## Orkney Health and Care- Service Area Strategic Commissioning Plan Actions

<u>Please note</u> – work to ensure targets are SMART to support evidence based planning and effective scrutiny is ongoing and in some cases it is not possible to provide performance information against the current targets as set. Where detailed information is available this has been provided and in some cases the RAG system has been used to provide high level feedback where detailed targets and assessment are not yet available. The next iteration of this performance report will use more measurable targets and will therefore be more detailed and specific.

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
SCP Section 3.Children and Families Service	s		
3.1 The Orkney Health and Care Board will commission increased home visiting offered by Health Visitors	The Children and Young People (Scotland) Act 2014 NHS Orkney LDP Children's Outcome	Green	Health visiting Universal Pathway currently being implemented.  All families with babies born since May 2016 are on the new pathway.
3.2 The Board expects its service providers namely NHS Orkney and Orkney Islands Council to implement the named person legislation and the services offered to families from birth through a single point of contact		NA	Currently on hold due to further Scottish Government consultation on implementation.
3.3 The Board wishes to be kept informed of the impact of the healthy weight initiatives and child healthy weight programmes, provided by NHS Orkney on an individual and school basis.	NHS Orkney LDP Children's Outcome 1	Green	School screening continues to monitor obesity rates.  This target will be defined differently in the

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
	National Health and Wellbeing Outcome 4		coming year to be more focused on monitoring impact and change.
3.4 The Board, through its participation in the Community Planning Partnership Board, will both influence and inform the Early Years Collaborative projects and initiatives	Getting It Right for Every Child and the Integrated Children's Services Plan Children's Outcome	Green	Staff are actively engaged in these projects and initiatives.  Staff are routinely using Early Years Collaborative test of change methodology when looking at any service development / review.
3.5 The Board will continue to invest in on-line parenting support information hosted on the Orkney Communities website  Internet and social media will be used more to offer services	Local Parenting Strategy  Children's Outcome 1	Amber	Progress has been made but not there have been some delays.  Orkney Children and Young People's Partnership website will be hosted under Orkney Health and Care's site on the Orkney Islands Council website.  Parenting information will be a sub section and information has been collected to link to this.  Currently this is being transferred into an accessible format to go on the website.
3.6 The Board wishes to be kept informed in regard to NHS Orkney's baby friendly accreditation status and the ongoing participation in the Maternity patient safety programme	NHS Orkney LDP Children's Outcome 1	Green	Currently have accreditation.  Baby friendly re-accreditation due week 4 <sup>th</sup> April 2017.

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
			Maternity are liaising with the assessor regarding re-accreditation.
3.7 The Board will continue to invest in the development of the Intensive Fostering Service and core Fostering Service.	OIC (Council) Plan	Green	The Intensive Fostering service continues to be operational and the timescale for the services has been extended. The availability of these additional placements
In addition, the Board wish to get in right for all children being formally 'looked after' in any settings	Children's Outcome 2		has enabled a number of residential and out of area placements to be avoided.
	National Health and Wellbeing Outcome 9	Amber	Progress is being made on developing 'Getting it Right' measures. Use of the 'wellbeing wheel' to measure outcomes is to be tested. Work continuing in this area.
3.8 The Board will look for evidence from OIC and NHSO that demonstrates work being done on preventative approaches and early identification of children at risk, to enable service providers to work with families at an earlier stage	Getting it Right for Every Child Children and Young People (Scotland) Act 2014	Green	Social work case record sampling evidences high level of direct contact and early intervention work and positive balance between statutory and non statutory case work.
	Children's Outcome 2		The establishment and further development of the Family Support Team to provide family based interventions, specialist parenting and therapeutic support to prevent family/ relationship breakdown including supporting kinship care evidences a prioritisation of preventative and early intervention work.

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
			A good range of third sector providers deliver services focused on preventative and early intervention in Orkney.
3.9 The Board expects to see a reduction in the use of formal care and protection proceedings, following on from the actions above	OIC (Council) Plan Children's Outcome 2 National Health and Wellbeing Outcome 9	Green	The continued development of systemic and family based interventions is aimed at reducing the number of formal proceedings over a three year period. Work is progressing well in this area.  Looked After Children numbers have remained stable over the past 12 months with a shift in balance away from those looked after away from home to those looked after at home.  This target requires to be revised as it does not take account of impact of changing need for services.
3.10 The Board expects, through its funding of the services above, to see both NHSO and OIC practitioners being supported to focus their time on preventative and therapeutic interventions	Getting it Right for Every Child  Children and Young People (Scotland) Act 2014  Children's Outcome 2	Green	Social work case record sampling evidences high level of direct contact and early intervention work and positive balance between statutory and non statutory case work.  There has been an in year reduction in numbers of referrals to the Reporter to the Children's Panel.

