

# Perth and Kinross Health and Social Care Partnership Community Mental Health and Wellbeing: Performance Management Framework Key Performance Indicator Report November 2022

Outcome RAG Summary	GREEN	AMBER	RED	N/A
<b>Outcome 1:</b> "People receive the right support at the right time" & "Reduced stigma and inequalities in relation to people with mental health and substance use issues."	0	1	3	2
<b>Outcome 2:</b> "Improved access to a range of mental health & wellbeing supports and services by fully embedding the principle of Person- Centred Care and support" & "People can make informed choices about their health and social care support."	2	0	2	1
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 & wellbeing services" & "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	0	1	2
<b>Outcome 4:</b> "Through collaboration and co-production, we will deliver more effective services and enhance the mental health and wellbeing across our communities" & "Health & 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	0	2	0
<b>Outcome 5:</b> Ensure that statutory services delivering help and support to our communities have adequate resources including staffing and training needs.	0	0	0	3
TOTAL	6	1	8	8

## **RAG KEY**

Within 3%, or are	Betweer
meeting or	6% away
exceeding our	meeting
target	target

Setween 3% and % away from neeting our arget

More than 6% away from meeting our target PMF KPI Report

	Outcomes	Key	Performance Indicators			Data		Target	RAG
	1) People receive the	1.1.1	Percentage increase in people who feel the service supported them to look after their own health	100% — 80% — 40% — 20% — 5ource: Natio	94% HACE NI01 2021 Yes		76% SUPER 2022/23 Q1-2	80%	AMBER
1	right support at the right time.	1.1.2	Percentage increase in people who feel the service supported them to manage their condition so that it does not get worse	100% — 80% — 40% — 20% — 0% — Source: Natio	Percentage of people manage their conditi	who agree a service has son as best as possible so tworse  100%  SUPER (2021/22 Q4)  Care Experience Survey, P&F	chat it doesn't get  68%  SUPER 2022/23 Q1-2	80%	RED

Outcomes		Performance Indicators	Data	Target	RAG
	1.1.3	Percentage increase in people who feel they had a say in how their health or social care support was provided	Percentage of people who agree they had a say in how their health or social care support was provided  80%  40%  74%  78%  70%  SUPER 2021/22 Q4  SUPER 2022/23 Q1-2  Yes  Source: National Indicator – Health and Care Experience Survey, P&K HSCP Service User and Patient Experience Survey. For more details see Appendix 2.	80%	RED
	1.1.4	Number of completed suicides (annual)	Between 2020 and 2021 the number of completed suicides has declined. Due to data sensitivity and low numbers, this data cannot be published.  Source: Tayside Multiagency Suicide Review Group	N/A	N/A

C	Outcomes Key Performa Indicators			Data	Target	RAG
			Number of people attending and completing suicide prevention training (Supporting KPI)	Attendees receiving suicide intervention and prevention training (via Anchor House)  20 10 15 13 24 12 10 11 8 26 18 26 18		
		1.1.5	Percentage of patients who are followed up within a 3-day period of discharge	Data not yet available.		

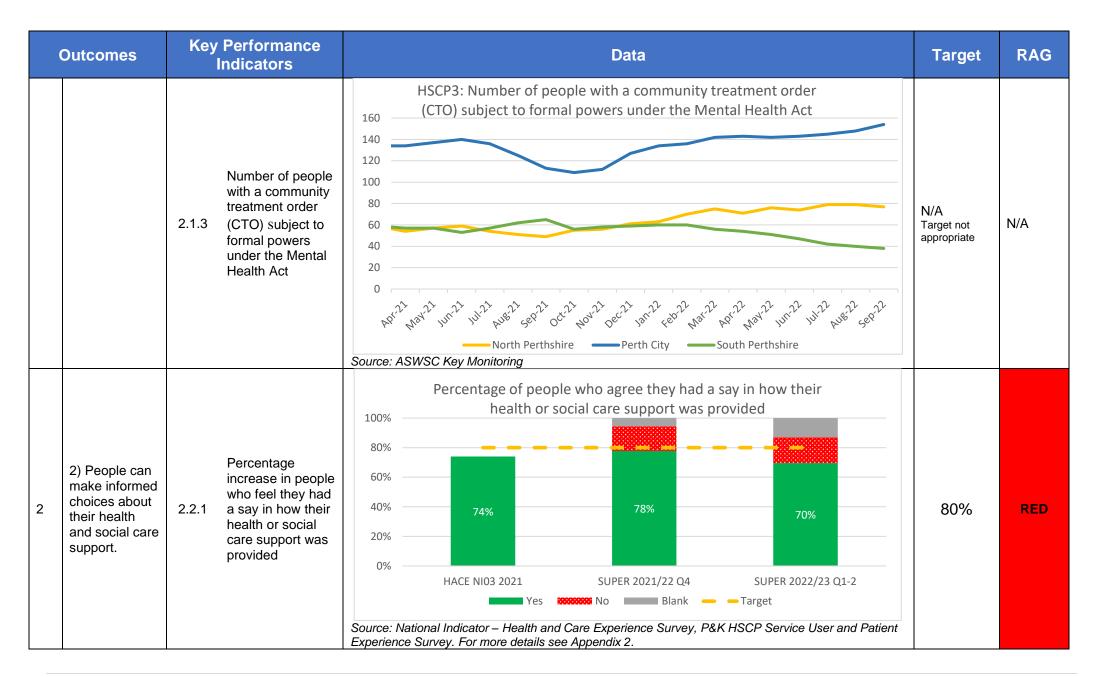
Outcomes	Key Performance Indicators	Data	Target	RAG
2) Reduced stigma and inequalities in relation to people with mental health and substance use issues.	Percentage increase in people who feel that the health or social care support received has helped them to live as independently as possible and maintain their quality of life	Percentage 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 (average)  80%  40%  78%  95%  70%  20%  HACE NI02&07 2021  SUPER 2021/22 Q4  SUPER 2022/23 Q1-2  Yes  No  Blank  Target  Source: National Indicator – Health and Care Experience Survey, P&K HSCP Service User and Patient Experience Survey. For more details see Appendix 2.	80%	RED

