced stigma and inequalities in relation to people with mental health and substance use issues.	People feel that their health or social care support 1.2.1 received has helped them to live as independently as possible		100% 80% GREI 2023/24 Q2 ling 12 month) re calculated as a	EN

Outcome 1 - Comments:

Outcome 1 represents our commitment to ensuring that people throughout Perth and Kinross receive the right support at the right time. Performance in support of this outcome is broadly stable with feedback from people who accessed services indicating that they felt supported. The following comment is an example of feedback received through Care Opinion:

"My appointment with the mental health nurse was an initial exploration of how I was feeling. It was very emotional on my part, but afterwards I was so relieved I had made that first move. The mental health nurse in question is a credit to her profession."

To continue our work to reduce the need for people to access inpatient services we are working with our partners across the 3rd sector to provide more community bases support where appropriate. With an increase in completed suicides we are undertaking a deep dive into the reasons behind this and are working collectively with The Neuk, Police Scotland and NHS Tayside's Crisis Team, to test a Mental Health and Substance Use Crisis Triage Model. This model will support people to remain in their communities and implement safeguarding measures until a mental health assessment is viable.

	Outcomes		Performance ndicators	Data	Target	RAG
	1) Improved access to a range of mental health and wellbeing supports and services by	2.1.1	Number of people on CMHWB waiting lists	Number of People on Waiting Lists (CMH Teams & POA) 1200 1000 800 600 400 200 Octra Roan Decra Isana Lean Ratha Ratha Ratha Isana Isana Septia Septia General Psychiatry (Locality & (Mental Illness) Psychiatry of Old Age — Total Source: TrakCare via Business Unit.	Trend Down	GREEN
2	fully embedding the principle of Person- Centred Care and support	2.1.2	Wait times for those on CMHWB waiting lists	Average length of wait for CMH Teams and POA (wks) 40 35 30 25 20 15 10 5 0 0 0 0 0 0 0 0 0 0 0 0	Trend Down	RED

	Outcomes		Performance ndicators		Data	Target	RAG
		2.1.3	Number of people with a community treatment order (CTO) subject to formal powers under the Mental Health Act		Number of people with a community treatment order (CTO) subject to formal powers under the Mental Health Act 300 250 250 300 250 300 250 300 300 300 300 300 300 300 300 300 3	Trend Down	GREEN
2	2) People can make informed choices about their health and social care support.	2.2.1	People feel they had a say in how their health or social care support was provided	Source:	Question asked: Did you have a say in how your health or social care support was provided? 80% 80% 80% 2021/22 Yes 2022/23 2023/24 Q2 (rolling 12 month) P&K HSCP Service User and Patient Experience Survey. Results are calculated as a age of those who responded, omitting unsure and blanks. For more details see Appendix 2. n=37, 2022/23 n= 24, 2023/24 Q2 (rolling 12 month) n= 16	80%	GREEN

Outcomes	Key Perform Indicato				Data		Target	RAG
	People f their hea social ca support easily accessib well commun	alth and lire was lee and licated	centage of those	94% 2021/22 P Service User and a who responded, o		2023/24 Q2 (rolling 12 month) Results are calculated as a For more details see Appendix	80%	GREEN

Outcome 2 - Comments:

Outcome 2 demonstrates our commitment to improving access to the mental health and wellbeing support through embedding the principle of person-centred care ensuring people can make informed choices. Performance in delivering this outcome is good, with most indicators on target. Although "Wait times for those on CMHWB waiting lists" is trending up over the 12month reporting period, it can be seen that the average length of wait has reducing since April 2023. Reducing the number of people waiting on CMHWB services remains a key focus, with a 14.93% reduction overall in the year to September 2023. To continue to drive improvement in the delivering of Psychiatry of Old Age we have altered our model of delivery focussing on mental health assessments and related efficiencies.

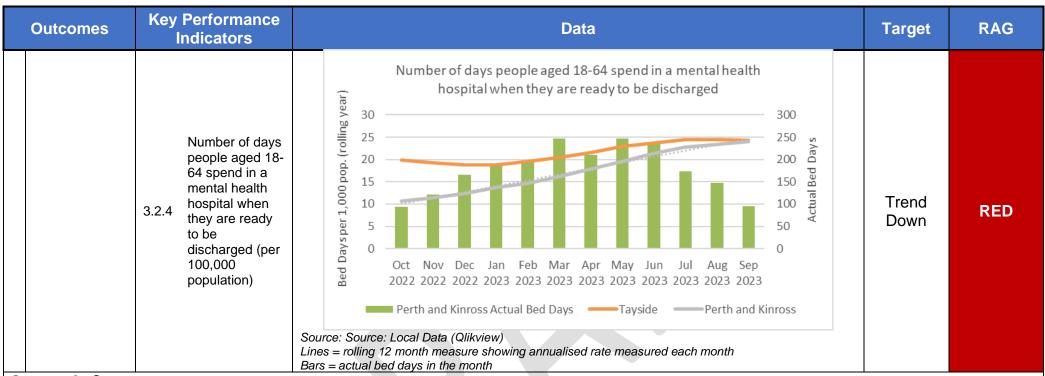
The following are recent examples of feedback received via Care Opinion from people who have accessed our services.

