Strategic Performance Monitoring within the Joint Strategic Plan

This report looks to embed a series of key performance metrics and indicators, with each of the services across the HSCP acknowledging 'what they plan to do' and 'how will we know' the identified planned objectives are delivered or that progress towards delivery is being measured.

The sources for 'how will we know' fall broadly into 6 categories of performance metric, from Service Plans or Strategies, KPIs or milestone measures.

An icon will indicate which performance progress measure metric aligns with the 'how we will know' statement within the JSP, and a simple RAG status advises where the performance metric is Red i.e. off Track and unlikely to be delivered, Amber ie in progress and likely to be completed or Green i.e. actioned and or delivered with evidence available.

These service performance metrics will be reviewed and updated annually throughout the lifespan of the Joint Strategic Plan.

The HSCP is committed to openness and transparency in respect of performance reporting. Due to service pressures arising from the pandemic during 2020/21, there has been some disruption to reporting as the HSCP focussed on addressing the pandemic and re-mobilisation of services. A revised Integrated Performance Management Framework is been designed and will be rolled out fully in 2022. The HSCP reviews its performance data and uses this to enable it to be responsive to emerging need and service pressures and to continuously improve and inform its strategic planning processes.

lcon	Description	Further Detail
	Milestone measure	Service will provide evidence of movement towards planned outcome
Ţ	Delivery of a Service Plan or Strategy	Service will deliver a specified service plan or strategy
	Key Performance Information or National Statistics	Service specific statutory performance or national statistics will be available
	Report or Review action	Service will deliver report or review action report
	Consultation, Feedback or Engagement action	Service to deliver consultation, feedback or engagement event to inform or monitor service planning objectives
	Service Improvement action	Other service improvement action

Key to Performance Progress Measures

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Children' Services			
Local Performance			
What we will do	How will we know	Source	Timescale
Early Help and Support- Children and young people's views and opinions inform future development and improvements	We will oversee and align the self-evaluation of services involving Children and Young People under the Children and Young Peoples Services Plan to provide greater uniformity when identifying multiagency and single agency performance measures		
Mental Health & Wellbeing -Children and young people will enjoy good mental health and wellbeing in their schools and community	We will implement the redesign of CAMHS (Child and Adolescent Mental Health Services) to improve access to and the responsiveness of local community based services		
Children and Young People's Voices- Children and young people's views and opinions inform future development and improvements	We will ensure Children and Young People are provided with opportunities to evaluate current services and influence the planning of future services		
	We will ensure that what matters to children and families are at the heart of change		
	We will ensure that services actively listen to families and provide a whole family support service		
	We will ensure young people views are listened to and acted upon		
	Continue to engage with Children and staff on transformation agenda & develop transformation aspirations for the Service		
We will ensure that planning, investment and information is shared widely	Develop programme of change in relation to the Children's Promise Change programme		
	Deliver on the project outcomes for transforming responses to Violence against Women and Girls		
	Report on Performance of outcomes		

We will ensure that our workforce is supported and focus will be on building capacity for long term sustainability	Continue to act as a conduit for information and resources on Equally Safe / Train/ National initiatives for managers and staff		
To ensure that the focus for change is aimed at addressing child poverty and within a context of Children's Rights agenda	Deliver on key priorities identified in the Child Poverty Strategy		
We will prevent Children and Young People coming into care through prevention, early intervention and effective alternatives	Continue to deliver on the Children and Young Peoples Service Plan		
We will place Looked After and Accommodated Children (LAAC) closer to their families and communities.	Continue to deliver on the Corporate Parenting Plan		
We will make greater use of the Model of Improvement to ensure long term sustainable changes are embedded in practice	We will oversee and align the self-evaluation of services involving Children and Young People under the Children and Young Peoples Services Plan to provide greater uniformity when identifying multiagency and single agency performance measures Evaluate the outcomes of the 2018-2021 Argyll and Bute Equally Safe Implementation Plan Develop project plan for Transforming Responses to Violence against Women and Girls Project		
	National Performance		
Performance Outcomes	Progress Measure	Source	Timescale
Collection and submission of Looked After Children Scotland Statutory Reporting	Looked after children statistics 2020: local authority benchmarking tool - gov.scot (www.gov.scot)		
Latest Educational Outcomes for Looked After Children	Education Outcomes for Looked After Children – 2019/20 - gov.scot (www.gov.scot)		
Latest C&F Services Inspections grades	Datastore (careinspectorate.com)		

