SCOTTISH BORDERS COUNCIL **PERFORMANCE MANAGEMENT FOR ADULT SOCIAL CARE**





CONTENTS PERFORMANCE MANAGEMENT FRAMEWORK

1.	PURPOSE	3
2.	PERFORMANCE MANAGEMENT	4
3.	STRATEGIC CONTEXT FOR ADULT SOCIAL CARE SERVICES	5
4.	PARTNERSHIP AND LOCAL CONTEXT	6
5.	MONITORING AND REPORTING	8
6.	USING COVALENT TO CAPTURE ACTIONS AND PERFORMANCE INDICATORS (PI)	14
7.	BUSINESS PLANNING	15
8.	IMPROVEMENT THROUGH SELF-EVALUATION	16
9.	PUBLIC PERFORMANCE REPORTING	17
10.	LINKS TO INDIVIDUALS' WORK AND PERFORMANCE REVIEW AND DEVELOPMENT (PRD)	19
APF	PENDIX 1: HEALTH AND SOCIAL CARE PERFORMANCE SUMMARY	20

1. PURPOSE

This document presents a Performance Management Framework (PMF) that enables Scottish Borders Council's (SBC) Adult Social Care Services to monitor and report progress against Priority 3 (providing high quality support, care and protection to children, young people, adults, families, and older people) in SBC's Corporate Plan (2013-2018). It allows the services to demonstrate how effectively and efficiently services are being delivered and critically where improvements are required to ensure the best possible outcomes for service users.

It reflects changes both internally within SBC (to our corporate structure, and to our committee structure) and externally (for reporting to Scottish Government and within the new Health and Social Care integration structures, although it should be acknowledged that some of the integration arrangements are not yet finalised, and will be subject to change.

2. PERFORMANCE MANAGEMENT

Effective performance management is critical to the success of any organisation, including Local Authorities and those with whom it contracts. It provides a framework to show how well we are working towards achieving aims/objectives and promotes the continuous improvement of services provided to the public, including services provided by a Trust or other body. In terms of best practice, Local Authorities that are recognised as having good performance management in place demonstrate the following characteristics:

- A focus on community priorities, based on facts about customer and citizen needs
- A strong shared vision of what the organisation is trying to achieve, which is effectively communicated within the organisation
- Robust and effective planning systems linked to the allocation of resources
- Clear measures demonstrating the impact of delivery
- Accountable staff empowered to act within a clear managerial framework
- Robust financial management arrangements in place.

Central to demonstrating these characteristics is having a systematic approach to monitoring performance, a core part of being able to demonstrate that public money is being used wisely (known as "best value"). Even when not directly delivering services itself, SBC must ensure that:

- Performance, including financial performance, is systematically measured and reported across all areas of activity;
- Performance information is accurate, up to date and rigorously monitored;
- Performance information is reported publicly in accordance with the Council's statutory duty under the Local Government Act 1992 (specifically in relation to the publication of information).

3. STRATEGIC CONTEXT FOR ADULT SOCIAL CARE SERVICES

The Scottish Government is committed to enabling older people to live healthy, active and independent lives, and wants older people to have the services they need, and to be involved in the planning of those services. Since the introduction of the Community Care and Health (Scotland) Act in 2002, and the introduction of free personal care, the focus has been on helping older people remain at home or in a homely setting. With the recent integration of Health and Social Care, outcomes should improve further, with shorter routes to services and faster journeys along these routes.

The context for Scottish Borders Council's Adult Social Care Services is extremely challenging. By the year 2032, the number of people aged 65 and over in the Scottish Borders is projected to increase by 51%, a faster rate than the 49% for Scotland overall. The number of people under 65 is also projected to decrease in the Scottish Borders. Age is strongly related to patterns of need for health and social care. These changes will influence how we deliver services in the future.

The Borders is largely a remote and rural area, with our 5 "localities" having individual characteristics and therefore different needs. This makes delivery of services complex. About a quarter of the households in the Borders are composed entirely of people aged 65 and over. This age group has a greater need for our services. The growing number of people with dementia is a big challenge. People are living longer than ever and this trend is set to continue.

