

Perth and Kinross Health and Social Care Partnership
Autism and Learning Disability:
Performance Management Framework Key Performance Indicator
Report
December 2022

Outcome RAG Summary	GREEN	AMBER	RED	N/A or DNA
Outcome 1: " To support people to remain at home or in a homely setting."	2	1	1	
Outcome 2: " Services are more cost effective and financially sustainable."				1
Outcome 3: " Service users have access to support by appropriately trained workforce."	1			
Outcome 4: " Ensure people can live well in their communities and have access to accommodation which is suitable for their needs and where they are supported to live as independently as possible."	1		1	2
Outcome 5: "Ensure people are able to participate in their communities."	1			
Outcome 6: "Individuals will have greater opportunities to be involved and participate in decisions that affect their lives."	1			
Outcome 7: "Improve access to quality and meaningful employment opportunities."	2			
TOTAL	8	1	2	3

RAG KEY

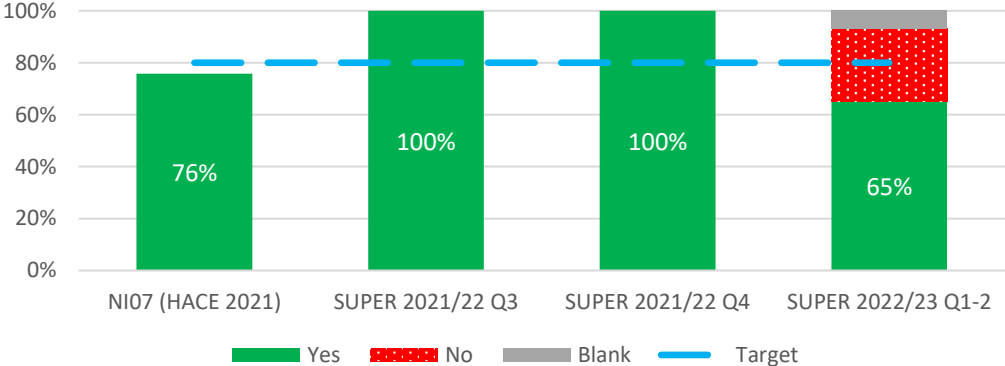
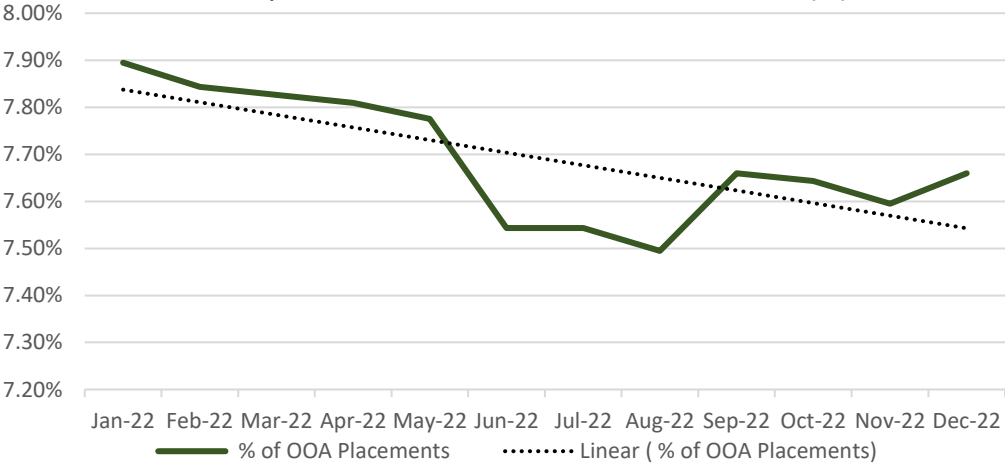
Within 3%, or are meeting or exceeding our target	Between 3% and 6% away from meeting our target	More than 6% away from meeting our target
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Outcomes		Key Performance Indicators	Data	Target	RAG																												
1	To support people to remain at home or in a homely setting	1.1 % of service users supported at home who agree that they are able to maximise their health, independence and maintain their quality of life.	<p>Percentage of people supported at home who agree that they are able to maximise their health, independence and maintain their quality of life</p> <table border="1"> <caption>Percentage of people supported at home who agree that they are able to maximise their health, independence and maintain their quality of life</caption> <thead> <tr> <th>Period</th> <th>Yes (%)</th> <th>No (%)</th> <th>Blank (%)</th> </tr> </thead> <tbody> <tr> <td>NI01& NI07 (HACE 2021)</td> <td>85%</td> <td>0%</td> <td>0%</td> </tr> <tr> <td>SUPER 2021/22 Q3</td> <td>100%</td> <td>0%</td> <td>0%</td> </tr> <tr> <td>SUPER 2021/22 Q4</td> <td>100%</td> <td>0%</td> <td>0%</td> </tr> <tr> <td>SUPER 2022/23 Q1-2</td> <td>74%</td> <td>16%</td> <td>10%</td> </tr> </tbody> </table>	Period	Yes (%)	No (%)	Blank (%)	NI01& NI07 (HACE 2021)	85%	0%	0%	SUPER 2021/22 Q3	100%	0%	0%	SUPER 2021/22 Q4	100%	0%	0%	SUPER 2022/23 Q1-2	74%	16%	10%	80%	AMBER								
