DATA LABEL: OFFICIAL

West Lothian Council

PERFORMANCE COMMITTEE

SERVICE PERFORMANCE AND WLAM OUTCOME REPORT – COMMUNITY CARE

REPORT BY DEPUTE CHIEF EXECUTIVE

A.   PURPOSE OF REPORT

The report provides Performance Committee with an overview of a service assessment from the West Lothian Assessment Model process (2017/20).

It also provides a summary of recommendations from the officer-led scrutiny panel that have been identified for action and are to be delivered by the service management team.

B.   RECOMMENDATIONS

It is recommended that the Performance Committee:

1.   Note the outcome from the WLAM and Review Panel process;

2.   Note the recommendations for improvement;

3.   Agree any other recommendations that may improve the performance of the service.

C.   SUMMARY OF IMPLICATIONS

I.	Council Values	• Focusing on our customers' needs • Being honest, open and accountable • Providing equality of opportunity • Developing employees • Making best use of our resources • Working with other organisations
II.	Policy and Legal	The West Lothian Assessment Model programme is a key part of the council's Best Value Framework, ensuring that there is robust internal scrutiny and support for continuous improvement of services.
III.	Implications for Scheme of Delegations to Officers	None

IV.	Impact on performance and performance indicators	The report provides a summary of performance indicators from a key council service to support effective elected member scrutiny.
V.	Relevance to Single Outcome Agreement	The council has adopted an EFQM-based approach to performance management. This is reflected in the type of indicators used, including council indicators in the SOA.
VI	Resources - (Financial, Staffing and Property)	From existing budget.
VII.	Consideration at PDSP/Executive Committee required	Service performance is considered at the appropriate PDSP on an ongoing, scheduled basis.
VIII.	Details of consultations	None.

D. TERMS OF REPORT

D.1 Background

Self-assessment is an important part of the council's Best Value Framework, ensuring that there is rigorous challenge of performance and continuous improvement is embedded at all levels of the organisation. Regular, programmed self-assessment is also an integral part of improvement planning and preparation for external inspection.

This report provides the outcome from the self-assessment of the Performance and Improvement Service and the agreed recommendations for improvement for the service, as well as a summary overview of performance.

The WLAM applies an evidence-based, rigorous assessment model – the European Foundation for Quality Management (EFQM) framework. This requires employees to consider the long-term impact of the service in the stated strategic objectives. In detail, the service must consider the effectiveness of leadership, strategies, policies, processes and procedures and also, how effectively the service manages relationships with employees, partners and customers.

D.2 Service Overview

Head of Service: Jo MacPherson, Head of Social Policy (Interim)

Service Manager: Pamela Main, Senior Manager – Assessment and Prevention / Chief Social Worker (Interim)

Community Care comprises a wide range of services provided to adults with care needs. Services include Care at Home, Care Homes, Occupational Therapy, Sheltered Housing and Housing with Care, Support for People with Learning and Physical Disabilities and Support for People with Mental Health Problems.

The main aim of the service is to promote, enable and sustain independence and social inclusion for service users and carers. It is anticipated that an increasing number of people will seek control of their own care and support provision by accessing Direct Payments or other Self Directed Support options.

The nature of the demographic and economic challenges has highlighted the need for effective outcome focused partnership working, particularly between health and social care. Within the responsibility of the Integration Joint Board (IJB) a series of commissioning plans for each of the main client groups was developed and agreed in 2016/17. These plans are informed by a detailed analysis of needs and deploy resources with maximum effectiveness on priority outcomes and have similar main properties:

- A focus on prevention and upstream investment to avoid, delay or reduce the need for formal health and social care intervention.
- A focus on shifting the balance of care more towards community and home based care.
- A greater emphasis on personalisation, or individualised services, and a move to increased service user / carer responsibility and control over their care and support provision.

A summary of the service activities and resources is contained within Appendix 1.

D.3   Service Contribution to Corporate Priorities

Community Care is part of Social Policy and works with NHS services, through the Health and Social Care Partnership (HSCP), to deliver integrated health and care services that will improve the wellbeing, safety and quality of life for people living in West Lothian, particularly those most at risk in society.

The service makes a critical contribution to the council's number four and six corporate priorities. In particular, the service has responsibility for a number of deliverables in the Corporate Plan:

Priority 4 – improving the quality of life for older people
- Through the delivery of the Integration Joint Board Strategic Plan, older people are able to live independently in the community with an improved quality of life.
- To increase the range of available support to enable older people to achieve better outcomes by choosing and directing their own support.
- Redesigning services for older people with a focus on supporting those most in need and maximising the use of technology enabled care where appropriate.
- Developing a more sustainable service delivery model targeted to those most in need with an increased emphasis on reablement to retain or regain independence within their home or community setting.
- As part of the delivery of the Integration Joint Board Commissioning Plan for Older People, the council will focus on:
  – Improving dementia care, with particular emphasis on improving post-diagnostic support;
  – Expanding use of technology enabled care to support older people and carers of older people;
  – Supporting older people to live at home or in a homely setting for longer;
  – Ensuring specialist mental health provision for the over 65's;
  – Ensuring support needs of carers are met, particularly carers of those with dementia;
  – Developing single points of information for all older peoples' service provision.