For quality of life to be maintained and enhanced, services need to be redesigned around the needs of the individual, to:

- Ensure that their journey through their care and treatment is as integrated and streamlined as possible;
- Enable them to remain independent for as long as possible; and
- Support them to recover after illness and at times of crisis.

Therefore, the way we manage, analyse and report performance information is vital if we are to:

- use our collective resources efficiently and effectively;
- make improvements where necessary;
- achieve the best outcomes for service users

4. PARTNERSHIP AND LOCAL CONTEXT

Scottish Borders has a long, strong history of partnership working with both statutory and non-statutory partners. SBC, NHS Borders and many other partner organisations share the same boundaries and populations.

The Scottish Borders Community Planning Partnership and Scottish Borders Council (SBC) corporate context is presented on the next page, and how they link to the Scottish Government's overarching National Performance Framework:

6 | PERFORMANCE MANAGEMENT FRAMEWORK | ADULT SOCIAL CARE | SCOTTISH BORDERS COUNCIL

FIGURE 1 SCOTTISH GOVERNMENT

PURPOSE

To focus Government and public services on creating a more successful country, with opportunities for all of Scotland to flourish, through increasing sustainable economic growth.

Underpinning this purpose are the **16 national outcomes**. Key national policies and strategies then support the achievement of these outcomes.

(National outcome 15: Our people are able to maintain their independence as they get older and are able to access appropriate support when they need it)

SCOTTISH BORDERS COMMUNITY PLANNING PARTNERSHIP (CPP)

PRIORITIES

Grow our Economy; Reduce Inequalities; Maximise the impact from the low carbon economy (from 2013 Single Outcomes Agreement)

Underpinning these 3 priorities are a ranges of partnerships, plans and strategies that support the CPP to deliver against national priorities.

For example, the Integrated Joint Board (IJB) oversees the delivery of the **Health and Social Care Strategic Plan 2016 – 2019**. Under the requirements of the Community Empowerment Act, the IJB is part of the CPP and is there to "work together for the best possible health and well-being in our communities"

SCOTTISH BORDERS COUNCIL

VISION

We seek the best quality of life for all the people in the Scottish Borders, prosperity for our businesses and good health and resilience for all our communities

SBC has 8 corporate priorities that support the achievement of this vision (http://www.scotborders.gov.uk/corporateplan).

(Corporate Priority 3: Provide high quality support, care and protection to children, young people, adults, families, and older people)

Adult Social Care, within the People Department, supports Scottish Borders Council and the Scottish Borders CPP to:

- deliver against the required outcomes and priorities;
- deliver on its statutory requirements around adults and older people;
- enhance quality of life for residents of the Scottish Borders.

5. MONITORING AND REPORTING

The purpose of monitoring and reporting, when using the public money that SBC is accountable for, is to:

- ensure delivery of improved outcomes
- demonstrate, over time, improvement in areas where weaknesses have been identified;
- evidence achievement of best value, that can be reported publicly.

The integration of health and social care is having, and will continue to have, a significant impact on how and what we monitor and report and will require this document to be updated in the near future. However, our current arrangements are presented on the next few pages.

A summary of the various "layers" of monitoring and reporting that are required are presented below:

FIGURE 2 PERFORMANCE REPORTING



Since publishing its Corporate Plan in 2013, SBC's Corporate Performance Team has worked with colleagues within the People department to develop a set of Performance Indicators (PI) that can be reported at SBC Executive Committee and then publicly on a regular basis. An example is provided below and is published on the SBC website (**www.scotborders.gov.uk/performance**)