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SUPER 2021/22 Q4	100%	0%	0%																														
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1.2 Reduction in occupied bed days	<p>LD&A Clients Occupied bed days</p> <table border="1"> <caption>LD&A Clients Occupied bed days</caption> <thead> <tr> <th>Period</th> <th>LD&A Total (OBDs)</th> <th>Carseview Centre (OBDs)</th> <th>Murray Royal Hospital (OBDs)</th> <th>Strathmartine Hospital (OBDs)</th> <th>Total OBDs (Right Axis)</th> </tr> </thead> <tbody> <tr> <td>2021/22</td> <td>31.00</td> <td>7.00</td> <td>2.00</td> <td>40.50</td> <td>40.50</td> </tr> <tr> <td>2022/23 Q1</td> <td>32.00</td> <td>7.50</td> <td>2.50</td> <td>40.50</td> <td>40.50</td> </tr> <tr> <td>2022/23 Q2</td> <td>27.00</td> <td>8.00</td> <td>0.00</td> <td>40.00</td> <td>37.50</td> </tr> <tr> <td>2022/23 Latest (as at Nov)</td> <td>27.00</td> <td>8.00</td> <td>0.00</td> <td>40.00</td> <td>37.00</td> </tr> </tbody> </table> <p><i>Left hand axis = OBDs by hospital setting (rolling 12 month average). Right hand axis = OBDs Total per quarter (rolling 12 month average).</i></p>	Period	LD&A Total (OBDs)	Carseview Centre (OBDs)	Murray Royal Hospital (OBDs)	Strathmartine Hospital (OBDs)	Total OBDs (Right Axis)	2021/22	31.00	7.00	2.00	40.50	40.50	2022/23 Q1	32.00	7.50	2.50	40.50	40.50	2022/23 Q2	27.00	8.00	0.00	40.00	37.50	2022/23 Latest (as at Nov)	27.00	8.00	0.00	40.00	37.00	Trend Down	GREEN
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Outcomes		Key Performance Indicators	Data	Target	RAG
		1.3 Reduction in Out of Area Placements.	<p>Monthly service users in Out of Area Placements (%)</p> <p>(Data for management purposes only. Data reliability questioned by Business Unit. Validation check ongoing to align monthly figures with annula LDSS report to SG)</p>	Trend Down	GREEN
		1.4 Reduction in Long Term Hospital Stays. (Days Delayed)	<p>LD&A: Number of Days Delayed in a hospital setting</p> <p>12 month rolling average</p>	Trend Down	RED