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
3.11 The Board will commission and support the development of systemic therapy approaches	Getting it Right for Every Child Children and Young People (Scotland) Act 2014 Children's Outcome 2	Green	Training programme rolled out and year one evaluated. Evaluation feedback was provided via a report and presentation to Orkney Childcare and Young People Partnership February 2017.  Continued funding for 'Consult to Practice' of a qualified systemic family therapist supporting supervisors to progress systemic practice and ideas through supervision of practitioners.  An evaluation of this to be undertaken and reported by October 2017.
SCP Section 4. Criminal Justice			
4.1 The Board will oversee the establishment of a Shadow Orkney Community Justice Partnership in 2016-17	The Community Justice (Scotland) Bill, (Scottish Parliament in 2016)  National Health and Wellbeing Outcome: 9	Green	Shadow OCJP established

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success		
4.2 The Board will direct the development and delivery of a local plan for commencement in April 2017	The Community Justice (Scotland) Bill, as passed by the Scottish Parliament in 2016  National Health and Wellbeing Outcome: 9	Green	Work underway and on time to complete required local plan for due date		
SCP Section 5.Primary and Community Care	SCP Section 5.Primary and Community Care Services				
5.1 The Board will invite NHSO to Investigate ways that self-help and self-management information can be more easily available through the use of on line provision such as NHS 24 – 'Living it up' and other sources such as podcasts, and promotion of these routes	National Health and Wellbeing Outcomes: 1, 2, 7 and 9	Amber	A large range of local service information is available on line, through the 'A Local Information System for Scotland' (ALISS) platform and podcasts have been used.  Feedback indicates more work is required to ensure people can be signposted to these options and that the information in them is up to date.		
5.2 The Board will commission NHSO to work with communities to support the delivery of the falls prevention programmes in the Isles.	National Health and Wellbeing Outcomes: 1, 2, 7 and 9	Amber	Sessions have been delivered on the isles and local service is linked into the national falls and frailty work.  Work underway through a data sharing agreement with Scottish Ambulance Service to enable a better understanding of falls and people at risk of falls in Orkney.		
5.3 The Board will commission NHSO to	National Health and		Establish third sector personal foot care		

Link to national and or local priorities	RAG	Performance to date and how we will measure success
Wellbeing Outcomes: 1, 2, 5 and 9	Green	service – this is now in place and enables an increase in the number of people attending an appropriate alternative to the NHSO service.  Reduce the waiting time for people
		receiving NHS podiatry services. No patients waiting over 84 days for an appointment.
		The Podiatry service has completed a considerable amount of work ensuring the caseload is compliant with national guidelines on foot care so the most clinically appropriate cases come to the NHS service.
		A programme of foot care education has been implemented and people with low level need are given information on alternative providers.
		Good progress in working to achieve waiting times.
National Health and Wellbeing Outcomes: 1 and 9	Amber	Work is underway to develop national operational measures to inform this work. Local work will follow.  Are already looking at use of local data to
	Vellbeing Outcomes: 1, 2, 5 and 9  National Health and Wellbeing	Wellbeing Outcomes: 1, 2, 5 and 9  National Health and Wellbeing Amber

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
5.5 The Board will commission NHSO to increase anticipatory care planning to contribute to reducing emergency admissions and readmissions in people over 75 years of age	National Health and Wellbeing Outcomes: 2, 6 and 9 Out Of Hours Review and GP Contract	Green	Increase in number of Anticipatory Care Plans in place – recent inspection activity identified Orkney as performing well in relation to the number of ACPs in place per file inspected against other areas inspected. Work is ongoing in this area.
5.6 The Board will commission OIC to provide equipment aids and adaptations to support people to live longer healthier lives in their own homes	National Health and Wellbeing Outcomes: 2 and 9	Green	Equipment is being delivered without delay
5.7 The Board will commission OIC and NHSO to provide enabling services that help people to manage their lives as best they can, in their own homes	National Health and Wellbeing Outcomes: 2 and 9	Amber	Although a number of services are focused on taking an enabling an re-abling approach and training has been provided widely across services on this ethos, it has been identified that capacity issues within services can at times constrained the extent to which the is actively promoted in practice.
5.8 The Board will commission NHSO and OIC to work together to prevent unnecessary hospital admissions and for those patients presenting at A/E to achieve the 4 hour waiting time standard	National Health and Wellbeing Outcomes: 2 and 9	Green	Targets currently being met
5.9 The Board will commission the analysis of a pilot job role specifically focused on ensuring	National Health and Wellbeing	Amber	Recruitment process underway – delay in implementing the approach as first round of