Priority 6 – delivering positive outcomes on health
- Through the delivery of the Integration Joint Board Strategic Plan, increase

well-being and reduce health inequalities across all communities in West Lothian. Locality planning will provide a key mechanism for strong local, clinical, professional and community leadership.

- Improving our approach to integrated models for mental health services for children, young people and adults recognising the importance of mental health and wellbeing on people achieving positive outcomes.
- Improving support to carers over the next five years through improved identification of carers, assessment, information and advice, health and well-being, carer support, participation and partnership.
- Delivering effective and integrated equipment and technology solutions to promote independence, support the ongoing shift in the balance of care, reduce and prevent hospital admissions and facilitate speedier hospital discharge.
- Improving the health and well-being of service users through rehabilitation and reablement, which will, in turn, have a positive impact on carers.

Service contribution to the Corporate Plan will be delivered through a range of policies and procedures, with progress reported through the Corporate Plan scorecard (and the monitoring arrangements in place).

D.4   West Lothian Assessment Model

The service went through the West Lothian Assessment Model process in 2017/18, with a representative group of employees from the service critically evaluating the service effectiveness in the nine criterion parts of the assessment model.

The service scored a total of 528 (out of 1,000). This was an improvement on the service score in the last programme (2014/17) and above the current council average. To date, a total of 20 services have been assessed in the council's rolling three-year programme.

An overview of the service's scores in the last four cycles is set out in table 1. The trend column is based on a comparison between the base position (2008/10) and the current WLAM score.

Table 1: WLAM Scores (2008/10 to 2017/20)					
WLAM Criteria	2008/10	2011/13	2014/17	2017/20	Trend
1 Leadership	48	62	72	64	⬆
2 Strategy	34	59	65	62	⬆
3 People	41	52	52	62	⬆
4 Partnerships and Resources	44	58	58	65	⬆
5 Services and Processes	65	57	47	64	⬇
6 Customer Results	60	24	45	64	⬆
7 People Results	25	5	29	40	⬆
8 Society Results**	8	20	40	50	⬆
9 Business Results	71	30	50	59	⬇
Total score	**396**	**367**	**458**	**528**	⬆
WLC average total score	385	411	468	525*	

* WLC Average to date (based on 20 assessments)
** Criterion is scored corporately and uses validated scores from external EFQM assessments.

Compared to the previous cycle, the service has improved scoring in the 2017/20 cycle in all but two criteria (leadership and strategy). Relative to other council services, the total score for Community Care of 528 is very close to the current council average of 529 and each criterion is generally plus or minus one or two points from the average. Therefore, the service consistently achieved the expected good level of performance in each criterion.

To increase scoring above the current average, Community Care needs at least incremental improvement in the way that service leadership and planning activities are undertaken. Also, like many other council services, the service should develop the results it has in place to monitor employee policies and plans (People Results).

Results may be improved with a review of target setting rationale and by increasing the use of benchmarking data with relevant comparators. Thought there are indicators in relation to Self Directed Support, the proportion of older people with intensive needs supported at home, cost of care services and satisfaction with care services are included within the Local Government Benchmarking Framework (LGBF).

D.5   Review Panel Outcome

The Review Panel in the WLAM Programme 2017/20 has three possible outcomes that will identify the progress and risk level of service performance and subsequently, the level of scrutiny that will be applied to the service during the period of the WLAM programme (three years).

The Review Panel outcome is determined by a Panel of three senior officers and is chaired by the Chief Executive.

Table 2: Review Panel Outcome		
Review Panel Cycle		
Cycle 1	The service will return to the panel within three years	
Cycle 2	The service will return a report to the Panel within 12 months, who will determine if the service are to move to Cycle 1 or 3	✓
Cycle 3	The service must return to the Review Panel no later than one year (12 months) from the date of the last report.	

Community Care was placed on **Cycle 2** by the Review Panel in July 2018. The service will return a report (against the recommendations) to the Panel in 2019/20 and the Panel will determine if the service will move to Cycle 1 or 3.

The Panel determined this outcome as it recognised the immense value of this service to the community and the direct contribution to corporate performance. Also, that there are significant challenges (national and local) in the years ahead in relation to how care services for older and vulnerable people are funded and delivered.