Outcomes		Key Performance Indicators	Data	Target	RAG
<p><u>Outcome 1 Comments:</u> Outcome 1 demonstrates our ambition to support people to remain at home or in a homely setting as much as is possible. Of the 4 KPIs used to measure progress, 2 are equal to or above our target. However, 2 are below target and we can see satisfaction with how services empower people to live independently has reduced by 26% since 2021/22 Q4 (this is from a relatively small sample size). We will continue to monitor progress in this respect to understand more about how people feel. In respect to reductions in occupied bed days we can see that there has been a slight, 1.03% improvement when compared to 2021/22. This improvement has been maintained across the last two quarters. In respect to out of area placements, our ambition is to see people supported to return to Perth and Kinross if that is their wish. In this financial year we have seen a marginal reduction in clients placed out with Perth and Kinross. In interpreting the number of days LD&A clients are delayed in a hospital setting, it is important to note that a drop in DDs can be the result of declining wellness and suitability for discharge. While our new SCOPE team has helped to stabilise delays, with a decrease reported over the period, it is acknowledged that COVID-19 impacted our ability to deliver appropriate accommodation within the timescales originally planned. A body of work is being taken forward to ensure our current cohort of delayed clients (6 in total) are discharged in a safe, sustainable and appropriate manner.</p>					
2	Services are more cost effective and financially sustainable	2.1 Overall reduction in the average cost of care per patient package.	DNA - HSCP Finance Team to develop reporting mechanism		
<p><u>Outcome 2 Comments:</u> We are not currently in a position to offer an update on the average cost of care per patient package, work is continuing to secure this data for future reporting.</p>					

Outcomes		Key Performance Indicators	Data	Target	RAG																																																																
3	Service users have access to support by appropriately trained workforce	3.1 % of staff who have completed mandatory training.	<p>HSCP Health Staff</p> <table border="1"> <thead> <tr> <th>Learning Modules</th> <th>Oct 2021</th> <th>Dec 2021</th> <th>Feb 2022</th> <th>Apr 2022</th> <th>Jun 2022</th> <th>Aug 2022</th> <th>Oct 2022</th> </tr> </thead> <tbody> <tr> <td>Safe information handling</td> <td>89%</td> <td>90%</td> <td>90%</td> <td>91%</td> <td>92%</td> <td>92%</td> <td>91%</td> </tr> <tr> <td>Manual Handling</td> <td>89%</td> <td>90%</td> <td>88%</td> <td>90%</td> <td>92%</td> <td>93%</td> <td>95%</td> </tr> <tr> <td>ASP Essential</td> <td>90%</td> <td>90%</td> <td>89%</td> <td>89%</td> <td>89%</td> <td>90%</td> <td>92%</td> </tr> <tr> <td>Child Protection Level 1 Recognition</td> <td>92%</td> <td>92%</td> <td>92%</td> <td>89%</td> <td>91%</td> <td>91%</td> <td>93%</td> </tr> <tr> <td>Equality, Diversity, Human Rights</td> <td>85%</td> <td>88%</td> <td>90%</td> <td>93%</td> <td>91%</td> <td>91%</td> <td>92%</td> </tr> <tr> <td>Fire Safety</td> <td>94%</td> <td>94%</td> <td>95%</td> <td>94%</td> <td>90%</td> <td>89%</td> <td>90%</td> </tr> <tr> <td>Violence and Aggression 2020</td> <td>84%</td> <td>86%</td> <td>87%</td> <td>85%</td> <td>84%</td> <td>86%</td> <td>85%</td> </tr> </tbody> </table> <p>Care Group specific data not currently available, as distinction is not made by NHST training systems.</p> <p>Social Care Staff</p> <p><i>DNA – Upadate to be input here when source is established.</i></p>	Learning Modules	Oct 2021	Dec 2021	Feb 2022	Apr 2022	Jun 2022	Aug 2022	Oct 2022	Safe information handling	89%	90%	90%	91%	92%	92%	91%	Manual Handling	89%	90%	88%	90%	92%	93%	95%	ASP Essential	90%	90%	89%	89%	89%	90%	92%	Child Protection Level 1 Recognition	92%	92%	92%	89%	91%	91%	93%	Equality, Diversity, Human Rights	85%	88%	90%	93%	91%	91%	92%	Fire Safety	94%	94%	95%	94%	90%	89%	90%	Violence and Aggression 2020	84%	86%	87%	85%	84%	86%	85%	90%	GREEN
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<p>Outcome 3 Comments: Outcome 3 demonstrates our understanding that an appropriately trained workforce is essential to ensuring people have access to the care and support they deserve. While performance is above the KPI target of 90%, it should be noted that we cannot currently provide an update on staff specific to Autism and Learning Disability service(s). While further work will be needed to secure this, our commitment to staff training has recently been highlighted by the production of our SCOPE Team Learning Framework. Through this approach, a robust suite of courses and training modules have been made available to employees to enhance their knowledge base, support continuous professional development and allow them to better support the people they serve.</p>																																																																					
4	Ensure people can live well in their communities and have access to accommodation which is suitable for their needs and where they are supported to	4.1 % of people who agree they live in suitable accommodation at home and within their community. Being able to live as independently as possible.	<p><i>DNA – Further engagement with service needed, as survey needs to capture feedback from those in accommodation on a routine basis.</i></p>	80%																																																																	