"The Dementia Support Service has been very valuable to my mum who has dementia. The service gives my dad some respite time to get other chores done or time to himself knowing that my mum is in safe hands. This is the only time that my dad gets to himself as he cares for my mum 24/7. On a personal level I would like to thank [Staff] at Dementia Support for taking time and listening to me as a concerned daughter. Helping my mum cope with dementia is one of the hardest things I have had to deal with and all the help was appreciated."

"Big big thank you please to be passed to [Staff] and the team, you have really helped me a lot and I would recommend this service to anyone needing to use their service in the area."

	Outcomes		Performance idicators				Data			Target	RAG
	1) Support pathways will be clear and robust, with a system of joined-up communication that: i) supports staff working across community and statutory mental health and wellbeing services.	3.1.1	Staff feedback regarding staff working across community and statutory mental health and wellbeing services (Staff Survey)	Annu Empl Overs Numl Source	al Directorat oyee Engage all Experienc ber of respon Matter Direct	ement Index Score se Score	2020/21 20 re 78 78 7.2 7. 1186 (70%) 1			Trend Up (Approval increases over time)	GREEN
3	2) Support pathways will be clear and robust, with a system of joined-up communication that ensures that service users, their families and carers receive the best possible support.	3.2.1	People feel that their health or social care support was easily accessible and well communicated	percen	100% — 80% — 40% — 20% — 0% — 20% — tage of those	94% Service User and who responded, of	Survey) 84% 2022/23 Yes M No	2023/24 Q2 (rolling 12 month urvey. Results are calculated anks. For more details see Ap. 1) n= 17	as a	80%	GREEN

Outcomes	Key Performance Indicators	Data	Target	RAG
	How people rated the health 3.2.2 or social care support they received overall	Overall, how would you rate the health or social care support you received? 100% 95% 50% 0% 0% 0% 0% 15% 0% 0% 2021/22 Excellent Good OK Poor Very Poor Source: P&K HSCP Service User and Patient Experience Survey. Results are calculated as a percentage for those who responded, omitting unsure and blanks. 2021/22 n=41, 2022/23 n= 20, 2023/24 Q2 (rolling 12 month) n= 16	80% (Excellent and Good Ratings)	GREEN
	Readmissions to a mental health hospital 3.2.3 within 28 days of discharge (rate per 1,000 discharges)	Readmissions to a mental health hospital within 28 days of discharge rate per 1,000 discharges (rolling 12 month) 200 150 100 133 138 50 Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep 2022 2022 2022 2023 2023 2023 2023 202	Trend Down	AMBER



Outcome 3 - Comments:

Outcome 3 relates to our commitment to ensure that the people that need our services and the staff that deliver them are supported with clear and robust systems with joined-up communication leading to service users, their families and carers receiving the best possible support.

Performance in support of this outcome is mostly good with 3 KPIs on target 1 at Amber and 1 Red. There has been a significant improvement in delayed discharges (61.1% reduction since early 2023/24) and this will begin to impact the upward trend seen in the rolling 12 months measure which is affected by the increases seen in late 22/23. It is therefore anticipated that this trend will change with recent improvement work resulting in people being discharged from hospital in a safe and timely manner.

Further improvements in the delivery of this outcome are being taken forward with the development of an integrated model for substance use, primary care mental health and community mental health which, along with enhanced information sharing around services and treatment options, will ensure that a person's journey though CMHWB services is streamlined and more effective.

The following are recent examples of feedback received from people who have accessed our services.

Mental Health and Wellbeing Nurses – "I attended the 5 Stress buster course at Blairgowrie Cottage Hospital. It was run by [Staff] were excellent. The venue was good and the reading provided was good. I got a lot out of the course and everyone seemed to enjoy it."

Outcom	nes Ke	ey Performance Indicators	Data	Target	RAG
1) Throug collaborat and coproduction will delive effective services a enhance mental he and wellb	gh tion n, we er more and the ealth peing	Emergency readmissions to a mental health	Readmissions to a mental health hospital within 28 days of discharge rate per 1,000 discharges (rolling 12 month) 200 150 Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep		•
across ou communit		So	2022 2022 2022 2023 2023 2023 2023 2023		

	Outcomes	Key Performa Indicators	Data	Target	RAG
		Number of people age 64 spend in mental hea hospital when they are reto be discharged 100,000 population)	7 Sper 1,000 pop. (8-1000 pop. 1000	Trend Down	RED
4	2) Lived experience will be at the heart of service design, and the voices and views of people and their carers will influence decisions about how care and support is received.	People fee had a say i how their h or social ca support wa provided.	50%	80%	GREEN

CHITCOMAS	Key Performance Indicators	Data	Target	RAG
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Outcome 4 - Comments:

Outcome 4 evidences our commitment to deliver more effective services and enhance mental health and wellbeing across our communities through collaboration and coproduction.