SOLACE -CHN8a SOLACE-CHN8b SOLACE-CHN9 SOLACE-CHN19b SOLACE- CHN20b SOLACE-CHN23	The Gross Cost of "Children Looked After" in Residential Based Services per Child per Week The Gross Cost of "Children Looked After" in a Community Setting per Child per Week % of children being looked after in the community School attendance rate (Looked After Children) School exclusion rates (per 1,000 'looked after children') % LAC with more than 1 placement in the last year (Aug-July) Explore the data Benchmarking (improvementservice.org.uk)	
All children referred to CAMHS will received treatment within 18 weeks	CAMHS are subject to deliver an 18 week wait from referral to treatment for specialist services <u>Child and Adolescent Mental Health Waiting Times - Datasets -</u> <u>Scottish Health and Social Care Open Data (nhs.scot)</u>	
 All children will receive a 13-15 month developmental review with a Health Visitor All children will receive a 27-30 month developmental review with a Health Visitor All children will receive a 4-5 year developmental review with a Health Visitor 	Early Child Development - 13-15 month review statistics - Datasets - Scottish Health and Social Care Open Data (nhs.scot) Early Child Development - 27-30 Month Review Statistics - Datasets - Scottish Health and Social Care Open Data (nhs.scot) Early Child Development - 4-5 year review statistics - Datasets - Scottish Health and Social Care Open Data (nhs.scot)	
The European Region of the World Health Organization (WHO) recommends that on a national basis at least 95% of children are immunised against diseases preventable by immunisation and targeted for elimination or control. These include diphtheria, tetanus, pertussis, polio, Haemophilus influenzae type b (Hib), measles, mumps and rubella	Childhood immunisation statistics Scotland - Quarter and year ending 30 September 2021 - Childhood immunisation statistics Scotland - Publications - Public Health Scotland	
This release by Public Health Scotland provides a quarterly update of immunisation uptake rates for children in Scotland at 12 months, 24 months, five years and six years of age. Immunisation programmes for children aim to protect the individual child from many serious infectious diseases and prevent the spread of disease in the wider population	Childhood immunisation statistics Scotland - Quarter and year ending 30 September 2021 - Childhood immunisation statistics Scotland - Publications - Public Health Scotland	

This release from Public Health Scotland provides annual statistics on high, low and healthy body mass index (BMI) for Primary 1 school children (those aged around 5 years old), and includes data for school years 2001/02 to 2020/21. Statistics in this release are derived from height and weight measurements collected at health reviews in Primary 1	Primary 1 Body Mass Index (BMI) statistics Scotland - School year 2020 to 2021 - Primary 1 Body Mass Index (BMI) statistics Scotland - Publications - Public Health Scotland	
Encouraging and supporting breastfeeding is an important public health activity. There is good evidence that breastfeeding protects the health of children and mothers. Breastfeeding rates in Scotland are monitored and published annually. The information is collected at Health Visitor reviews of children at around 10 to 14 days (First Visit), 6 to 8 weeks, and 13 to 15 months of age	Infant feeding statistics - Financial year 2020 to 2021 - Infant feeding statistics - Publications - Public Health Scotland	
At least 80% of pregnant women in each SIMD (Scottish Index of Multiple Deprivation) quintile will have booked for antenatal care by the 12th week of gestation	<u>NHS Scotland performance against LDP standards - gov.scot</u> (www.gov.scot)	
Teenage pregnancies	Teenage pregnancies - Year of conception, ending 31 December 2019 - Teenage pregnancies - Publications - Public Health Scotland	
Child Dental health P1 Child Dental Health P7	National dental inspection programme - School year 2019 to 2020 - National dental inspection programme - Publications - Public Health Scotland ScotPHO profiles (shinyapps.io)	
COVID-19 Early Years Resilience and Impact Survey (CEYRIS) report 2021	Search - Public Health Scotland	

Child Poverty			
Local Performance			
What we will do	How we will know	Source	Timescale
Continue to develop the Child Poverty Action Plan and work around tackling the three Drivers of Poverty	Ensure partner agencies contributes actions and activities to the plan and has individual measures to monitor the progress	Ţ	
Develop a Data Base that allows us to measure changes in the level and nature of child poverty locally and identify groups and communities that require focused interventions from key services	Developed and deliver a database to allow for enhanced local measurement of area of deprivation and permit a greater focus of resources on the most deprived areas		
Look at ways in which the impacts of poverty can be mitigated, seeking to identify gaps and help to create a focus on these	The local Child Poverty Action Group will also use the Child Poverty Assessment Tool to assess the performance of the group and its actions		
	Ensure we are engaging with children, young people and communities and listening to their voices and opinions		
Develop and roll out Poverty Awareness Raising Training to a wide range of staff	Deliver Poverty Awareness training for staff- milestone Ensure that Money Matter training is rolled out to relevant staff and the impact monitored		
	National Performance		
Performance Outcomes	Progress Measure	Source	
Child Poverty in Scotland: health impact and health inequalities	Child Poverty in Scotland: health impact and health inequalities (healthscotland.scot) Child poverty: priority groups - lone-parent families - Publications - Public Health Scotland COVID-19 and lone parents with dependent children - Publications - Public Health Scotland		

Child Protection			
Local Performance			
What we will do	How we will know	Source	Timescale
The Child Protection Committee provides effective leadership and direction in child protection and is accountable for its actions	Committee members understand their role and responsibilities and are supported to exercise these effectively The committee demonstrates its strategic direction and activity through delivery of appropriate business plans The committee undertakes ICR'S & SCR'S as appropriate, and		
A learning culture to support continuous improvement is embedded in the CPC and promoted across partner agencies	reports and acts on findings CPC has robust systems to monitor, measure and to report improvement		
	 We review /evaluate child protection service delivery Work with colleagues from APC to identify interface issues that can be jointly addressed The CPC will ensure that there is a comprehensive multi agency child protection training programme in place that is revised on an annual basis to reflect practice priorities The CPC will progress key priorities identified through the practitioner self-evaluation activity and CPC development sessions 		
We help our children and young people to keep themselves safe	Child protection in education Scottish Fire & Rescue Service community engagement and keeping children safe		
We effectively identify children at risk share information timeously and act together to protect them from harm	The CPC is alert to the potential that agencies may see an increase in domestic abuse referrals due to COVID-19. All staff across agencies require to have a greater awareness of DA and be confident with appreciative enquiry		