Outcomes	Key Performance Indicators	Data	Target	RAG																																						
live as independently as possible.	4.2 % of people who agree that their Health and Social Care support helped to maintain their quality of life.	<p>Percentage of people who feel the support helped to live as independently as possible and maintain their quality of life</p>  <table border="1"> <caption>Percentage of people who feel the support helped to live as independently as possible and maintain their quality of life</caption> <thead> <tr> <th>Period</th> <th>Yes (%)</th> <th>No (%)</th> <th>Blank (%)</th> <th>Target (%)</th> </tr> </thead> <tbody> <tr> <td>NI07 (HACE 2021)</td> <td>76%</td> <td>0%</td> <td>0%</td> <td>80%</td> </tr> <tr> <td>SUPER 2021/22 Q3</td> <td>100%</td> <td>0%</td> <td>0%</td> <td>80%</td> </tr> <tr> <td>SUPER 2021/22 Q4</td> <td>100%</td> <td>0%</td> <td>0%</td> <td>80%</td> </tr> <tr> <td>SUPER 2022/23 Q1-2</td> <td>65%</td> <td>25%</td> <td>10%</td> <td>80%</td> </tr> </tbody> </table>	Period	Yes (%)	No (%)	Blank (%)	Target (%)	NI07 (HACE 2021)	76%	0%	0%	80%	SUPER 2021/22 Q3	100%	0%	0%	80%	SUPER 2021/22 Q4	100%	0%	0%	80%	SUPER 2022/23 Q1-2	65%	25%	10%	80%	80%	RED													
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4.3.1 i. Reduction in Out of Area Placements for service users;	<p>Monthly service users in Out of Area Placements (%)</p>  <table border="1"> <caption>Monthly service users in Out of Area Placements (%)</caption> <thead> <tr> <th>Month</th> <th>% of OOA Placements</th> <th>Linear (% of OOA Placements)</th> </tr> </thead> <tbody> <tr><td>Jan-22</td><td>7.89%</td><td>7.83%</td></tr> <tr><td>Feb-22</td><td>7.84%</td><td>7.80%</td></tr> <tr><td>Mar-22</td><td>7.81%</td><td>7.77%</td></tr> <tr><td>Apr-22</td><td>7.79%</td><td>7.74%</td></tr> <tr><td>May-22</td><td>7.77%</td><td>7.71%</td></tr> <tr><td>Jun-22</td><td>7.54%</td><td>7.68%</td></tr> <tr><td>Jul-22</td><td>7.54%</td><td>7.65%</td></tr> <tr><td>Aug-22</td><td>7.49%</td><td>7.62%</td></tr> <tr><td>Sep-22</td><td>7.66%</td><td>7.59%</td></tr> <tr><td>Oct-22</td><td>7.64%</td><td>7.56%</td></tr> <tr><td>Nov-22</td><td>7.59%</td><td>7.53%</td></tr> <tr><td>Dec-22</td><td>7.66%</td><td>7.50%</td></tr> </tbody> </table> <p><i>(Data for management purposes only. Data reliability questioned by Business Unit. Validation check ongoing to align monthly figures with annula LDSS report to SG)</i></p>	Month	% of OOA Placements	Linear (% of OOA Placements)	Jan-22	7.89%	7.83%	Feb-22	7.84%	7.80%	Mar-22	7.81%	7.77%	Apr-22	7.79%	7.74%	May-22	7.77%	7.71%	Jun-22	7.54%	7.68%	Jul-22	7.54%	7.65%	Aug-22	7.49%	7.62%	Sep-22	7.66%	7.59%	Oct-22	7.64%	7.56%	Nov-22	7.59%	7.53%	Dec-22	7.66%	7.50%	Trend Down	Green
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Outcomes		Key Performance Indicators	Data	Target	RAG
		4.3.2 ii. Reduced timescales for service users successfully transferred into suitable, independent accommodation.	DNA		

