

Agenda Item	9
Report No	HCW-06-26

The Highland Council

Committee: Health, Social Care and Wellbeing

Date: 4 February 2025

Report Title: Quarterly Performance Monitoring Report – Q3 2025/2026

Report By: Assistant Chief Executive – People

1. Purpose/Executive Summary

1.1 This report provides Members with the Q3 2025/2026 performance monitoring position for the Health & Social Care Service.

1.2 This report provides the following performance information:

- Corporate Indicators.
- Contribution to the Performance Plan.
- Statutory Performance Indicators (SPIs) out with the Performance Plan.
- Service Plan progress.

Additional performance information such as longer term trend analysis and comparisons against Highland Council's family group average as well as the national picture is available via the [Local Government Benchmarking Data](#) if required.

1.3 Information is also included in relation to those indicators which are relevant for Adult Care Services. The Committee will be aware of services delivered by NHS Highland that form part of separate assurance reporting.

1.4 The content and structure are intended to:

- assist Member scrutiny and performance management;
- inform decision making to aid continuous improvement, and
- provide transparency and accessibility.

2. Recommendations

2.1 Members are asked to:

- i. Scrutinise and **note** the performance information for the Health & Social Care Service;
- ii. **Note** the change to absence reporting to align with Chief Officer structure;
- iii. **Note** the changes to presentation of the Health & Social Care Service data in sections 6-8 in order to more clearly show alignment between Performance Indicators and Performance Plan commitments; and

- iv. **Note** the inclusion of SPI's out with the Performance Plan to further support transparency and scrutiny of performance reporting.

3. Implications

- 3.1 **Resource:** There are no resource implications arising as a direct consequence of this report.
- 3.2 **Legal:** This report contributes to the Council's statutory duties to report performance and secure best value in terms of Section 1(1)(a) of the Local Government Act 1992, and Section 1 of the Local Government in Scotland Act 2003, respectively.
- 3.3 **Risk:** Risk implications will be kept under regular review and any risks identified reported to future Committees.
- 3.4 **Health and Safety (risks arising from changes to plant, equipment, process, or people):** There are no immediate health and safety implications arising from this report.
- 3.5 **Gaelic:** There are no implications arising as a direct result of this report.

4. Impacts

- 4.1 In Highland, all policies, strategies or service changes are subject to an integrated screening for impact for Equalities, Poverty and Human Rights, Children's Rights and Wellbeing, Climate Change, Islands and Mainland Rural Communities, and Data Protection. Where identified as required, a full impact assessment will be undertaken.
- 4.2 Considering impacts is a core part of the decision-making process and needs to inform the decision-making process. When taking any decision, Members must give due regard to the findings of any assessment.
- 4.3 This is a monitoring report and therefore an impact assessment is not required.

5. Service Performance - Corporate Indicators

- 5.1 Service performance in relation to Absence, Complaints, FOIs, and Invoice Payments are set out in the following sub-sections.
- 5.2 **Health & Social Care Sickness Absence**
 - 5.2.1 Staff absence is a nationally benchmarked indicator. Effective absence management supports staff, maintains productivity, and contributes to the Council's benchmarked performance. The Q2 2025/2026 figures are shown split by Chief Officer as opposed to the Health & Social Care service as a whole to reflect the new organisational structure. Previous quarters are shown for the whole service for reference.

Service Sickness Absence - Health, Social Care & Wellbeing

Average number working days per employee lost through sickness absence

Average Days Lost	Q4 23/24	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26	Q2 25/26
Health and Social Care	3.24	3.41	3.22	3.89	4.44	4.76	
Highland Council	3.48	3.24	2.54	3.42	3.95	3.55	

Average Days Lost	Q2 25/26	Q3 25/26	Q4 25/26	Q1 26/27	Q2 26/27	Q3 26/27	Q4 26/27	Q1 27/28
Health and Social Care	5.08							
Integrated People Services	2.08							
Highland Council	3.02							

5.2.2 Absence data for Q3 2025/2026 was not available within the timeline for writing this report.

5.3 Service Complaints Response Times

5.3.1 Monitoring complaints provides important feedback which can facilitate decision making and service design. Each Service is responsible for responding to complaints which are issued on their behalf by the Complaints and Information Team (CRIT).

5.3.2

Service Complaints - Health and Social Care

Number of closed complaints and the % compliant with the legislative timescale

Frontline Resolution within 5 days

	Q4 23/24		Q1 24/25		Q2 24/25		Q3 24/25		Q4 24/25		Q1 25/26		Q2 25/26		Q3 25/26	
Health and Social Care	7	71 %	2	50 %	1	100 %	3	100 %	4	75 %	4	75 %	7	86 %	2	100 %
Highland Council	189	76 %	219	84 %	196	78 %	155	88 %	183	87 %	177	92 %	223	90 %	200	85 %