FIGURE 3

HOW ARE WE DOI	ROVIDE HIGH QUALITY SUPPORT, CARE AND PROTECTION O CHILDREN, YOUNG PEOPLE, ADULTS, FAMILIES, AND OLDER PEOPLE OW ARE WE DOING? Jly 2016 - September 2016:						
SELF-DIRECTED SUPPORT APPROACH 41.0% of adults are using the Self-Directed Support approach (at end Sep 2016)	DOMESTIC ABUSE 4448 reported incidents of domestic abuse	CRIMES AND OFFENCES 1551 group 1-5 crimes and offences were recorded	WELFARE BENEFITS SERVICE 716 people contacted our Welfare Benefits Service receiving over £2.16m in additional benefits	sector). The key purpose of the IRD is to determine the need for a Child Protectio Investigation, action necessary to suppor this Isuch as the need for a medical examination etc.] and the need for any immediate protective action by co- ordinating information across agencies.			
SB (Sep '15) 14.8% support • independence Our performance during (SB 02 15/16 1516 • health • support	SB 02 15/16 696 independence	joined-up care • health			
CARE AT HOME 76% of adults laged 65yrs+) received care at home compared to a care home /residential setting (at end Sep 2016)	LOOKED AFTER CHILDREN 220 Looked after children (at end Sep 2016)	ADULT PROTECTION During 02 2016/17 66 concerns were raised (up from 54 02 2015/16)	CHILD PROTECTION 138 inter-agency discussions (Initial Referrals Discussions) concerning the safety of a child held	SERVICE ECONOMY EXCELLENCE ECONOMY ASSETS AND RESOURCES & S. S. ATTA ACHIE			
(above our target of 70%) NEW SERVICE USERS 97%	(up from 218 at 02 2015/16) 869% of tooked after children (across all ages) were living within a community family-based	40 investigations were carried out (up from 23 02 2015/16) 8	(up from 87 from 02 2015/16) 666 children on the Child Protection Register (at end Sep 2016)	WORKFORCE			
of new service users received a service within 6 weeks of assessment (at end Sep 2016)	placement (at end Sep 2016)	case conferences were held					

Reporting for the Integrated Joint Board (IJB), aligned to the 9 Local Objectives within the Health and Social Care Strategic Plan, is currently being developed, pulling from a range of performance information from both SBC and NHS Borders both at a strategic and local level.

The table below expands on the performance reporting pyramid presented in Figure 2 and as well as showing the various "layers" of reports, it shows who each report is aimed at, frequency and purpose/content.

AUDIENCE	REPORT	FREQUENCY	PURPOSE / CONTENT
Public Performance Reporting	Health and Social Care News Update SB Scene	Quarterly	Public interest information on performance, inspections, consultation, pilot projects, staff achievements
	SB Connect	3 times a year	Where relevant to articles and features, performance information is provided within this publication (Did you know? infographics), as well as features on how we monitor performance.
	Council Website	ongoing	Performance information is co-ordinated through performance page, including clear links to Executive Committee papers (www.scotborders.gov.uk/performance). This page links to the "Scottish Borders Performs" portal (public facing part of Covalent), benchmarking data, as well as significant performance reports produced within services
Council Committees	Corporate Performance Report (based on Corporate Plan priorities)	Quarterly	Quarterly reports to the Council's Executive on the delivery of the Corporate Plan. Performance indicators are presented under the 8 corporate priorities, using a combination of Infographics, technical graphs and commentary from within services. (www.scotborders.gov.uk/performance)
	Local Government Benchmarking Framework	Annual	Annual comparison exercise where Scottish Borders Council performance is compared with the other Local Authorities against a range of performance measures. The measures are largely taken from returns already submitted to other bodies (Scottish Gvt, SEPA, CIPFA etc), combined with financial information from the Local Finance Return (LFR), and SBC is still required to make a separate return on 11 measures within the Framework.
	Report of the Chief Social Work Officer	Annual	Report providing an account of decisions taken by the Chief Social Work Officer in the statutory areas of Fostering and Adoption, Child Protection, Secure Orders, Adult Protection, Adults with Incapacity, Mental Health and Criminal Justice. Overview of regulation and inspection, workforce issues, social policy themes, and key challenges for the service.
Integrated Joint Board	Integration of Health and Social Care	Annual	An annual performance report, which will set out how the Scottish Borders Health and Social Care Partnership is improving the national "Health and Wellbeing" outcomes. These reports need to include information about the core suite of indicators (under development), supported by local measures and contextualising data to provide a broader picture of local performance (first report is due end July 2017). The intention is to provide quarterly reports on performance to the IJB, currently under development.
Corporate Management Team (CMT)	Corporate Performance against Corporate priorities	Quarterly	Regular performance reports, on the delivery of the priorities in the Corporate Plan, including action being taken to maintain or improve performance. (This includes performance information on Social Work complaints)