	The quality of our child protection investigations and risk management continues to improve	الم ج	
	We effectively asses and plan for children at risk		
	We develop our approaches to the child protection case conference model		
Collaboration across Public Protection raises awareness of cross-cutting challenges and opportunities for shared solutions in child protection	We work together to improve the outcomes for children at risk Protection of children is a key aim across public protection planning and delivery particularly in relation to children affected by adult mental health, domestic violence, substance misuse and criminal behaviour	r Y	
Children, their carers and their families are supported to be fully involved in child protection decision making processes	The views and experiences of children and their families are systematically recorded and reported to CPC		
Engagement with children, families and communities and raising public awareness	Raising public awareness of child protection need to be a priority of the CPC to ensure that communities are equipped with information that allows them to take action if they are concerned about the safety and wellbeing of a child.		
	National Performance		
Performance Outcomes	Progress Measure	Source	
CHN22 % of child protection re-registrations within 18 months - SOLACE	Benchmarking Benchmarking (improvementservice.org.uk)		
Collection and submission of Child Protection Statutory Reporting	Child protection statistics 2020: local authority benchmarking tool - gov.scot (www.gov.scot)		
CPC – National Minimum Dataset	Minimum Dataset for Child Protection Committees (celcis.org)		

Violence against women and girls			
Local Performance			
What we will do	How we will know	Source	Timescale
A major area of work in the next 2 years will be the delivery of the Transforming Responses to Violence Against Women and Girls Project that is supported by the DES Fund bid monies. A Programme Board will be established to facilitate this	Feedback from staff, communities and lived experience people. Feedback from the Improvement Service.		
Use of the Domestic Abuse-Informed Practice and Systems: Self-Assessment Tool and Evaluation Framework at the start of the 2 year service transformation project will allow us to assess how services are currently working. The proposed research project by Dr Anni Donaldson will add to this evaluation process and ensure the inclusion of lived experience voices.	Use of the Domestic Abuse-Informed Practice and Systems: Self- Assessment Tool to evaluate service change.		
Develop our Data Base to more readily show the work of the partner agencies and emerging trends in domestic abuse and other gender based violence areas	Research outcomes and conclusions.		
Review the Equally Safe Plan for Argyll and Bute	Outcomes from child protection procedures. Is the roll out of Safe and Together resulting in more children remaining with the non- offending partner? Is this resulting in a reduction in receptions into care?	Ŕ	
Improve communications with lived experience and community groups and put in place a LBTQI Plan	Changes mapped in referrals to key third sector partners.		
Work to improve the services to women and girls with a learning disability who experience, or are at risk of experiencing, domestic abuse. This will focus on training for key teams and individuals and improving pathways	How far the Equally Safe National Standards are being met in Argyll and Bute.		
Work to improve how staff work with men in cases where there are domestic abuse and related child protection issues. This will focus on providing additional training and advice	Provide additional training to improve how staff work with men where there are Domestic Abuse and Child Protection issues.		

National Performance			
Performance Outcomes	Progress Measure	Source	Timescale
Scotland's strategy to eradicate violence against women	Equally Safe: Scotland's strategy to eradicate violence against women - gov.scot (www.gov.scot)	Ĩ	
Gender based violence overview	Overview of gender based violence - Gender based violence overview - Gender based violence - Health topics - Public Health Scotland		
Domestic abuse in Scotland statistics	Domestic abuse in Scotland statistics - gov.scot (www.gov.scot)		

How will we know ovement hould be invited to participate in case we case conferences. s an essential factor in determining if the b. The application of the test should be uring initial inquiry to show decision making	Source	Timescale
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m should have a risk assessment, which is		
nsistent approach to preparing and recording lults at risk of harm who require one.		
ASP Improvement Plan	1	
Progress Measures	Source	
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<u>c</u>	otection improvement plan 2019-2022 - cot) 8-2020_001_master_copy_8.pdf (argyll-	otection improvement plan 2019-2022 - cot)

Community and Criminal Justice				
Local Performance				
What we will do	How we will know	Source	Timescale	
Support and monitor the implementation of the Justice Social Work Community Justice Improvement Plan	Develop, implement and Review a local Community Justice Outcome Improvement Plan, in line with the priorities of the Scottish Government national Justice and Community Justice Strategies	Ţ		
	Continue to work with Community Justice Scotland, in particular, to respond to the publication of the new national Community Justice Strategy and Outcomes Performance and Improvement Framework (expected by June/September 2022 respectively)			
Support the Violence Against Women & Girls research project to learn from the experiences of women and improve our responses to men who perpetrate violence against women and girls	Review the learning from the 3 phases of jointly commissioned research report for Violence Against Women & Girls and implement key recommendations			
	Implement and monitor the improvements related to the jointly commissioned Violence Against Women & Girls research			
Produce a local Community Justice Outcome Improvement Plan and related performance framework	Finalise the review of our local Community Justice Partnership	المحج الم		
Embed an approach of continuous improvement in the functioning, delivery and outputs from our Community Justice Partnership	Support and monitor the implementation of the Justice Social Work (Community Justice) Improvement Plan			
	Carry out a validated self-evaluation of our Community Justice Partnership in line with the Care Inspectorate guidance			
	Implement improvements to the Community Justice Partnership identified through the Care Inspectorate validated self-evaluation			