Performance management
Performance management standards have been established to help the Panel consistently identify good or poor practice in relation to performance management and to help services address any deficiencies in their performance or management approaches. The following table sets out the evaluation for the service:

Table 3: Evaluation of Performance Management in the service	
Management standard	**Service evaluation**
Scope and relevance of performance data	The service have identified PIs to monitor progress in the key activities and outcomes/ priorities
Compliance with corporate requirements	The performance framework of the service meets the basic corporate requirements
Approach	The service's approach to managing performance is sufficient and will help the service to improve
Management of data	Most managers and team leaders engage with the performance culture and take responsibility for managing performance
Management of information	Performance is reported and communicated to most key groups (including; Elected Members, senior officers, employees and the public)
Performance trends	PIs show good performance and the panel has confidence that this will continue to be sustained by the service
Targets and thresholds	Targets and thresholds have a clear rationale for most PIs and support performance management and improvement
Benchmarking	The service has comparative data for the PIs that measure some of the key activities and outcomes/ priorities and the service compares well
WLAM score	The service achieved a score of over 500 in the WLAM process

As well as the additional scrutiny, there is ongoing monitoring and reporting of service performance through internal performance management procedures. The service will also continue to report key performance publicly and through agreed committee performance reporting arrangements.

D.6   Recommendations for Improvement

A number of recommendations have been set out for action by the service to improve performance.

The Review Panel key findings and recommendations for the service are:

1. The Panel noted the immense value of the service to the community and the positive impact of the management team on how the service operates.

2. The Panel noted the performance of delayed discharge from hospital in West Lothian and that the current target is challenging to achieve, especially when prioritising the health and wellbeing of the patient. The service is to monitor and improve performance, where possible, in this measure.

3. It was acknowledged by the Panel that workforce planning is vital to the continued performance of the service and in some teams there are challenges in the labour market when attracting and retaining employees. Work should continue to better promote the service as a potential employer in future recruitment activity.

4. The Panel noted that a range of measures were being pursued by the service with support from HR Services to improve sickness absence levels. The Panel

encourage the service to reduce absence levels through effective application of the policy, monitoring arrangements and proactive management and support.

5. The Panel noted the positive improvement in five out of the seven staff survey results in 2017/18 and encouraged the service to continue to embed appropriate recognition for the strong commitment shown by staff.

6. The service should review the customer engagement approach with the aim of improving the response rates to customer satisfaction surveys.

7. The service should ensure trend chart commentary provides a clear explanation of trends, giving details of the reasons for dips and peaks in performance.

8. The service should continue to review targets and thresholds set for performance indicators, ensuring they encourage improved levels of performance.

9. The service should continue to develop the benchmarking approach, identifying appropriate benchmarks and using this to improve performance.

Progress in these actions will be reviewed in a report to the next Review Panel (quarter 1 of 2019/20).

D.7   Service Performance

The service has a total of 68 performance indicators on the council's performance management system (Pentana). At present, the status of those indicators are as follows:

Summary of Performance Indicator status (RAG)	
Status (against target)	Number of PIs
✅ Green	53
⚠️ Amber	7
🔴 Red	7
❓ Unknown	1

An overview of the performance indicators categorised as Public or High Level for the service is included in Appendix 2.

D.8   Service Benchmarking

There are four indicators in the Local Government Benchmark Framework (LGBF) that are aligned with the activity of Community Care. The data for 2017/18 has not yet been published by the Improvement Service, however the performance and ranking information for 2016/17 has been provided below.

SW1 – Home care costs per hour for people aged 65 or over
West Lothian Council had an average cost of £28.73 per hour in 2016/17. This cost was higher than the Scottish average of £22.54 and ranked at 27 (out of 32) overall in Scotland.

<u>SW2 – SDS spend on adults 18+ as a percentage of total social work spend on adults 18+</u>
A total of 1.90 percent of Social Work spend for adults in West Lothian was through Self Directed Support (SDS). This was lower than the Scottish average of 6.48 percent and ranked at 30 (out of 32) overall in Scotland.

<u>SW3 – Percentage of people aged 65 or over with intensive needs receiving care at home</u>
A total of 35.20 percent of adults aged 65 or over with intensive needs in West Lothian received care at home in 2016/17. This was marginally lower than the Scottish average of 35.27 percent and ranked at 14 (out of 32) overall in Scotland.

<u>SW5 – Residential costs per week per resident for people aged 65 or over</u>
West Lothian Council had an average cost of £394.73 per week in 2016/17. This cost was higher than the Scottish average of £375.06 and ranked at 20 (out of 32) overall in Scotland.

The Community Care Service also actively engages with National and Local Groups to share best practice and learn from emerging issues in other areas. In addition to National Performance data, examples include;

- Care at Home cost and contract design
- Lothian Learning Disability Collaboration
- Redesign of Rehabilitation Pathways – Lothian Health and LA Partners
- Self Directed Support National Practitioners Forum

E.   CONCLUSION

Community Care completed the WLAM process as part of the council's corporate programme of self-assessment. This is a critical part of the council's internal scrutiny arrangements and helps to ensure that excellent practice and performance is supported and that the principle of continuous improvement is adopted in all council services.

The service achieved a total score of 528 and was placed on Cycle 2 by the Review Panel and will not return to the Review Panel until the next programme (2020/23).

BACKGROUND REFERENCES

West Lothian Council Corporate Plan 2018/23
West Lothian Council Improvement Strategy 2018/23
Social Policy Management Plan 2018/19

Appendices/Attachments: 2
Appendix 1_Social Policy Management Plan Extract
Appendix 2_Performance Indicator Report

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