#### Outcome 1 - Comments:

Performance against the suite of KPIs supporting Outcome 1 is below target, with 3 KPIs ragged at Red and 1 at Amber. To improve performance and seek to deliver on CMHWB outcomes we have invested in community mental health and wellbeing services, examples of this are as follows: Expanded the provision of localised crisis support, with the Neuk crisis hub at the centre of this enhancement to the coordination and provision of crisis support and interventions. Developed a Perinatal Mental Health Care resource within Perth and Kinross to deliver support to new and expectant mothers throughout Perth and Kinross. Increased the number of Mental Health Officers (MHO) to better support people who are placed under statutory Mental Health legislation.

While recognising the sensitive nature of considering performance in relation to suicide it is notable that the total number of suicides declined by 3 from the preceding reporting year (2020). Moving forward, the newly recruited Suicide Prevention Coordinator will drive the development of a more complete programme of intervention and prevention to help decrease the risk of suicide across Perth and Kinross. We are also in the process of developing a collaborative training package with the School of Health Sciences at Dundee University, focusing on suicide awareness and prevention.





Outcomes	Key Performance Indicators	Data	Target	RAG
	Percentage increase in people who feel that their health and social care support was easily accessible and well communicated	Percentage increase in people who feel that their health and social care support was easily accessible and well communicated  100%  80%  40%  93%  SUPER 2021/22 Q4  SUPER 2022/23 Q1-2  Yes  Source: National Indicator – Health and Care Experience Survey, P&K HSCP Service User and Patient Experience Survey. For more details see Appendix 2.	80%	GREEN

#### Outcome 2 - Comments:

Performance against Outcome 2 is mixed, with 2 KPIs ragged Green and 2 at Red. Of note is that while the number of people on waiting lists has declined, average wait times have trended slightly up. As part of the programme of transformation we are taking steps to be more flexible in our support. We are increasing the availability of digital technology to service users, particularly in rural areas to help reduce delays resulting from travel times and disruptions. We have also deployed our newly developed Advanced Nurse Practitioners (ANPs) to work within our locality-based Community Mental Health Teams. This has already reduced the number of people waiting for ADHD assessments, while still providing expert advice and treatment relating to complex mental health issues. Efforts have also been made to improve service and support accessibility, with a complete service directory, including our statutory and 3rd sector organisations, having been developed and made available online.

1) Support pathways will be clear and robust, with a system of joined-up communication that: i) supports staff	Percentage increase in staff who provide positive feedback 3.1.1 regarding staff working across community and statutory mental health & wellbeing	Data not yet available.		
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Outcomes	Key Performance Indicators	Data	Target	RAG
working across community and statutory mental health & wellbeing services	services (Staff Survey)			
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.	Percentage increase in people who feel that their health or social care support was easily accessible and well communicated		80%	GREE