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
Third Sector services are properly taken into account and involved in supporting hospital discharges and avoiding unnecessary hospital admissions	Outcomes: 2 and 9		recruitment was unsuccessful
5.10 The Board will commission analysis of the West Mainland residential care bed pilot supported by West mainland GPs, Out of Hours GPs and in/out of hours community nurses and social care staff to determine future viability	National Health and Wellbeing Outcomes: 2 and 9	Green	Analysis complete and reported to the Strategic Planning Group. Pilot continuing
5.11 The Board expects service providers along with Third Sector partners to establish a locality planning approach that includes people who use services and carers in planning and monitoring services using virtual engagement where appropriate	National Health and Wellbeing Outcome: 3  Clinical Strategy  Our Voice: working together to improve health and social care	Amber	Locality planning approach under development. Complete round of visits undertaken in 2016 / 2017 and plans set out for 2017 / 2018 approach but overall development has been slower than anticipated.
5.12 The Board will commission the Council and NHSO to continue the programme of dementia skills training in care settings and continue to develop dementia champions	National Health and Wellbeing Outcome: 4	Green	Dementia training continues to be delivered
5.13 The Board will commission Council led improvements in the capacity and quality of the environment of residential care, bringing bed numbers closer to national average ratios for	The Council Plan Priority 1 – Care and support for those who need it	Green	Replacement programme for two new care homes approved

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
our population and meeting the need for additional residential care capacity	National Health and Wellbeing Outcome: 9		
5.14 The Board will continue to participate in the Community Planning Partnership's priority areas notably: positive aging and healthy and sustainable communities.	National Health and Wellbeing Outcome: 5 CPP measures as described in the LOIP	Green	Participation is ongoing and monitored by sub-groups
5.15 The Board will commission the Council and NHSO to establish a rural generic support worker role, deliver the role, and evaluate its effectiveness	National Health and Wellbeing outcome: 8 and 9	Green	Role developed and recruited to as a pilot.
5.16 The Board will commission NHSO to provide technology led care to improve self management especially for patients with long term conditions and to support repatriation of services	National Health and Wellbeing Outcomes: 1 and 9 2020 Vision e-Health strategy NHS LDP	Amber	Progress has been made in making VC consultation opportunities more widely available but ability to further progress this is dependent on suitability of nature of consultation and agreement of clinical lead to revised ways of working, based on professional assessment.  Further work is planned in this area using a range of different approaches.
5.17 The Board will commission the Council to pilot the use of 'pool cars' in the care at home services	National Health and Wellbeing Outcome: 9	Green	Pilot in progress

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
5.18 The Board expects to see a review of the senior staffing model in care homes, and physical disability and learning disability services, to identify the best structure to support staff and meet service needs	National Health and Wellbeing Outcome: 9	Amber	In progress but complicated by a range of regulatory factors leading to longer time scale
5.19 The Board will commission the Council to review Orkney's care at home service to further improve access to the service	National health and wellbeing outcomes: 2, 3, 4 and 9	Green	Review undertaken and action plan developed. Report to Board in due course.
5.20 The Board will commission NHSO to continue its review of Public Dental Services to further implement a General Dental Service to increase registration numbers and reduce expenditure	LDP  National health and wellbeing outcomes: 4 and 9	Green	Good progress made in increase in general dental services and changes implemented to reflect the shift resulting in reduced expenditure
5.21The Board will seek evidence from NHSO that prescribing is both effective and efficient	LDP  National health and wellbeing outcomes: 4, 7 and 9  Prescription for Excellence	Green	Work to review and continue to develop prescribing practice is ongoing supported by Pharmacy and GP practices.
5.22 The Board expects all providers to be aware of PREVENT training initiative and of programmes to deal with any	Scottish Government specific requirement	Green	Actively being rolled out

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
individual who is vulnerable to being drawn into terrorism/radicalisation	National Health and Wellbeing Outcomes: No 7		
SCP Section 6.Services for People with Learn	ning Difficulties		
6.1 The Board will support and continue to commission the investment made in developing Learning Disabilities specialist health services to address health inequality and health access issues for this population including offering annual health checks	National Learning Disabilities Strategy: 'Keys to Life' National Health and Wellbeing Outcomes: 3, 5, 8 and 9	Green	Successful recruitment drives have taken forward the recruitment of a Band 6 Learning Disability Nurse and an OT for the Learning Disability Service (AADS). Post holders have commenced work.  Grampian LD Obligate Network have agreed to refocus/reframe the specialist support and advice they offer in the light of Orkney's new LD nurse post.
6.2 The Board will commission the Council to develop a plan for the diversification of accommodation and independent living support models and resources for people with learning disabilities	National Learning Disabilities Strategy: 'Keys to Life  National Health and Wellbeing Outcomes: 2  Council Plan Priority One – Care and Support for those	Amber	The Learning Disability Service has commenced activity to re-frame and repropose a case for a Supported Living Network within a core and cluster model. Capacity challenges have resulted in slippage from originally envisaged timescale.