Investigation Resolution within 20 days

	Q4 23/24		Q1 24/25		Q2 24/25		Q3 24/25		Q4 24/25		Q1 25/26		Q2 25/26		Q3 25/26	
Health and Social Care	6	0 %	4	25 %	5	20 %	10	40 %	4	50 %	8	25 %	10	30 %	5	40 %
Highland Council	98	46 %	86	47 %	101	57 %	90	42 %	71	51 %	68	47 %	86	40 %	94	55 %

Escalated Resolution within 20 days

	Q4 23/24		Q1 24/25		Q2 24/25		Q3 24/25		Q4 24/25		Q1 25/26		Q2 25/26		Q3 25/26	
Health and Social Care	0		1	100 %	1	0 %	1	0 %	0		1	100 %	2	50 %	2	0 %
Highland Council	34	35 %	47	32 %	28	50 %	26	46 %	34	44 %	30	33 %	27	26 %	22	27 %

5.3.3 It should be noted that many Social Work complaints are by their very nature complex, and the time needed to thoroughly investigate and respond to these complaints in an appropriate manner is often significantly longer than 20 days. In many instances, an extension of time is agreed in advance with the complainant who is entitled to receive a fully investigated report rather than one which is compiled to meet the 20-day timescale. In cases where this happens, the agreed extension to time **is not** taken into account in the figures shown above. It should also be noted that the total number of formal complaints is very small and so any failure to meet the deadlines has a disproportionate impact on the percentage figure.

5.4 Service Freedom of Information (FOI) Response Times

5.4.1 FOI requests are co-ordinated by CRIT in collaboration with Service teams which collate the information relevant to the request.

5.4.2 The performance for FOI response times during Q3 against a corporate target of 90% was as follows:

Service Freedom of Information Requests - Health and Social Care

% of FOIs closed compliant with the legislative timescale

% FOIs Compliant - Health and Social Care	Q4 23/24		Q1 24/25		Q2 24/25		Q3 24/25		Q4 24/25		Q1 25/26		Q2 25/26		Q3 25/26	
	35	74 %	40	90 %	42	81 %	44	68 %	52	73 %	56	88 %	45	89 %	38	74 %

% FOIs Compliant - Highland Council	Q4 23/24		Q1 24/25		Q2 24/25		Q3 24/25		Q4 24/25		Q1 25/26		Q2 25/26		Q3 25/26	
	549	77 %	512	81 %	481	76 %	570	73 %	617	71 %	577	81 %	601	77 %	581	73 %

Tables display the number of FOIs closed within the quarter and % of those that were compliant with the legislative timescale (20 working days) for the service and the Highland Council overall. The Scottish Information Commissioner requires the Council to achieve a minimum compliance rate of 90%.

5.4.3 All teams within the Health & Social Care Service continue to take steps to monitor performance and to identify further improvement actions.

5.5 Service Invoice Payment Times

5.5.1 These indicators measure the Council's efficiency at paying invoices within 30 days and 10 days of receipt as a percentage of all invoices paid. While payment of invoices within 30 days of receipt is a Council Statutory Performance Indicator, the Council also monitors the number of invoices paid within 10 days of receipt.

The targets for performance are 95% and 77% respectively for 30- and 10-days.

5.5.2

Service Invoice Payment Times - Health and Social Care

Invoice Payment within 30 days	Q4 23/24	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26	Q2 25/26	Q3 25/26
Health and Social Care	97.5 %	96.4 %	95.8 %	97.5 %	97.2 %	97.0 %	97.4 %	96.8 %
Highland Council	93.6 %	87.7 %	91.4 %	92.9 %	92.9 %	93.0 %	94.8 %	94.3 %

Invoice Payment less than 10 days	Q4 23/24	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26	Q2 25/26	Q3 25/26
Health and Social Care	89.0 %	86.2 %	90.8 %	91.9 %	85.3 %	87.6 %	89.9 %	78.0 %
Highland Council	69.7 %	57.0 %	68.5 %	63.8 %	63.3 %	64.7 %	72.5 %	72.3 %

6. Contribution to the Performance Plan

All Performance Plan elements, including relevant Statutory Performance Indicators (SPIs), under the Health & Social Care Service have been included in the Strategic Outcomes below.