Outcome 4 Comments:

Outcome 4 highlights our commitment to ensure people have access to the appropriate accommodation to enable them to live well and as independently as possible within their own communities. Performance in this area is mixed, with 1 KPI on target and 1 below. There are 2 for which data is not currently available. While the sample size remains small, the “percentage of people agreeing the support they received helped them to maintain their quality of life” has reduced by 35% since 2021/22 Q4. To improve this, we will continue to monitor progress and review the feedback we receive to understand more about how people feel. In respect to reducing out of area placement, there has been a marginal reduction of 0.17% when compared to 2021/22. While we are not currently able to provide an update on “the timescales for service users to be successfully transferred into suitable accommodation”, we recognise the importance of this KPI in ensuring people are accommodated within an appropriate community setting as quickly as possible. This remains a key area of importance to us, and work is being undertaken to produce a systematic mechanism for reporting updates against this KPI.

5	Ensure people are able to participate in their communities.	5.1 Increase in the number of service users who access "Day Opportunities" & "Fun Network" Services	<p>Number of people accessing Day Opportunities and Fun Network</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Day Opportunities</th> <th>Fun Network</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>105</td> <td>105</td> </tr> <tr> <td>2022</td> <td>107</td> <td>113</td> </tr> </tbody> </table>	Year	Day Opportunities	Fun Network	2021	105	105	2022	107	113	Trend Up	GREEN
Year	Day Opportunities	Fun Network												
2021	105	105												
2022	107	113												

Outcomes	Key Performance Indicators	Data	Target	RAG
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Outcome 5 Comments:
 Outcome 5 highlights our commitment to empowering people to remain, participate and thrive within their local communities. Performance in this area is positive, with the total number of people accessing our Day Opportunities and the Friends Unlimited Network (FUN) services increasing 4.8% to 220 as of December 2022.

6	Individuals will have greater opportunities to be involved and participate in decisions that affect their lives.	6.1 % of service users who agree they had a say in how their Health or Social Care support was provided	<p>Percentage of people who agree they had a say in how their health or social care support was provided</p> <table border="1"> <thead> <tr> <th>Period</th> <th>Yes (%)</th> <th>No (%)</th> <th>Blank (%)</th> </tr> </thead> <tbody> <tr> <td>NIO3 (HACE 2021)</td> <td>74</td> <td>26</td> <td>0</td> </tr> <tr> <td>SUPER 2021/22 Q3</td> <td>100</td> <td>0</td> <td>0</td> </tr> <tr> <td>SUPER 2021/22 Q4</td> <td>93</td> <td>7</td> <td>0</td> </tr> <tr> <td>SUPER 2022/23 Q1-2</td> <td>90</td> <td>10</td> <td>0</td> </tr> </tbody> </table> <p>Legend: Yes (Green), No (Red), Blank (Grey), Target (Blue dashed line)</p>	Period	Yes (%)	No (%)	Blank (%)	NIO3 (HACE 2021)	74	26	0	SUPER 2021/22 Q3	100	0	0	SUPER 2021/22 Q4	93	7	0	SUPER 2022/23 Q1-2	90	10	0	80%	GREEN
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SUPER 2022/23 Q1-2	90	10	0																						