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
6.3 The Board will continue to participate in the Community Planning Partnership's priority areas notably: healthy and sustainable communities and in particular contribute to the creation of social enterprise opportunities	who need it National Learning Disabilities Strategy: 'Keys to Life National Health and Wellbeing Outcomes: 2	Amber	The Learning Disability Service will continue to drive work forward towards social enterprise opportunities particularly utilizing expertise and opportunities available within the Picky Centre complex. This is progressing with involvement from Employability Orkney. Capacity challenges have resulted in slippage from originally envisaged timescale.
6.4 The Board invites service providers to offer employability options and pathways for people with learning disabilities	National Learning Disabilities Strategy: 'Keys to Life  National Health and Wellbeing Outcomes: 4	Green	The Learning Disability Service has recently appointed an Learning Disability Employability Lead who has commenced work with our existing Employability Coordinator and Employability Strategic Pipeline Officer to consolidate the pathway and expand employability options for people with learning
SCP Section 7. Mental Health Services			
7.1 The Board will commission NHSO to provide mental health services that focus on enabling timely access to services for those who need them through meeting the Scottish Government standards for access to treatment The Board wishes to see services focussed on	Scottish Mental Health Strategy 2012-2015 National Health and Wellbeing Outcome: 4	Amber	Work on reviewing systems (in terms of the managing of demand, access and capacity) has been limited due to capacity challenges within the service. Work will continue in 2017 / 2018.  Child and Adolescent Mental Health
ensuring systems (in terms of the managing of		Green	Service waiting times targets are

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
demand, access and capacity) are effective and support the provision of timely care			consistently met.
In addition, the Board wish to complement traditional mental health services with access to timely psychological therapies		Red	Psychological Therapy waiting times targets have not consistently been met during the year.
For children and young people, the Board will commission CAMHS services that are accessible including, were necessary, out of area placements			
7.2 The Board will commission NHSO to establish a psychiatry service for the people of Orkney that works in partnership as part of the regional planning in the North and that is not dependent on the use of locum cover	National Health and Wellbeing Outcomes: 4 and 9	Amber	There is a UK wide recruitment difficulty caused by lack of supply of consultant psychiatrists. This is causing a position where current provision is dependent on locum provision. We continue to work with NHS Grampian to identify locum cover in the short term whilst exploring opportunities for a regional approach to psychiatry.  A consultant psychiatrist has been appointed on a 6 month contract from March 2017.
7.3 The Board will commission NHSO to improve access to mental health services and	National Health and Wellbeing	Amber	Performance in this area has been variable.
reduce unnecessary travel by promoting an increase in the use of VC consultations where appropriate	Outcomes: 4 and 9		The confidence of individual locums with the use of video conference impacts on this target though CMHT professionals routinely

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
			use VC for appointments especially on the isles.  Negotiations are underway to provide specialist dementia psychiatry via VC clinic with NHS Grampian.
7.4 The Board will commission NHSO to establish a peer support approach.  NHSO will be encouraged to test this change through a pilot involving the Third Sector. The pilot will focus on supporting people to integrate back into Orkney following discharge from an out of area placement	Scottish Mental Health Strategy 2012-2015 National Health and Wellbeing Outcomes: 4 and 9	Green	Underway
7.5 The Board will commission service providers notably NHSO to respond to the independent review of the Community Mental Health Team (CMHT) service  NHSO are invited to develop a service options paper by end June 2016 which addresses the recommendations from the review	Scottish Mental Health Strategy 2012-2015  National Health and Wellbeing Outcomes: 1, 2, 4 and 9	Amber	The work is underway but the timescale has been missed.  A follow up piece of work to the original review has been undertaken.  A recent CMHT away day has developed a strategic deployment matrix to address service improvement demands including outputs of the second review.  Delivery against this plan will now be monitored monthly.  Additional recruitment has responded to