Finalise the Argyll & Bute prison Custody to Community Pathway and develop a monitoring process	Implement the prison Custody to Community pathway, including performance reporting and monitoring	×	
Strengthen strategic links with other partnerships and develop new strategic links with Third Sector, Children's Services (Youth Justice), Employability, Welfare and other key partnerships	Develop strategic and operational links with Third Sector and Children's Services (Youth Justice) and other key local partnerships		
Na	tional Performance		
Performance Outcomes	Progress Measure	Source	
Community Justice Outcomes Performance Improvement Framework (due to be published Autumn/Winter 2022) and Care Inspectorate Community Justice Guidance	We will monitor progress in line with the national Community Justice Outcomes Performance Improvement Framework (due to be published Autumn/Winter 2022) and Care Inspectorate Community Justice Guidance.	اگر	
Community Justice Outcome Activity Across Scotland Annual Report 2020-21	Reports & Statistics - Community Justice Scotland		
Community Payback Order Summary of Local Authority Annual Reports 2019-20			
Community Justice Outcome Activity Annual Report 2019-2020			

Public Health			
Local Performance			
What will we do	How will we know	Source	Timescale
Develop joint Health Improvement plan between Argyll and Bute and north Highland	Deliver a joint improvement plan between Argyll & Bute and North Highland	įÖſ	
	Develop and deliver performance management processes within wider NHS Highland Public Health Team		
	Deliver department annual report		
Pandemic recovery - Social Mitigation Strategy: child poverty; financial inclusion; children's rights; equalities; mental health	Produce report relating to Living Well strategy action plan		
improvement and support	Produce report relating to Social Mitigation		
	Develop and deliver project specific Project Initiation Documents		
Deliver on the 5-year implementation plan for Living Well strategy: workforce development; self-management; community link working; physical activity; mental wellbeing;	Deliver on 5-year Implementation Plan for Living Well strategy action plan	Ţ	
suicide prevention; smoking cessation	Build capacity for health improvement: education; Living Well Networks; community planning; locality planning groups; engagement; place-based work		
Respond and deliver national strategy and targets – suicide prevention; smoking cessation; Fairer Scotland	Evaluate LDP/AOP target for smoking cessation	A state of the	
Alcohol and Drug Strategy actions – reduce drug deaths; recovery orientated support	Evaluate LDP/AOP target for alcohol brief interventions Delver the Alcohol and Drug Partnership annual report		

Na	National Performance		
Performance Outcomes	Progress Measure	Source	
90% of people referred for help with their drug or alcohol problem will wait no longer than three weeks for treatment that supports their recovery	Drug and Alcohol Treatment Waiting Times - Datasets - Scottish Health and Social Care Open Data (nhs.scot) Dashboard - Alcohol related hospital statistics - Scotland financial year 2020 to 2021 - Alcohol related hospital statistics - Publications - Public Health Scotland		
Scottish Health Survey- Alcohol Consumption	Scottish Health Survey (shinyapps.io)		
National Records for Scotland – Drug Deaths	Drug-related Deaths in Scotland in 2020 National Records of Scotland (nrscotland.gov.uk)		
COVID-19 Early Years Resilience and Impact Survey (CEYRIS) report 2021	Search - Public Health Scotland		
Covid 19 Immunisations Poverty Substance Use Improving our health and wellbeing	Our areas of work - Public Health Scotland		

Adult Care-Older Adults/Adults and Hospitals Local Performance			
What will we do	How will we know	Source	Timescale
Support care at home through a challenging winter, linking unscheduled care elements to limit duplication and make best use of the total resource available	Monitoring the balance of care, ninjured fallers supported at home and reduction in delayed discharges		
Extend the Community Hospitals into the community and provide a greater range of health related skills and services at home	Increasing end of life care at home Reduction in unplanned bed days		
Develop a community assets approach and identify a way in which people can be supported as much as possible within their own community before needing statutory services	Increase in support through community alternatives and prevention services Increase carer support		
Develop a care at home strategy to agree and monitor key developments to build a flexible and sustainable service	Develop and deliver a Care at Home Strategy	Ì	
Develop a strategic and inclusive approach to Dementia within Argyll and Bute which sees supporting people with dementia in our communities as essential and part of everyone's role	Develop and deliver a Dementia Strategy	Ĩ	
Developing a meaningful conversation with islands around our health and care services	Develop consultation and feedback with Islands around health and care services		
Develop a robust plan around winter planning, mapping out all elements of service delivery, what the pressures are and how they impact on each other	Develop and deliver a robust plan around winter planning	Ŕ	
Develop a sustainable staffing model at Lorn and the Isles Hospital linking in with the Acute Structure	Develop and deliver Sustainable Staffing Model for Lorn & Isles		
Develop parts of our preventative model through use of Primary Care Link workers	Increase in support through community alternative and prevention services Develop and deliver Preventative Model		