Outcome 6 Comments:
 Outcome 6 supports our intention to ensure people have the opportunities to be involved and participate in decisions that affect their lives. While the sample size remains small, satisfaction feedback delivered through our SUPER survey shows that performance in this area is strong, with 90% of respondents agreeing they had a say in how their health and social care support is provided. We are also in the process of rolling out Care Opinion to better engage with service users. Our Learning Disability Occupational Therapy service has been trialling this as of early December 2022, with a further rollout planned for February 2023.

Outcomes		Key Performance Indicators	Data	Target	RAG									
7	Improve access to quality and meaningful employment opportunities.	7.1 % increase of clients / service users in employment	<p>Employment Support Team: LD&ASD Clients</p> <table border="1"> <thead> <tr> <th>Year</th> <th>% In Work</th> <th>% Volunteering</th> </tr> </thead> <tbody> <tr> <td>2021/22</td> <td>73.68%</td> <td>26.32%</td> </tr> <tr> <td>2022/23</td> <td>74.55%</td> <td>25.45%</td> </tr> </tbody> </table>	Year	% In Work	% Volunteering	2021/22	73.68%	26.32%	2022/23	74.55%	25.45%	75%	GREEN
		Year	% In Work	% Volunteering										
2021/22	73.68%	26.32%												
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		7.2 Increase in clients / service users involved in Further Education	<p>LD&A Clients in Education</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Number of Clients</th> </tr> </thead> <tbody> <tr> <td>2020-21</td> <td>23</td> </tr> <tr> <td>2021-22</td> <td>31</td> </tr> </tbody> </table>	Year	Number of Clients	2020-21	23	2021-22	31	Trend Up	GREEN			
Year	Number of Clients													
2020-21	23													
2021-22	31													

Outcomes	Key Performance Indicators	Data	Target	RAG
<p>Outcome 7 Comments: Outcome 7 highlights our continued commitment to ensure the people we support can maintain their independence and access meaningful employment opportunities. Performance in this area is strong and we have seen year on year increases against both of the KPIs. The percentage of clients in employment through the Employment Support Service has increased by 0.9% in the last year, and the number of people in further education has risen 34.8% across the same period. To ensure that people with learning disabilities and autism have access to education, we support Perth College Social and Vocational Studies (SVS) Department to offer educational, social and vocational opportunities to young people who have additional support needs due to a specific learning disability, general developmental delay and/or social and emotional disorders. In the current academic cycle, there are 21 full time students (up from 16 last year) and 19 part time students (up from 12) receiving Social Work support, although this is not limited to LD&A clients.</p>				

For any further information please email: BIT@pkc.gov.uk

Authors

Name	Designation	Contact Details
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Chris Jolly	Service Manager (Business Planning and Performance)	Christopher.Jolly@nhs.scot