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
			the pressure the service was under.
7.6 The Board will commission NHSO to strengthen psychological therapies input into the CAMHS service and support additional CAMHS capacity and the welfare of CAMHS client group. The Board wishes to see this delivered through a 2 year pilot funded through the NHS mental health innovation fund that sees a Clinical Associate in Applied Psychology (CAAP) working with the CAMHS team and key stakeholders such as education services  In addition the Board wish to see a strengthening of psychological therapies direct referral input into Primary Care and enhanced collaborative working through the establishment of a (CAAP) Primary Care worker post and a consequent development of psychological therapy capacity in Primary Care and the Third Sector. This 2 year pilot will also be funded through the NHS Mental Health Innovation Fund	Scottish Mental Health Strategy 2012-2015.  Health and Wellbeing Outcomes: 1, 2, 3, 4, 5, 7, 8 and 9  Council Plan, Priority One	Green	Both posts have been recruited to and post holders are delivering on the objectives of the role.  Feedback from stakeholders is positive.
7.7 The Board will commission NHSO to provide appropriate interventions to people who use substances to excess based on harm reduction and recovery focused principles, and best evidence	National Health and Wellbeing Outcomes: 1, 2 and 4	Green	Currently meeting the 3 weeks referral to treatment NHS HEAT Standard for people who misuse substances.  Use of national Recovery Outcome Web

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
			measure is in place to ascertain recovery outcomes from both objective and subjective recording.
7.8 The Board will commission support for people with a diagnosis of dementia by ensuring a year of targeted support post diagnosis through the multi-disciplinary team  In addition, the Board expects NHSO to improve access to support and advice for carers of people who have recently received a diagnosis through the routine offering of a referral for a carer's assessment	The national dementia strategy 2013 – 2016  National Health and Wellbeing Outcomes: 1, 2 and 4	Green	Services are meeting the one year NHS HEAT Standard post diagnostic support target for people with a diagnosis of dementia. However dementia diagnosis rates remain under expected levels using national prevalence data.  Work is being done on clearly defining the concept of post diagnostic support within the overall dementia care pathway which is being refreshed.
		Red	It has been established that carers are not currently routinely being offered assessment. Work to address this has commenced.
SCP Section 8. Services for Carers			
8.1 The Board will commission the Council and NHSO to provide a range of accessible information to carers	National Health and Wellbeing Outcome: 6	Amber	A range of information available but more required in relation to provision of assessments
The Board expects carers support needs to be recognised and carers to be offered their own assessment routinely	GP Patient Experience Survey	Red	It has been established that carers are not currently routinely being offered assessment. Work to address this has commenced.

Commissioning the future direction for the service	Link to national and or local priorities	RAG	Performance to date and how we will measure success
8.2 The Board will expect NHSO to update/develop and agree a Carers strategy in collaboration with services users and carers, and Third Sector partners.	National Health and Wellbeing Outcome: 6	Amber	This work is underway but not yet completed.
The Board will also use the outcomes from the Orkney College commissioned survey of Carer's needs to inform the development of the strategy		Green	The outcome of the survey is being taken into account in the development of the strategy but caution is required re statistical validity due to small sample.
8.3 The Board will expect NHSO and the Council to involve carer's representatives in service planning. The Board will support carers to engage in its Strategic Planning Group and Board	National Health and Wellbeing Outcome: 6	Amber	Unable to recruit carer rep to the IJB but mitigated by inviting carer service rep
8.4 The Board will expect NHSO and the Council to actively work with carers and undertake or arrange for assessments for unpaid carers to ensure they are supported and recognised as equal partners in care	National Health and Wellbeing Outcome: 6	Red	It has been established that carers are not currently routinely being offered assessment. Work to address this has commenced.
8.5 The Board will seek comment and respond to the anticipated new Carers Act when enacted	9 National Health and Wellbeing Outcome: 6	Green	Evidence of consultation on new Act and guidance

## RAG key

**Red** - the performance indicator is experiencing significant underperformance, with a medium to high risk of failure to meet its target.

Amber - the performance indicator is experiencing minor underperformance, with a low risk of failure to meet its target.

**Green** - the performance indicator is likely to meet or exceed its target.

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
	Local Delivery Plan S	Standards			
Antenatal care	At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation	1,4	100% (Nov)	92.31% (Dec)	1
Narrative: This target has be Scottish target of 80% since	een met in all the reporting periods of the year 20 July 2011.	016 - 2017 so far. Ork	ney has been co	nsistently abov	e the
CAMHS	90% of young people to commence treatment for specialist Child and Adolescent Mental Health service within 18 weeks of referral	4,7	100% (Q2)	100% (Q3)	<b>*</b>
performance in other partner	onsistently been met since it was introduced. Ork ship areas. There have been some complication ting to the Scottish Government on performance	s around data process	sing and systems	changes which	n have
Psychological Therapies	90% of patients to commence Psychological therapy based treatment within 18 weeks of referral	1,3	N/A	N/A	<b>*</b>
deliver these therapies. Ther	I his area in the current year has been variable as e have been some issues around data processir rovided but we are aware that targets have not b	ng affecting reliability of			
Dementia Diagnosis	All people newly diagnosed with dementia will have a minimum of a year's worth of post-diagnostic support	2,4	100% (Q2)	100% (Q3)	<b>*</b>
	I  f providing post diagnostic support has consister upport are lower than would be expected based .				