To work in partnership with providers, supporting elements such as recruitment, training to ensure best use of resources	HR – staff vacancy rates/ Commissioned Services- monitoring	
Review the use of Extended Community Care Teams and link them to other community services	Develop and deliver Review of ECCT's	
Complete a building appraisal for internal care homes and develop an overarching care home and housing strategy. This will include the position of intermediate care within Argyll and Bute	Develop and deliver Care Home & Hosing strategy	(Ö)
Na	tional Performance	
Performance Outcomes	Progress Measure	Source
Local Delivery Plan Targets	<u>NHS Scotland performance against LDP standards - gov.scot</u> (www.gov.scot)	
Local Government Benchmarking Framework	Benchmarking Benchmarking (improvementservice.org.uk)	
Care inspectorate Grades	Datastore (careinspectorate.com)	
Social Care Insights Dashboard	https://scotland.shinyapps.io/nhs-social-care/	
Health & Care Experience Survey	Health and Care Experience Survey - gov.scot (www.gov.scot)	
Inpatient Experience Survey	Inpatient Experience Survey - gov.scot (www.gov.scot)	
Eligibility Criteria & Waiting Times	Eligibility criteria and waiting times - gov.scot (www.gov.scot)	
Delayed Discharge	Delayed Discharges in NHSScotland - Datasets - Scottish Health and Social Care Open Data	

Learning Disability Services			
Local Performance			
What will we do	How will we know	Source	Timescale
Review and redesign of LD Day Services across A&B, working in partnership with H&SC staff, care providers, service users, carers and wider communities to develop future models of support	Establish a steering group with responsibility to deliver the Implementation Plan, with representation from partners, including provider organisations - milestone	Est.	
Continue to utilise technology and telecare where appropriate to increase independence, whilst ensuring the safety and wellbeing of service users	Establish clear funding priorities and ambitions within the implementation plan (identifying clearly the opportunities and need for savings to be made) – milestone		
Development of short, medium and long term housing strategy to ensure appropriate accommodation models for services users and affordable housing for H&SC staff	Develop and deliver a short, medium and long-term housing strategy- milestone	Ĩ	
Further develop and improve communication and engagement with service users, carers, providers and H&SC to support the co-production of alternative models of care	Identify risks to achieving the strategic outcomes and propose mitigation measures - milestone		
Sustain and further improve on the positive feedback from external regulators regarding the quality of service provision (both internal and external).	Utilise feedback from professionals and those affected by our plans through a Health Impact Assessment and Equality and Socio-Economic Impact Assessment - milestone		
Further development of specialist Core and Cluster housing to support individuals with complex needs and reduce the requirement for individuals to be placed out with the area.	Develop and deliver specialist Core & Cluster Housing for individuals with complex needs - milestone	Ŕ	
Sustain and improve the positive and dynamic relationships with external providers and support services	Develop and deliver Commissioning Plans for all services being delivered	(Ö)	
Increase the uptake of Self Directed Support, through delivery of enhanced training to staff and development of easy read information for service users and/or carers	Deliver enhanced training and easy read information for Self Directed Support- milestone		
Reduce stigma in relation to learning disability and autism through delivery of joint training and/or awareness raising for staff across the HSCP	Establish consultation plans (using the Engagement Specification) with people with learning disabilities and their carers' as part of the process to set our strategic objectives - milestone	Ŕ	

Implementation of the actions set out in the Learning/Intellectual Disability and autism – Recovery and Transformation Plan	Put in place robust monitoring and reporting arrangements to support Learning/ Intellectual Disability and Autism Recovery and Transformation Plan- milestone	(Ö)
Development of A&B specific Learning Disability and Autism Strategies, in line with the A&B HSCP Engagement Framework	Develop and deliver A&B specific Learning Disability and Autism Strategies	(Ö)
Na	tional Performance	
Performance Outcomes	Progress Measures	Source
Scottish Consortium for Learning Disability	The Scottish Commission for People with Learning Disabilities - SCLD	
Learning/Intellectual Disability and autism – Recovery and Transformation Plan	Learning/intellectual disability and autism: transformation plan - gov.scot (www.gov.scot)	(Ö)
Local Government Benchmarking Framework	Benchmarking Benchmarking (improvementservice.org.uk)	
Health & Care Experience Survey	Health and Care Experience Survey - gov.scot (www.gov.scot)	
Care inspectorate Grades	Datastore (careinspectorate.com)	

Mental Health Services			
Local Performance			
What we will do	How will we know	Source	Timescale
Continue to support the statutory requirement of Mental Health Officer duties within services	Assess the effectiveness of community supports and strategies for individuals in their homes- milestone		
Refine and implement local Mental Health and Dementia Services Strategies	 Deliver reductions in acute hospital admissions and / or use of compulsory measures in terms of detention under Mental Health legislation- milestone Ensure consistency of agreed method of engagement with service users, carers and other relevant representatives-milestone Further develop the review and implementation of Community Mental Health Teams across Argyll and Bute- milestone 		
Implement the locality based consultant model of care and work to resolve recruitment difficulties	Deliver locality based consultant care- milestone		
Further monitor the Link Worker initiative for progression through Primary Care Implementation Plan via NHS Highland pilot with a view to applying similar approach to mitigating the impact of problems such as debt and loneliness on mental health	Deliver the Link Worker Initiative via the Primary Care Implementation Plan- milestone	- SA	
Continue to explore new technological ways of delivering therapy and support	Evaluate the delivery of therapy and support using technology - milestone		
Review and development of dementia care, including in patient and community services	Ensure that mental health services are delivered in line with the Dementia Strategy- milestone	<i>i</i>	
Increase crisis interventions in the community to reduce risk and to manage hospital admissions safely, if required	Evaluate and deliver reductions in demand and spend for out of hour's services; Police Scotland and interventions by other emergencies services- milestone		
	Work with Primary Care colleagues to help support the roll out of anticipatory and preventative care strategies associated with the new GP contract- milestone	F S	