Appendix 1 – Data Sources

Key Performance Indicator	Data Source
KPI 1.1 “% of service users supported at home who agree that they are able to maximise their health, independence and maintain their quality of life.”	Source – SUPER Survey Q1A “Has your health or social care support supported you to look after your own health well?” and Q1C “Has your health or social care support supported you to live as independently as possible and maintain your quality of life?”. As at October 2022, 49 LD&A clients have responded to this question. Further details are available in the Appendix 1.
KPI 1.2 “Reduction in occupied bed days (Long stay).”	Data source - Clickview. Data is a 12 month rolling average of LA&A occupied bed days. Comparisons are against last quarter.
KPI 1.3 “Reduction in Long Term Hospital Stay.”	Data source - Clickview. Data is a rolling 12 month rolling average of days people are delayed in hospital. Comparisons against las quarter.
KPI 1.3 “Reduction in Out of Area Placements.”	Data source - Learning Disability Statistics Scotland (LDSS) Return (2021/22). Definition - A client/service user is in an out of area placement if they are living in a placement which is not within their funding authority.
KPI 2.1 “Overall reduction in the average cost of care per patient package.”	DNA – Further work required with Finance Team to develop a systematic return.
KPI 3.1 “% of staff who have completed mandatory training.”	P&K Health Mandatory Training Compliance Summary Return. Social Care staff measure in development.
KPI 4.1 “% of people who agree they live in suitable accommodation at home and within their community. Being able to live as independently as possible.”	DNA – Further work required to reach and engage specific client group.
KPI 4.2 “% of people who agree that their Health and Social Care support helped to maintain their quality of life.”	Data Source – SUPER Survey Q1C “Has your health or social care support supported you to live as independently as possible and maintain your quality of life?”. As at October 2022, 43 LD&A clients have responded to this question. Further details are available in the Appendix 1.
KPI 4.3i. “Reduction in Out of Area Placements for service users”	Data Source – Out Of Area (OOA) Placements as reported in the Learning Disability Statistics Scotland (LDSS Return) (2021/22). OOA Placement definition - A client/service user is in an out of area placement if they are living in a placement which is not within their funding authority.
KPI 4.3ii. “Reduced timescales for service users successfully transferred into suitable, independent accommodation”	DNA – Further work required to develop systematic data return.
KPI 5.1 “Increase in the percentage of service users who access "Day Opportunities" & "Fun Network" Services”	Data Source – Service Level record – Learning Disabilities Day Opportunities: Current Registered Service Users Numbers.
KPI 6.1 “% of service users who agree they had a say in how their Health or Social Care support was provided”	Data Source – SUPER Survey Q2 “Did you have a say in how your health or social care support was provided?”. As at October 2022, 48 LD&A clients had responded to this question.
KPI 7.1 “% increase for clients / service users in employment”	Data Source – Employment Support Team internal service update. Figure does not include those supported in volunteering roles.
KPI 7.2 “Increase in clients / service users involved in Further Education”	Data Source – LDSS Return (2021/22). Measure of LD&A clients involved in Further Education.

Appendix 2 – Learning Disability and Autism Strategic Delivery Plan Linkages to National Health and Wellbeing Outcomes

		NATIONAL HEALTH and WELLBEING OUTCOMES								
STRATEGIC OUTCOMES	KPI's	1	2	3	4	5	6	7	8	9
1. To Support People to remain at home or in a homely setting	1) % of service users supported at home who agree that they are able to maximise their health, independence and maintain their quality of life. 2) Reduction in occupied bed days (Long stay) 3) Reduction in Out of Area Placements		✓							
2. Reduce the over reliance on Social Care	Overall reduction in the average cost of care per patient package	✓	✓							✓
3. Service users have access to support by appropriately trained workforce.	1) % of staff who have completed mandatory training. 2) % of staff trained in positive behavioural support.								✓	
4. Ensure people can live well in their communities and have access to accommodation which is suitable for their needs and where they are supported to live as independently as possible.	1) % of people who agree they live in suitable accommodation at home and within their community. Being able to live as independently as possible. 2) % of people who agree that their Health and Social Care support helped to maintain their quality of life. 3) Reduction in OOA placements for service users who wish to remain in P&K.		✓		✓	✓				
5. Ensure people are able to participate in their communities.	Increase in the percentage of service users who access "Day Opportunities" & "Fun Network" Services				✓					
6. Individuals will have greater opportunities to be involved and participate in decisions that affect their lives.	% of service users who agree they had a say in how their Health or Social Care support was provided		✓			✓				
7. Improve access to quality and meaningful employment opportunities.	% increase for clients / service users in employment % of service users in further education				✓	✓				