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
GP access and booking	Provide 48 hour access or advance booking to an appropriate member of the GP Practice Team	3	98.1 (Q2)		N/A
Narrative: This information is	s no longer recorded and will not be included in the	ne performance frame	ework in future		
Drug and alcohol treatment	90% of clients will wait no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	1,4	81.8% (Q1)	100% (Q2)	1
Narrative: Last year's annua	al figure was 100%				1
18 week Referral to Treatment	90% of planned/elective patients to commence treatment within 18 weeks of referral for services Commissioned by Orkney Health and Care	3,4	96% (Sep)	94.5% (Oct)	1
	ne it has not been possible to disaggregate the da ership from the total data. Work will continue on t		es under the plan	ning and perfor	mance
12 weeks for first outpatient appointment	95% of patients of services Commissioned by Orkney Health and Care to wait no longer than 12 weeks from referral (all sources) to first outpatient appointment	3,4	82.6% (Oct)	84% Nov)	1
	ne it has not been possible to disaggregate the da ership from the total data. Work will continue on t		es under the plan	ning and perfoi	mance
Alcohol Intervention	Sustain and embed alcohol brief interventions in 3 priority settings (primary care, A&E, antenatal) and broaden delivery in wider settings	4,5	41.5% (Q1)	35.5% (Q2)	1

**Narrative:** In quarter 1 there were 36 ABIs delivered against a trajectory of 59 and 15 of these were in a priority setting. In quarter 2 there were 31 ABIs delivered against a trajectory of 118, and 11 of these were in a priority setting. The LDP standard for Orkney is 249 deliveries with 80% in priority settings.

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
A&E Treatment	95% of patients to wait no longer than 4 hours from arrival to admission, discharge, or transfer for A&E treatment. Boards to work towards 98%	3,4	99% (Nov)	95% (Dec)	1
Narrative: This target is usu	ally consistently met in Orkney and the Dec repor	rt is a deviation from t	his pattern.		
Finance	Operate within the IJB agreed Revenue Resource Limit, and Cash Requirement	4,9	N/A	Projecting year end overspend	<b>*</b>
currently projected for year e	penditure Monitoring Report is issued to board meend.  Local Government Benchman		monthly briefing	note. An oversp	end is
	Reported Quarterly or	•			
Looked After Children – Weekly (residential)	The Gross Cost of "Children Looked After" in				
	Residential Based Services per Child per Week	4,9	£2291 (Q2)	£1870 (Q3)	N/A
Narrative: Service is deliver		4,9			N/A
Narrative: Service is deliver Looked After Children – Gross (residential)	Week	4,9			N/A N/A
Looked After Children –	Week  ed according to the needs of individual children.  Gross Costs (Looked After Children in Residential) (£000s)		(Q2) £219952	(Q3) £202005	

**Narrative:** Figures reflect the placement of Looked After Children according to their best interests and needs whether in residential care or in individual placements. The target can only be considered for information purposes. It is not appropriate to have a target in numbers terms as the number at any given time must be based on appropriate response to local need.

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
Looked After Children – weekly (Community)	The Gross Cost of "Children Looked After" in a Community Setting per Child per Week	9,7	N/A	N/A	N/A
	ot disaggregated from the overall child care bud by individual needs there is no meaningful way o		not be reported.	As services for I	Looked
Looked After Children – Gross (Community)	Gross Costs (Looked After Children in Community Setting) (£000s)	9,7	N/A	N/A	N/A
	not disaggregated from the overall child care bud by individual needs there is no meaningful way o		not be reported.	As services for	Looked
Looked After Children – Children (Community)	No. Of Children (community)	7	25 (Q2)	24 (Q3)	N/A
Narrative: Figures reflect the the community. Having target	placement of Looked After Children according to the subject to would not be appropriate.	to their best interests a	and needs wheth	er in residential	care or in
Looked After Children (Balance)	Balance of Care for looked after children: % of children being looked after in the Community	7	76% (Q2)	73% (Q3)	N/A
	for children to be placed in the community it has are because that is in their best interests at that		t there will be tim	nes when some	children
Homecare – 65+	Older Persons (Over 65) Home Care Costs per Hour	9	£22.57 (2015-2016)	£22.93 (2016-2017)	N/A
Narrative: Calculated annual approximately 1.6%	lly based on the actual cost of providing the serv	rice. The increase for 2	2016-2017 repre	sents an increas	e of
Homecare - Gross	Total Homecare (£000s)	9	£753,467 (Q2)	£760,648 (Q3)	***