National Performance		
Performance Outcomes	Progress Measures	Source
90 per cent of patients to commence Psychological Therapy based treatment within 18 weeks of referral.	NHS Scotland performance against LDP standards - gov.scot (www.gov.scot)	
Improved rate of responsiveness to new referrals to Psychological therapies and reduction in waiting list numbers . Optimisation of medical capacity and digital delivery in outpatient settings. Managing increase in demand for PT services (pan Highland including Eating Disorders). Development of service models where no dedicated provision in place e.g. EI in Psychosis (pan Highland), Eating Disorders, Personality Disorder and Forensic (A&B), Primary Care (North Highland). Significant service risks exist due to low baseline staffing and service models.	Scheduled Care (Psychological Therapies) - each service element to deliver to clinical priority CAMHS <u>Psychological therapies waiting times - Quarter ending June</u> 2021 - Psychological therapies waiting times - Publications - <u>Public Health Scotland</u> <u>NHS Scotland performance against LDP standards - gov.scot</u> (www.gov.scot)	
Increase of in hours and establishment of out of hours MH specialist input including home treatment and assessment functions (pan Highland). Likely to require significant investment due to minimal current service and remote and rural delivery costs	MSG 2 – MH Unplanned Admissions Bed Rates Partnership Working in NHSScotland MSG	
Increase in support hours to supported people reflecting timescales of reopening of building based services and continuation of new/emerging service models.	In-patient Services- increase in available bed days in adult acute pathway ISD Scotland Mental Health Inpatient Activity Trend data	

Primary Care			
L	ocal Performance		
What we will do	How we will know	Source	Timescale
Agree an HSCP primary care nurse management structure to oversee the transformed delivery of vaccinations, community treatment and care and some aspects of urgent care within Argyll and Bute	Recruit to primary care nursing posts as agreed in the Primary Care Modernisation Implementation Plan to support community treatment and care and some aspects of urgent care. Continue to develop the Advanced Practitioner role within communities throughout the Argyll and Bute area		
	Increase in activity for physiotherapy and reduced expenditure on pain medication	-	
Support delivery of vaccine transformation removing the requirement for GP involvement by 1 April 2022. Further develop and continue recruitment to locality based vaccination	Consider an HSCP model for travel health and travel vaccinations	_	
teams which reflect the additional workload of administering Covid vaccines across practice populations in addition to the extension of existing flu vaccine cohorts	Establish immunisation teams to administer vaccines in all localities and assess recruitment priorities based on the impact on workload of delivering Covid vaccines and the additional flu vaccine cohorts		
	Ensure that locality based vaccination teams and campaign planning are sufficiently robust to deliver Vaccination & Immunisations and Childhood Vaccination in line with their removal from GP practices from 1 April 2022	-	
	Identify any ongoing practice involvement in delivery of vaccinations beyond 1 April 2022 under the terms of the transitionary service arrangements (including additional payment arrangements).		
Finalise separate business to business contracts with very remote and rural and island GP practices where it has been assessed in an options appraisal exercise that practice delivery is the only option for community treatment and care and some aspects of urgent care	Provide information of what services will not transfer from GP practices as an outcome of the rural options appraisal process. The Scottish Government and SGPC will negotiate a separate arrangement including funding for these practices who will continue to provide services after 1 April 2022		
	Use and satisfaction with Technology Enabled Care and Home Health monitoring for example psychological therapy,		

	blood pressure monitoring.		
	Treatment related specific outcomes (patient and practitioner)		
Extend a self-referral option for primary care mental health services to additional GP practices. This is being successfully piloted in 1 GP practice in each locality	 Establish a baseline of current practice and measure new activity against the baseline, for example spend on antidepressant therapy as opposed to medication, number of referrals to Centre for Mental Health Service (CMHS) for primary care. Finalise a service level agreement with NHS Greater Glasgow and Clyde for the provision of a primary care mental health service for all GP practices in Helensburgh and Lomond 		
Mitigate recruitment and remote and rural challenges for Pharmacotherapy by creation of a remote hub model.	Assess the impact on GP practices following the service redesign of Pharmacotherapy using a remote hub model To help address specific recruitment challenges to the pharmacotherapy service a remote hub model is being created in Helensburgh. The hub run by Pharmacy technicians & Assistants with pharmacist oversight will provide a minimum consistent level of service to all practices	Ċ	
Delivery of a strategy for island health and social care provision specifically for out of hours and urgent care.	Establish a sustainable GP out of hours service for Jura, linking it with Islay and building community resilience	Ĩ	
Agree, finalise and deliver a midwifery model for pertussis delivery across Argyll and Bute.	Deliver the pertussis model for Argyll & Bute	Ŕ	
	ational Performance		
Performance Outcomes	Progress Measure	Scource	
GPs to provide 48 hour access or advance booking to an appropriate member of the GP team for at least 90 per cent of patients.	NHS Scotland performance against LDP standards - gov.scot (www.gov.scot)		

We are more informed and empowered when using primary care	Primary care: national monitoring and evaluation strategy - gov.scot (www.gov.scot)		
Our primary care services better contribute to improving population health			
Our experience of primary care is enhanced		, <u>, , , , , , , , , , , , , , , , , , </u>	
Our primary care workforce is expanded, more integrated and better co-ordinated with community and secondary care		L)	
Our primary care infrastructure – physical and digital – is improved			
Primary care better addresses health inequalities			