Outcomes	Key Performance Indicators	Data	Target	RAG
	Percentage increase in the overall rating of 3.2.2 the health or social care support people received	Percentage of adults receiving any care or support who rate it as excellent or good  100%  80%  40%  79%  BACE NI05 2021  Excellent or Good  OK  SOURCE: National Indicator – Health and Care Experience Survey, P&K HSCP Service User and Patient Experience Survey. For more details see Appendix 2.	80%	GREEN
	Readmissions to a mental health hospital within 28 days of discharge (rate per 1,000 discharges)	Mental Health Readmission within 28 days of discharge per 1,000  125  100  75  Jul-21 Aug-21 Sep-21 Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22  Scotland Tayside Perth & Kinross Perth City North Perthshire South Perthshire Peer	20 people	RED

Outcomes	Key Performance Indicators	Data	Target	RAG
		Rolling 12 month rate: Perth & Kinross Scotland Tayside Peer 2021/22 28 22 27 23 Jun-22 28 20 25 20 Source: MH Indicator – Public Health Scotland Monthly Performance Update (LIST Team)  MH-19 Mental Health Delayed Discharge bed days per 100,000		
	Number of days people aged 18- 64 spend in a mental health 3.2.4 hospital when they are ready to be discharged (per 1,000 population)	20.00  10.00  10.00  Scotland  Tayside  Perth & Kinross  Perth City  North Perthshire  South Perthshire  Peer  Rolling 12 month rate:  Perth & Kinross  Scotland  Tayside  Perth & Kinross  Perth City  North Perthshire  South Perthshire  Peer  2021/22  9 12 25 13 Jun-22  Jun-22  12 11 24 13  Source: MH Indicator – Public Health Scotland Monthly Performance Update (LIST Team)	13	GREEN

### **Outcome 3 - Comments:**

While there is currently no update for Outcome 3.1, a staff Pulse survey will be used to inform this KPI, with the first circulation planned for February 2023. Performance across Outcome 3.2. is mixed, with 2 KPIs Green and 2 Red. To improve this performance and ensure we meet the requirements as set out by the Scottish Government's MAT standards, we are transforming how community mental health and wellbeing services are delivered and accessed throughout Perth and Kinross. As part of this transformation, we are developing a pathway of care for those with mental health and substance use issues, which will work to ensure that individuals receive appropriate treatment irrespective of their presentation. Community Mental Health Nurses have also commenced enhanced physical health monitoring, working to identify early symptoms of physical ill health, and offering proactive support and advice on how to prevent further deterioration.

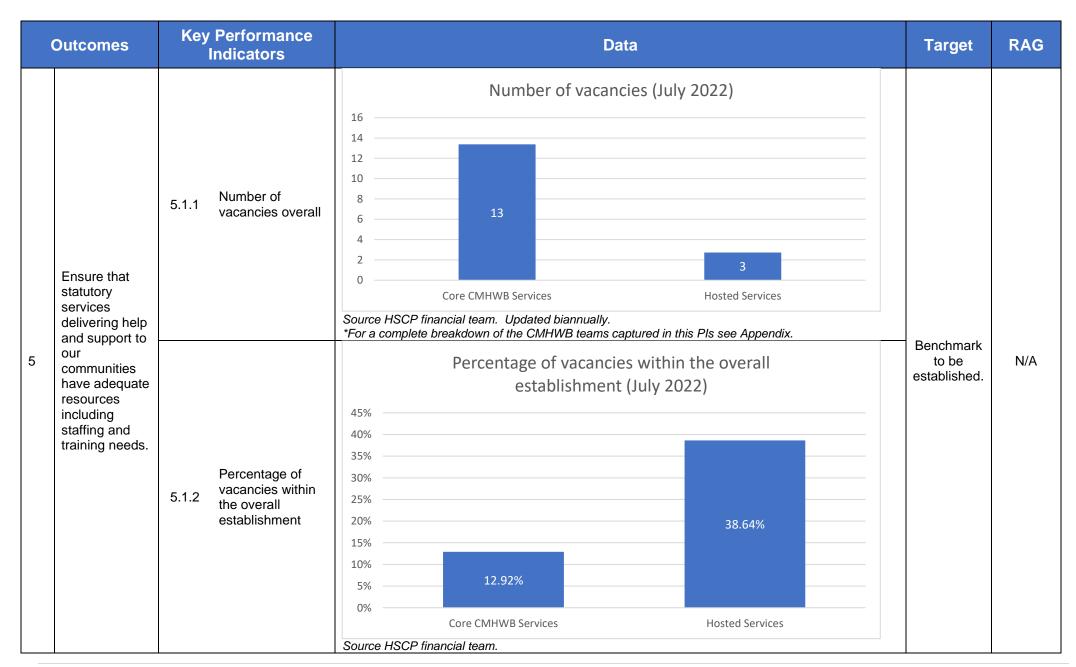
	Outcomes		Performance Indicators	Data	Target	RAG
4	1) Through collaboration and coproduction, we will deliver more effective services and enhance the mental health and wellbeing across our communities	4.1.1	Emergency readmissions to a mental health hospital within 28 days of discharge (rate per 1,000 discharges)	MH-14 Mental Health Emergency Readmission rate (28 days) per  1,000 discharges  100  Jul-21 Aug-21 Sep-21 Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22  Scotland Tayside Perth & Kinross Perth City  North Perthshire South Perthshire Peer  Rolling 12 month rate: Perth & Kinross Scotland Tayside Peer 2021/22 28 22 27 23 Jun-22 Source: MH Indicator – Public Health Scotland Monthly Performance Update (LIST Team)	20 people	RED