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
Narrative: Gross spending of	on homecare for first 3 quarters of 2016-17 repres	sents 76% of the total	spend for 2015-	16	
Homecare – Hours	Care Hours per Year	2,9	82055hrs (2015-16yr)	21196 (2016-17 Q3)	<b>+</b>
	actual hours delivered for the quarter. Comparal applicated from a snapshot of the last week of the	•		comparison figur	e as
SDS - Adult Spend	SDS spend on adults 18+ as a % of total social work spend on adults 18+	9	7% (Q2)	8% (Q3)	1
Narrative: Compares with a	n overall figure of 5% across 2015-16. The Scotti	sh average for 2015-1	16 was 6.65%.		
SDS - Gross	SDS Spend on over 18s (£000s)	9	£769393 (2015-16)	£683584 (Q1-3 2016- 17)	1
Narrative: Total Q1- Q3 rep	resents 88% of 2015-2016 total. This reflects a c	commitment to increas	ing the take up o	of Self Directed S	upport.
Finance – Gross (adults)	Gross Social Work Spend on over 18s (£000s)	9	£14484733 (2015-2016)	£9056702 (Q1-3 2016- 2017)	<b>+</b>
Narrative: Q1-Q3 figure repr	resents 62.5% of total spend for 2015-2016. It is	expected that this figu	re will adjust up	wards during the	final
Homecare – Intensive needs	% of people 65+ with intensive needs receiving care at home	2	24.4% (2015-16)	34% (Q3 2016-17)	1

**Narrative:** To date we have reported this figure on an annual basis based on a snapshot at the end of the financial year. We are now collecting this figure quarterly from 2016 - 2017 Q2 onwards in order to give a more accurate measure. The indicator reflects the proportion of a cohort of service users with intensive care needs who are receiving homecare services in their own home as opposed to residential care. The cohort is composed of those people in receipt of +10 hours of home care a week and those who are receiving care in a residential setting. This not the same indicator as that in the Integration Core Indicators which also accounts for people in receipt of SDS direct payments for personal care.

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
Quality of Services	% of Adults satisfied with social care or social work services	3	76% 2012-2015	72.33% 2013-2016	1
Narrative: Figure over a thr 2012-15 Max 76.55%, Med	• •				
Finance – Older People Residential	Older persons (over 65's) Residential Care Costs per week per resident	9	£1057 (Q2)	£1057 (Q3)	<b>+</b>
Narrative: Figures reflect	the actual cost of providing the service.				1
Finance – Care Homes	Net Expenditure on Care Homes for Older People (£000s)	9	£1123073 (Q2)	£1218963 (Q3)	<b>*</b>
Narrative: The total Q1-Q3	represents 76% of the annual total for 2015-2016				
Residential – Long Stay	Number of long-stay residents aged 65+ supported in Care Homes	3	114 (Q2)	113 (Q3)	<b>*</b>
Narrative: This figure is the	number of available beds + number of admission	s in the quarter			
	National Core Integration Fran (Compared to Sco		Scotland	Orkney	
Adult Health	Percentage of adults able to look after their health very well or quite well	1	94%	95%	1
Narrative: Orkney performa	ance exceeds Scottish average.		1		1
Independence	Percentage of adults supported at home who agreed that they are supported to live as independently as possible	2,3	84%	89%	1

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG	
Narrative: Orkney performar	nce exceeds Scottish average.					
Engagement	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided	2,3	77%	75%	•	
Narrative: Orkney performar	nce marginally below the Scottish average					
Coordination of Services	Percentage of adults supported at home who agreed that their health and social care services seemed to be well coordinated	2,3	75%	77%		
Narrative: Orkney performar	nce exceeds Scottish average.					
Adult Support	Total % of adults receiving any care or support who rated it as excellent or good	3	81%	86%		
Narrative: Orkney performar	nce exceeds Scottish average.		1			
GP Care	Percentage of people with positive experience of the care provided by their GP practice	3	87%	97%	1	
Narrative: Orkney performar	nce exceeds Scottish average.					
Quality of Life	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	2,3	84%	87%	1	
Narrative: Orkney performance exceeds Scottish average.						
Carers' Support	Total combined % carers who feel supported to continue in their caring role	6	41%	43%	1	
Narrative: Orkney performance exceeds Scottish average.						