Alcohol & Drug Partnership			
Local Performance			
What we will do	How we will know	Source	Timescale
We aim to continue to work in partnership to deliver the ADP strategy	Develop & deliver the ADP Strategy- milestone	Ĩ	
We will work in partnership to deliver the Medically Assisted Treatment Standards and the objectives of the national mission	Develop & deliver the Medically Assisted Treatment Standards- milestone		
We will work with partners to deliver a Cowal hub that offers a one stop shop to support services including, advocacy, GP practice staff, drug and alcohol treatment services, etc. If successful we plan to develop hubs in other localities	Develop & deliver the Cowal Hub- milestone		
We will assess the needs analysis and move forward with a revised approach to support for children and young people affected by their own or another's substance use	Develop & deliver a plan to support children and young people affected by their own or another's substance use - milestone	Ŕ	
Na	tional Performance		
Performance Outcomes	Progress Measures	Source	
90% of people referred for help with their drug or alcohol problem will wait no longer than three weeks for treatment that supports their recovery	Drug and Alcohol Treatment Waiting Times - Datasets - Scottish Health and Social Care Open Data (nhs.scot)Dashboard - Alcohol related hospital statistics - Scotland financial year 2020 to 2021 - Alcohol related hospital statistics - Publications - Public Health Scotland		
Scottish Health Survey- Alcohol Consumption	Scottish Health Survey (shinyapps.io)		
National Records for Scotland – Drug Deaths	Drug-related Deaths in Scotland in 2020 National Records of Scotland (nrscotland.gov.uk)		

Carers			
Local Performance			
What we will do	How we will know	Source	Timescale
All Carers are identified at the earliest opportunity and offered	Ensure all carers identified are offered support to assist them	F	
support to assist them in their caring role	in their caring role- milestone		
Young Carers are supported with their Caring roles and	Ensure all young carers identified are offered support to	ا کے ⊾	
enabled to be children and young people first	assist them in their caring role- milestone		
Mental and physical health of Carers is promoted by ensuring that they can access or be signposted to appropriate advice, support and services to enable them to enjoy a life outside their caring role	Ensure carers are sign posted to appropriate support- milestone		
Carers have access to information and advice about their rights and entitlements to ensure they are free from disadvantage or discrimination in relation to their caring role	Ensure carers have access to information and advice they need- milestone		
People who provide care are supported to look after their own health and wellbeing which includes reducing any negative impact of their caring role on their own health and wellbeing	Ensure that people providing care are supported to look after themselves reducing any negative impact on their caring role- milestone		
Na	ational Performance		
Performance Outcomes	Progress Measure	Source	
Health and Care Experience Survey	Health and Care Experience Survey - gov.scot (www.gov.scot)		
	NI-8 % of carers who feel supported to continue in their caring role		
	People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and well-being.		
Carers Census, Scotland	Carers Census, Scotland, 2019-20 and 2020-21 - gov.scot (www.gov.scot)		

Prevention Programme			
Local Performance			
What will we do	How we will know	Source	Timescale
In preparation of the proposed National Care Service and the plan to increase prevention and early intervention the Transformation Board has agreed that we elevate this work stream to consider all aspects of prevention across our health and social care services.	 Prioritising workforce education on health behaviour change - milestone Consultation and engagement with public and staff to evaluate readiness for prevention and how the community wish to engage with this approach- milestone Collate ideas to increase prevention and early intervention in preparation for National Care Service roll out- milestone 		
Na	ational Performance		
Performance Outcomes	Progress Measures	Source	
National Care Service Review	A National Care Service for Scotland - Scottish Government - Citizen Space (consult.gov.scot)		
A&B Joint Strategic Needs Assessment	Joint Strategic Needs Assessment (JSNA) Healthy Argyll and Bute		

Technology Enabled Care			
Local Performance			
Performance Outcomes (What we will do)	Progress Measure	Source	Timescale
Over the next three years we intend to increase the use of	Monitor and review the number of clients with a digital		
digital services and further develop TEC services within	solution in place		
Community Teams to			
ensure it is a core service.			
We will also further develop 'Attend Anywhere' clinics in		- E	
Dermatology, Respiratory and Gynaecology pressure	Develop and delivery of 'Attend Anywhere' clinics	<u>ک</u> 📕	
specialities significantly reducing travel for appointments.			
The use of home health monitoring will be expanded to help for			
example titrate medication to clients, freeing up staffs time to offer more direct patient care.	responded to within the appropriate timescale		
We will also complete our new Argyll and Bute TEC strategy,	Deliver the Argyll and Bute TEC strategy - milestone		
which will include the shift from Analogue to Digital technology.			
Na	tional Performance		
Performance Outcomes	Progress Measure	Source	
	https://scotland.shinyapps.io/nhs-social-care/		
Social Care Information Dashboard – Community Alarms/Telecare			
Technology Enabled Care – Benchmarking Network	Technology Enabled Care (TEC) TEC Scotland		