Out	comes		Performance Indicators		Data				Target	RAG
		4.1.2	Number of days people aged 18- 64 spend in a mental health hospital when they are ready to be discharged (per 1,000 population)	— N	population (18-64  e Perthshire Pe  Perth & Kinross  9 12	yun 2 yul 2 rth & Kinross er  Scotland 12 11	Rught sept Pe  Tayside  25  24	rth City  Peer  13  13	13	GREEN

Outcomes Key Performand Indicators	Data	Target	RAG
2) Lived experience will be at the heart of service design, and the voices and views of 4 people and their carers will influence decisions about how care and support is received.  Percentage increase in pe who feel they 4.2.1 a say in how to health or social care support v provided.	d ir 40% 74% 78% 78%	80%	RED

## **Outcome 4 - Comments:**

Our performance against Outcome 4 is mixed with all 2 KPIs RED and 1 GREEN. The recent service redesign, to a one structure model, will look to address performance in this area ensuring consistency across all services and better enable for resources to be pooled, while making the service more responsive and flexible throughout. With the high level of transformation currently being undertaken, we have taken steps to ensure our 3rd sector partners are present and represented in our strategic decision-making. Approximately half of those attending our Mental Health and Wellbeing Strategy group represent 3rd sector organisations, ensuring we have the expertise and insight needed to help drive effective and balanced improvements.



Outcomes	Key Performance Indicators	Data	Target	RAG
	Percentage increase in staff who provide positive feedback regarding staff 5.1.3 working across community and statutory mental health & wellbeing services (Annual Staff Survey)	Data not yet available.		

#### **Outcome 5 - Comments:**

The Scottish Government has indicated significant 2022/23 budget challenges and this may impact on our ability to recruit to vacant posts. A further funding update anticipated at the end of November 2022. Irrespective of this, the redesign of service management and delivery is progressing. We are currently participating in a Tayside wide series of workshops and planning sessions around a redesign of our Community Mental Health Teams and intend to also develop our Primary Care Mental Health Service as we move forward.

## For any further information please email: <u>BIT@pkc.gov.uk</u>

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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 Business Improvement 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 Business Improvement Team
% of people who agree they had a say in how their health or social care support was provided	SUPER Survey – P&K HSCP Business Improvement Team Public Health
Number of completed suicides	Mental Health Key Indicator Report. Tayside Suicide Review Group
Number of people attending and completing suicide prevention training (supporting KPI)	Anchor House
% of people who agree the health or social care support they received helped them	SUPE Survey – P&K HSCP Business Improvement Team
to live as independently as possible and maintain their quality of life	
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	ASWSC Key Monitoring
formal powers under the Mental Health Act	
% of people who feel that their health and social care support was easily accessible	SUPER Survey – P&K HSCP Business Improvement Team
and well communicated	
% of adults receiving any care or support who rate it as excellent or good	SUPER Survey – P&K HSCP Business Improvement Team
MH-14 Mental Health Emergency Readmission rate (28 days) per 1,000 discharges	MH Indicator –Public Health Scotland Monthly Performance Update (LIST Team)
MH-19 Mental Health Delayed Discharge bed days per 100,000 population (65+)	MH Indicator –Public Health Scotland Monthly Performance Update (LIST Team)
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 have introduced a new 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" responses. These figures are reported sequentially, by financial quarter or on a six monthly basis dependant on sample size. Within this report, they follow on from the latest equivalent HACE figure for 2021 (National Indicator 01-09). While still in its pilot stage, across 2021/22 and the first two quarters of 2022/23 the SUPE survey has been distributed directly to over 200 people in receipt of health and social care services across Perth and Kinross.

# Appendix 3 – Community Mental Health & Wellbeing Teams and Programmes Captured in KPI 5.1.1-2

Core Services

Community Mental Health Team - Perth

Community Mental Health Team - North

Community Mental Health Team - South

MH Action 15
Wellbeing Support Team
Mental Health Team - Pullar
Forensic
Hosted Service
Prison Healthcare Mental Health Team