





Success Measure	Target FQ2 16/17	Actual FQ2 16/17	Traffic Light	Trend	Comments
AC1 - % of Older People receiving Care in the Community	80%	75%	Red	Descending	IJB - Balance of Care - August 2016 The work on the new HSCP quality and finance plan is now underway. To help us achieve our target of 80% we need to follow through on our re-design proposals as detailed in the quality and finance plan. It will take a further period of time across both East and West and will be led by the Heads of Service Adult Care and with the support of Locality Managers and Local Area Managers. Actions to address current/future barriers The aim is clearly to shift resources from hospital and care home beds to supporting older people to live at home or in community settings Reduce the number of hospital beds across East and West through re-design Improve the process around the collation of data in relation to the balance of care ensuring improved accuracy. Additional support requirements The balance of care will

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CC1 Affordable social sector new builds	51	51	Green	Ascending	On target to achieve the target of 110 completions before the year end (31/03/17)
MAKI - % of Older People receiving Care in the Community	80%	71%	Red	Ascending	
AC5 - Total No of Delayed Discharge Clients from A&B	12	19	Red	Constant	IJB - NHS Highland Delayed Discharge - August 2016 The August performance in relation to delayed discharge is a total of 18 delays within NHS Highland. The actions below describe some of the current actions we are undertaking to improve our performance. There are two key areas of interest currently and they are 1/ increasing our pool of assessment staff and 2/ increase availability of care at home packages in the west. Action identified to address current/future barriers 1. We have successfully made the administrative and operational changes to the reporting timescales and reporting of DD internally as per instructions of the Scottish Government. Our staff completed the necessary activity on the Edison system as per new timescales and this is now embedded in practice. 2. We have merged our unscheduled care improvement work and continuous improvement activity around delayed discharge with our management teams to ensure there is no duplication of effort as we go forward. 3. In May we updated our guidance and re-launched our AWI guidance which includes the use of 13ZA guidance. This has had a positive effect on our exemption coded delays with only one person currently delayed as a result of AWI.

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HMIE positive School Evaluations - MAKI Sec	75%	100%		Constant	No inspections
LEAMS - MAKI Kintyre	73	70	Red	Descending	Following the FQ2 period, all areas and monthly returns will be evaluated, to look at the overall performance in relation to the new schedules following the service choices implementation and the necessary alterations to frequencies will be made, within the existing budget to ensure a good level of performance is retained and where possible improve.
Householder Planning Apps: Ave no of Weeks to Determine - MAKI	8 weeks	8.8 weeks	Red	Descending	Awaiting commentary