AUDIENCE	REPORT	FREQUENCY	PURPOSE / CONTENT
People Department Management Team	 People Department Performance Summary: Children and Young People Health and Social Care* Criminal Justice 	Monthly	Review of Corporate Management Team Indicators across the whole People Department. See Appendix 1 for service indicators in relation to Adult Social Care; and Health Care. Many of the indicators within this report will be pulled into reporting for the Integrated Joint Board.
	Health and Social Care Management Information	Monthly	Adult Protection; Self Directed Support (SDS); Corporate Appointees; Health information etc.
Adult Social Care	Mental Health Scorecard	Monthly	Information on staff PRD, sickness, mandatory training completed, case file audits, service reviews, corporate appointee and guardianship info, SDS, Referrals, waiting list and Alcohol Brief Interventions
	Mental Health Officer Activity Report	Monthly	Information on all work completed by the SBC Mental Health team.
	Learning Disability Scorecard	Monthly	Combined service (Health and Social Care) report. Completed by NHS Borders but SBC provide data on: Staff absence, mandatory training, cases allocated, case file audits, and number of Learning Disability clients using SDS
	Adult Protection Report	Quarterly & annual	Report on all adult protection referrals, investigations in detail (where event occurred, age of individual, type of abuse etc)
	Self-Directed Support Report	Monthly	Report on uptake, options, client groups affected and broken down in different ways e.g. of those who have a package, how many are using SDS approach v direct payments.
	Performance Clinic Reports (for Locality team leaders)	Monthly	Locality** information on workload; waiting lists; time taken from referral to assessment; assessment time; time from assessment to service deliver - focusing on older people and adults with Physical Disabilities.
	Scheduled Reporting for Service Managers	Weekly	Scheduled reports from "Framework" as requested by Service Managers on a specific locality basis, including names, workers etc.
Scottish Government***	Social Care Survey	Annual	High-level overview of Social Care services provided or purchase by Local Authorities in Scotland- Home Care, Direct Payments (now SDS Option 1) and Community Alarm services
	Key Monitoring Survey (Eligibility Criteria)		A survey of Local Authorities for information on Eligibility Criteria and Waiting Times for social care services.
	eSAY (Learning Disability return)		National data collection on the number of people with learning disabilities known to Scottish local authorities and the services they use.

- * This report is included at Appendix 1
- ** There are 5 localities in the Scottish Borders: Tweeddale, Cheviot, Berwickshire, Teviot and Liddesdale and Eildon (see map below). Locality performance reporting is currently being developed in line with the development of health and social care Locality Plans.
- *** In addition to the returns above, Care Homes are required to make returns to the Scottish Government



6. USING COVALENT TO CAPTURE ACTIONS AND PERFORMANCE INDICATORS (PI)

The "Covalent" performance management software offers the functionality required to effectively monitor and drive the delivery of specific action plans, audits, benchmarking, improvement plans etc.

Covalent can capture all activity (actions, sub-actions), PIs and Risks and where appropriate link these together (for example, specific actions may mitigate against risks; specific actions will affect movement within Performance indications. This enables a direct link to be seen between the work being undertaken on the ground and the resulting impact of this work.

FIGURE 4



A public facing module within Covalent is now used to present a range of performance information on the council's website- this can be found at **www.scotborders.gov.uk/ performance** and clicking on "Scottish Borders Performs"

14 | PERFORMANCE MANAGEMENT FRAMEWORK | ADULT SOCIAL CARE | SCOTTISH BORDERS COUNCIL

7. BUSINESS PLANNING

Business plans are reviewed and updated on an annual basis, aligned closely with both the financial planning process and corporate transformation programme. Plans are set over a three year period and are written at Service Directorate level. Key driver like legislation, corporate priorities, and available resources determine an individual plan's objectives, as well as improvement actions.

Each plan's objectives are then detailed and taken forward through specific actions for service managers and their staff, performance indicators and associated risks, which all get uploaded into Covalent and monitored on a regular basis.