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG	
Feeling Safe	Percentage of adults supported at home who agreed they felt safe	2,7	84%	85%	1	
Narrative: Orkney performar	nce exceeds Scottish average.					
Premature Mortality	Premature mortality rate per 100,000 persons	4	441	379	1	
Narrative: Orkney performar	nce exceeds Scottish average.		,			
Emergency Admission	Emergency admission rate (per 100,000 population)	4	12.116	10,970	1	
Narrative: Orkney performar	nce exceeds Scottish average.					
Emergency Bed Day	Emergency bed day rate (per 100,000 population)	4	112,638	86,590	1	
Narrative: Orkney performar	nce exceeds Scottish average.					
Readmissions	Readmission to hospital within 28 days (per 1,000 population)	4,9	94	77	1	
Narrative: Orkney performance exceeds Scottish average.						
End of Life - Care Setting	Proportion of last 6 months of life spent at home or in a community setting	2	87%	92%	1	
Narrative: Orkney performance exceeds Scottish average.						

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
Falls Rate	Falls rate per 1,000 population aged 65+	1	21	22	1
Narrative: Orkney performar	nce exceeds Scottish average.				
Quality of Service – Care Inspectorate	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections.	3,4	83%	74%	1
Narrative: Orkney performan	nce below Scottish average although no service v	was placed in the low	est categories.		<u>l</u>
Intensive Care Needs	Percentage of adults with intensive care needs receiving care at home	2	N/A	51%	1
	es people who purchase intensive homecare using locally. It is based on the number of people receiver 10+hrs per week				
Delayed Discharge	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	2,3	915	382	1
Narrative: Orkney performan	nce exceeds Scottish average.				
Emergency Admission Costs	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	9	22%	22%	<b>*</b>
Narrative: Orkney performan	nce equals Scottish average.				
Care Home – Hospital Admissions	Percentage of people admitted to hospital from home during the year, who are discharged to a care home	2	N/A	N/A	N/A

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG
Narrative: This measure is u	under development and not currently available.				
Delayed Discharge – 72 hours	Percentage of people who are discharged from hospital within 72 hours of being ready	2,3	N/A	N/A	N/A
Narrative: This measure is u	under development and not currently available.				
End of Life – Finance	Expenditure on end of life care, cost in last 6 months per death	9	N/A	N/A	N/A
Narrative: This measure is u	under development and not currently available.		1		<b>!</b>
Breastfeeding	Percentage of babies exclusively breastfeeding at First Visit/6-8 week review by year of birth	onal Outcomes	39% (Scot)	40% (Orkney)	1
Narrative: Figures from Aug	ust 2016				
Child Dental	Percentage of Children in Primary 1 with no obvious Dental Cavities	1,5	69% (Scot)	79% (Orkney)	1
Narrative: Figures published	six monthly. Next up to date figure will be published	shed in March 2017			ı
Fostering – in-house	Percentage of fostered Looked After and Accommodated Children who are fostered by an in-house placement	4,7	24%	21%	N/A

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG		
Narrative: Children are place	ed according to their needs and best interests. To	argets and comparison	ns would not be a	appropriate.			
Fostering - out of Area Placements	Number of out of area placements a) foster care b) residential	4,7	*	*	N/A		
Narrative: These figures are	below the level which we would publicly report.	This is to protect the	confidentiality of	children and the	eir families.		
Child Protection	No of Children and Young People on Child Protection Register	4,7	7 (2016-17 Q2)	*	N/A		
	e is below the level which we would publicly ron the Child Protection Register when necessary			iality of childre	n and their		
Court Reports	Percentage of Social Work Reports submitted by noon on the working day before the adjourned hearing	3	100% (Q2)	100% (Q3)	<b>*</b>		
Narrative: This target is con-	sistently met						
Community Payback Order – Initial Appointment	Percentage of new CPO clients with a supervision requirement seen by a supervising officer within a week	3,7	100% (Q2)	100% (Q3)	<b>*</b>		
Narrative:							
Community Payback Order – Induction	Percentage of CPO Unpaid work requirements commenced induction within five working days	4	91% (Q2)	100% (Q3)	1		

Indicator Name	Description	National Health and Wellbeing Outcome	Comparator	Current	RAG			
Narrative:								
Community Payback Order – Work Placement	Percentage of individuals on new CPO unpaid work requirement began work placements within seven days	4	91% (Q2)	100% (Q3)	1			
Narrative:	Narrative:							
Public Bodies (Joint Working)(Scotland) Act 2014								
Complaints	Proportion of complaints responded to following Scottish Public Services Ombudsman targets.	4	100%	100%	<b>+</b>			
Narrative:								