Corporate Services			
Local Performance			
What we will do	How we will know	Source	Timescale
Continue with co-location of health and social care corporate staff to work together in the same locations and in the same teams both physically & virtually	Use co-location of health, social care and corporate staff to continue to reduced number of buildings and estate- milestone		
Integrate health and social work administration and implement digital technology- progress digital health and care record	Improve and deliver productivity benchmark targets- milestone	<i>L</i>	
Facilitate and support agile and mobile working for community based staff across the health and social car partnership including the independent sector	Significant cost reduction in corporate services of between 10-20% (To be confirmed)- milestone		
Progressing the plan to implement a single health, social care, and education catering service in Argyll and Bute	Implement a single health , social care and education catering service- milestone	Ĩ	
Continue to improve the cost and use of Health and Social care business fleet to improve service to users and reduce cost and CO2 footprint achieve 2025 target	Ensure more efficient fleet services a reduce CO2 footprint and costs for 2025- milestone		
Na	tional Performance		
Performance Outcomes	Progress Measures	Source	
Ensure that staff want to work in Argyll & Bute HSCP	NI 10- Percentage of staff who say they would recommend their workplace as a good place to work		
We will deliver our 6 outcomes and make Argyll and Bute a place people choose to Live, Learn, Work and Do Business	 Our Economy is diverse and thriving We have an infrastructure that supports sustainable growth Education skills and training maximise opportunities for all Children and young people have the best possible start People live active, healthier and independent lives People will live in safer and stronger communities <u>corporate_plan_2018_181119_v2.pdf (argyll-bute.gov.uk)</u> 		

Allied Health Professionals			
Local Performance			
Performance Outcomes (What we will do)	Progress Measure	Source	Timescale
Increase capacity of AHP professions to deliver preventative and early intervention, progress to prehab and preablement as well as rehab and reablement	Ensure appropriate staffing levels within all AHP Services- milestone		
	Deliver on NHS Highland Remobilisation Plan 20221-22	<i>į</i> Öj	
	Embed OT and Physiotherapy into primary care as part of primary care modernisation- milestone		
	Increased our rehabilitation skills in all areas to support major trauma, long-term conditions and neurological conditions and diseases- milestone		
	Recruitment of a Housing OT to support assessments for adaptations to individual housing- milestone		
Na	ational Performance		
Performance Outcomes	Progress Measure	Source	
To maximise opportunities associated with delivering high quality care whilst maintaining people's independence, moving from institution centred and service led care delivery to community based, decentralised care delivery	NI 12 Rate of Emergency Admissions per 100,000NI14 Readmissions to hospital within 28 days per 100,000NI 15 proportion of last 6 months of life spent at home or in a community settingMSG 3.1- Number of A&E attendancesRemobilisation June 2021.pdf (scot.nhs.uk)		
Community Health Activity Dataset (CHAD)	Health and Social Care Community Health Activity Data Health Topics ISD Scotland		

Digital Health & Care Strategy			
L	Local Performance		
Performance Outcomes (What we will do)	Progress Measure	Source	Timescale
The HSCP will progress its digital modernisation by focusing on the 6 priority areas	 Continue with co-location of health and social care corporate staff to work together in the same locations and in the same teams both physically & virtually Integrate health and social work administration and implement digital technology- progress digital health and care record Facilitate and support agile and mobile working for community based staff across the health and social car partnership including the independent sector Modernise and automate our admin processes and free up staff resource to support front line services Harness the opportunities of "big data2 and the internet of things to improve services to users, patient and clients and reduce burden of work on staff Provide enhanced training and support to develop a digitally skilled workforce across health and care enhancing digital literacy 		
Na	ational Performance		
Performance Outcomes	Progress Measure	Source	
Scottish Government- Digital First Improvement Project	Digital Digital First Improvement Project Digital (blogs.gov.scot)	Ĩ	
Argyll & Bute HSCP Digital Modernisation Strategy 2022-2025	Health and Social Care Partnership (argyll-bute.gov.uk)	<u> </u>	
Argyll & Bute ICT AND Digital Strategy 2021-2024	ICT and Digital Strategy 2021 - 2024 (argyll-bute.gov.uk)	ŹÖŢ	

Right Care Right Time			
Local Performance			
Performance Outcomes (What we will do)	Progress Measure	Source	Timescale
Enhancing community services to keep people at home, carry out increased assessment at home rather than in hospital and to increase reablement and independence to reduce dependency on care at home.	 Assessment Increase in assessments carried out at home rather than hospital. Evidence of a reduction in the number of people waiting for an assessment. Evidence of a reduction in the length of time people are waiting for an assessment Care at Home Numbers of people waiting for assessment of care Numbers of people waiting for care Unmet hours reduced TEC/Equipment Increase in the use of community equipment and technology to enable care, or other digital resources to support care provision. Evidence of resource to support the use of technology and digital resource 		
Minimising delay when in hospital with robust community pull back home, a streamlined and clear process for planning discharge and aiming to reduce the need for admission for some procedures, this can be known as Interface Care	 Delayed Discharges Number of people delayed in their discharge from hospital. Significant reductions in delayed discharge and occupied bed days Number of people moved to interim care, number of people moved on from interim care and average length of stay 		
Performance Outcomes	Progress Measure	Source	

Eligibility Criteria & Waiting Times	Eligibility criteria and waiting times - gov.scot (www.gov.scot)		
Delayed Discharge	Delayed Discharges in NHSScotland - Datasets - Scottish Health and Social Care Open Data		
Social Care Information Dashboard – Community Alarms/Telecare	https://scotland.shinyapps.io/nhs-social-care/		
Technology Enabled Care – Benchmarking Network	Technology Enabled Care (TEC) TEC Scotland	Ĩ	