A summary of all Service Directorate Business plans is now available on line at **www.scotborders.gov.uk/businessplans**

8. IMPROVEMENT THROUGH SELF-EVALUATION

Robust and regular self-evaluation is critical to inform and deliver performance improvement, and SBC uses the simple "How Good Is Our Council" framework, which aligns to a variety of other frameworks used across the public sector (including the Care Inspectorate Frameworks).

Self-assessment is already an integral part Adult Services so there is no requirement for the corporate approach to be used. However the evidence presented during, for example statutory inspections, will be reviewed regularly to ensure consistency across the organisation, and to provide CMT with the assurance that each service is self-aware and focused on continuous improvement, with clear evidence of improvement actions within business plans.

The following are used as part of continuous improvement and inform improvement actions required within services:

- Chief Social Work Officer Professional Assurance Framework 2016-19
- Care Inspectorate Inspections (of individual regulated services)
- Care Home reports
- External reviews e.g. around the role of the adult protection unit external
- Review of Corporate appointeeship process
- Service user and carer data

9. PUBLIC PERFORMANCE REPORTING (PPR)

The Accounts Commission now expects Councils to report a range of performance information publicly (including benchmarking) to demonstrate best value, including for the work of trusts and other alternative models of service delivery.

The Commission issues guidance each year, designed to enable councils to determine how best they present performance information for the year but the expectation is that performance information, including financial performance, should be presented in an understandable and easily accessible way. By using this PMF, SBC fulfils its statutory duty under the Local Government Act 1992, in relation to the publication of performance information.

BENCHMARKING AS PART OF PPR

The introduction of the Local Government Benchmarking Framework (LGBF), co-ordinated by the Improvement Service, requires Councils to include comparisons with other Local Authorities as part of their public performance reporting, and to link clearly to the "my local council" site where benchmarked data from all Scottish Local Authorities sits.

The LGBF is made up of a range of data drawn from a range of already collected and validated sources e.g. Local Financial Return, CIPFA return etc., as well as 11 performance indicators retained from the old Statutory Performance Indicators, where information is provided by Councils. The following indicators are compared nationally in relation to Adult Services:

- How much does my council spend on providing care to support older people to live at home (£ per hour)?
- How many people needing social work support get to choose how their support needs will be met?
- How many older people with intensive needs are supported by my council so that they can remain at home?
- How satisfied are residents with local social care/social work services?
- How much does my council spend on providing residential care for older people (per person, per week)?

Each year, SBC reviews its performance in relation to the national LGBF data as well as in relation to our "family group" (other local authorities similar to us) in order to explore areas where we can improve performance in relations to, for example, cost or customer satisfaction. Benchmarking data can be accesses at "my local council".

10. LINKS TO INDIVIDUAL WORK AND PRD

In order to ensure that an individual employee's performance and development objectives are fully aligned with the priorities of the Council, a robust and regular staff appraisal process is vital. The "Performance Review and Development" (PRD) process enables this alignment and ensures the establishment of the "Golden Thread", linking personal objectives right through to delivery of the Council's strategies, plans and priorities. It is therefore vital that all Service Directors ensure that PRD is being implemented across their service area. PRDs are recorded within Resourcelink (HR system) and reported to CMT monthly.

As part of SBC's continuing commitment to Investors in People (IIP) accreditation, a clear performance management framework, linking all levels of the planning hierarchy right through to the individual, will be necessary to evidence. This allows everyone in the organisation to see how their work contributes to the achievement of Corporate Priorities.

APPENDIX 1 HEALTH AND SOCIAL CARE PERFORMANCE SUMMARY

20 | PERFORMANCE MANAGEMENT FRAMEWORK | ADULT SOCIAL CARE | SCOTTISH BORDERS COUNCIL

ADULT SERVICES | PERFORMANCE MANAGEMENT FRAMEWORK

You can get this document on audio CD, in large print, and various other formats by contacting us at the address below. In addition, contact the address below for information on language translations, additional copies, or to arrange for an officer to meet with you to explain any areas of the publication that you would like clarified.

For more information on any aspect of this framework, please contact **strategy@scotborders.gcsx.gov.uk**



Printed in the Scottish Borders. Designed by Scottish Borders Council Graphic Design Section. KG/01/17.