To drive improvement in the delivery of this outcome we are working with people with lived experience on a pan-Tayside basis through the Mental Health and Learning Disability Whole System Change programme. Similarly, our Psychiatry of Old Age Transformation Programme is exploring new ways of supporting people with advanced stages of dementia.

The following are recent examples of feedback received from people who have accessed our services.

South Perthshire Older People's Community Mental Health Team – "My experiences of the Mental Health Care services offered since the diagnosis of Alzheimers for my husband has been superb. My support worker, who visited us on a monthly basis, has proved to be of enormous benefit. Like all dementia carers, I am travelling down a very unknown pathway. Very daunting. But my support worker has given me lots of advice and possible warnings of what might lie ahead. She has been a wonderful and reassuring advisor in dealing with this disease. Her many years of experience in this field have been of great benefit to me."

Outcomes		Key Performance Indicators		Data		Target	RAG
5	Ensure that statutory services delivering help and support to our communities have adequate resources including staffing and training needs.	5.1.1	Number of vacancies overall		Number of vacancies across HSCP CMHWB Services 16.0 14.0 12.0 10.0 8.0 6.0 4.0 2.0 0.0 2022 2023 Core CMHWB Services Prison Healthcare Mental Health Team	Trend Down	GREEN
				Source HSCP financial team. Updated annually.			

Outcomes Key Performance Indicators		Data	Target	RAG
	Percentage vacancies w the overall establishme	Percentage of vacancies within the overall establishment 30% 25% 20% 15% 10% 5% 0% Core CMHWB Services & Prison Healthcare Mental Health Team (%) 2022 2023	Trend Down	GREEN
Outcome 5 - Comp	Staff feedba regarding sta working acro community a 5.1.3 statutory me health and wellbeing services (An Staff Survey	HSCP iMatter Feedback: Directorate Report	Trend Up (Approval increases over time)	GREEN

Outcome 5 - Comments:

This outcome reflects our commitment to ensuring we deliver help and support to our communities with adequate resources and that we support our staff appropriately. Performance against this outcome is good, vacancies have declined in the year to date, indicating we have been more successful recruitment and retention.

The iMatter staff survey results do not allow for Care Group specific results however the overall experience score remains high for the HSCP with a slight increase from last year. To ensure that care group level data is captured moving forward a staff pulse survey is planned for 2024.

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Appendix 1 – Data Sources

KPI	DATA SOURCE
% of people who agree a service has supported them to look after their own health well	SUPER Survey – P&K HSCP Performance Management and Reporting Team
% of people who agree a service has supported them to manage their condition as best as possible so that it doesn't get worse	SUPER Survey – P&K HSCP Performance Management and Reporting Team
% of people who agree they had a say in how their health or social care support was	SUPER Survey – P&K HSCP Performance Management and Reporting Team
provided	Public Health
Number of completed suicides	Mental Health Key Indicator Report. Tayside Suicide Review Group
% of people who agree the health or social care support they received helped them to live as independently as possible and maintain their quality of life	SUPE Survey – P&K HSCP Performance Management and Reporting Team
CMHWB Services: Number of People on Waiting List (Total)	TrakCare via Business Unit
People on Waiting List (Wait Time Comparison)	TrakCare via Business Unit
HSCP3: Number of people with a community treatment order (CTO) subject to formal powers under the Mental Health Act	ASWSC Key Monitoring
% of people who feel that their health and social care support was easily accessible and well communicated	SUPER Survey – P&K HSCP Performance Management and Reporting Team
% of adults receiving any care or support who rate it as excellent or good	SUPER Survey – P&K HSCP Performance Management and Reporting Team
MH-12 Emergency admissions (mental health hospitals) per 100,000 population (18+)	Source: Local Data (Qlikview)
MH-14 Mental Health Emergency Readmission rate (28 days) per 1,000 discharges	Source: Local Data (Qlikview)
MH-19 Mental Health Delayed Discharge bed days per 100,000 population (65+)	Source: Local Data (Qlikview)
Number of vacancies at same point in time each month	HSCP Finance Team
Percentage of vacancies within the overall establishment	HSCP Finance Team

Appendix 2 – Details regarding SUPER survey

To ensure that the HSCP is able to review frequent local service user and patient experience feedback and satisfaction data, we introduced a HSCP Service User and Patient Feedback Reporting (SUPER) survey. This survey collects service user feedback at, or slightly after the point of use, enabling the capture of stories and satisfaction data from those using health and social care services and support. The generated outputs have been mapped to the Health and Care Experience (HACE) survey. To generate a figure, returns are captured in rolling 12 months, with the number of people returning positive feedback (e.g. Yes, Good or Very Good) divided by the total number completing the survey, omitting unsure, blank and not applicable responses. While the number of responses remains low, between the final quarter of 2021/22 to date approximately 400 HSCP service users have provided feedback, including 90 from across CMHWB services.