6.1

Corporate Cluster: Contribution to the Performance Plan								
Strategic Priority 1 Fair & Caring Highland	Period	Data	Period	Data	Period	Data	Target Value	Completion/ Update Date
% of Children and Young People in formal kinship care CP1.08	FY 22/23	18.4 %	FY 23/24	19.2 %	FY 24/25	19.2 %	23.0 %	annual update June
% of Children and Young People in care in the community CP1.08 CHN09	AY 22/23	87.50 %	AY 23/24	86.80 %	AY 24/25	87.27 %		annual update December
Establish a pilot funded by Whole Family Wellbeing Fund in Lochaber CP1.08	Q1 25/26		Q2 25/26		Q3 25/26			Completed Q4 23/24
No. of H&SC staff trained in Solihull Approach - begins 2023/24 CP1.08	FY 22/23		FY 23/24	25	FY 24/25	101	90	
The average number of children and young people accommodated outwith Highland - Annual CP1.08	FY 22/23	20	FY 23/24	13	FY 24/25	17	17	annual update June
The number of foster carer approvals - annual CP1.08	FY 22/23	8	FY 23/24	10	FY 24/25	2	10	annual update June
Establish 4-yr pilot project re Non-Fatal Overdoses in Inverness CP1.09	Q1 25/26		Q2 25/26		Q3 25/26			Completed Q4 24/25
Strategic Priority 2 Resilient and Sustainable Communities	Period	Data	Period	Data	Period	Data	Target Value	Completion/ Update Date
Direct payments spend on 18+ adults CP2.05 SW02	FY 22/23	7.25 %	FY 23/24	9.07 %	FY 24/25	9.70 %	9.40 %	annual update December
Strategic Priority 3 Accessible and Sustainable Highland Homes	Period	Data	Period	Data	Period	Data	Target Value	Completion/ Update Date
% of people aged 65+ with long-term care needs receiving personal care at home CP2.05 SW03a	FY 22/23	64.30 %	FY 23/24	55.40 %	FY 24/25	55.00 %	62.80 %	annual update December
HC and NHS develop strategic proposal to reduce no. residents in Residential Care Homes CP3.05	Q1 25/26		Q2 25/26		Q3 25/26			Completed Q4 24/25
COMPLETED								
Strategic Priority 5 A Resilient and Sustainable Council	Period	Data	Period	Data	Period	Data	Target Value	Completion/ Update Date
ERDs being completed - HSC CP5.01	Q1 25/26	Completed	Q2 25/26		Q3 25/26			Completed Q1 25/26

7. Statutory Performance Indicators (SPIs) Outwith the Performance Plan

Health, Social Care & Wellbeing: SPIs						
SPIs not monitored in Performance Plan	Period	Data	Period	Data	Target Value	Completion/ Update Date
No of accommodated children and young people - residential	AY 23/24	57	AY 24/25	53		Annual Update January
% of child protection re-registrations within 18 months CHN22	FY 23/24	3.80 %	FY 24/25	10.56 %		Annual Update June
No. children needing to live away from the family home but supported in kinship care increases - Monthly	M8 25/26	28.4 %	M9 25/26	29.0 %		Monthly Update
NEW % of statutory health assessments started within 4 weeks of a new episode of care - Quarterly	Q2 25/26	78.1 %	Q3 25/26			Quarterly Update
% of adults supported at home impact of services SW04b	2021 - 2023	84.3 %	2023 - 2025	73.6 %		Update December every 2 yrs
JS 01 % CJSW reports submitted to court by due date - Quarterly	Q2 25/26	94.8 %	Q3 25/26	91.0 %		Quarterly Update
JS 02 % offenders on new Community Payback Orders (Supervision) seen within 5 working days - Quarterly	Q2 25/26	67.3 %	Q3 25/26	39.2 %		Quarterly Update
JS 03 % offenders on new Community Payback Orders (Unpaid Work) 1st placement within 7 working days - Quarterly	Q2 25/26	46.6 %	Q3 25/26	37.6 %		Quarterly Update
JS 04 % Community Payback Order (Unpaid Work) Beneficiaries	FY 23/24	100.00 %	FY 24/25			Annual Update Sept
JS 05 % Lvl 3 MAPPA cases reviewed once every 6 wks - Quarterly	Q2 25/26	100.0 %	Q3 25/26	100.0 %		Quarterly Update
JS 06 % Lvl 2 MAPPA cases reviewed once every 12 wks - Quarterly	Q2 25/26	100.0 %	Q3 25/26	100.0 %		Quarterly Update
The average AWI Waiting List - Annual	FY 23/24	6	FY 24/25	8		Annual Update June

8. Remaining Service Plan Items - Progress

- 8.1 The dashboards have been updated to remove elements that were previously reported as complete or archived, as well as elements that appear in multiple plans (i.e. in the Performance Plan or as an SPI).

8.2

Health and Social Care						
Actions PIs being Monitored in Service Plan	Period	Data	Period	Data	Target Value	Completion/ Update Date
% referrals to Family Nurse Partnership programme	M8 25/26	83.0 %	M9 25/26	83.0 %	85.0 %	
% Spend on Out of Authority accommodation	FY 23/24	28 %	FY 24/25	62 %	28 %	changed from quarterly to annual reporting Oct24
Home in Highland: No. Children in secure accommodation	M8 25/26	3	M9 25/26	2	3	
Home in Highland: No. of accommodated children and young people - residential	M8 25/26	53	M9 25/26	56	55	
No. of accommodated children and young people	M8 25/26	342	M9 25/26	345	288	
No. 'Promise Conversation Cafes' held each year - due to start reporting FY23/24	FY 23/24	5	FY 24/25	6	6	
No. assessments for Bail Supervision	Q2 25/26	86	Q3 25/26		0	
Uptake of specialist CP advice and guidance to health staff Qtr	Q2 25/26	402	Q3 25/26	551		
Uptake of specialist CP advice/guidance to health staff - Month	M8 25/26	180	M9 25/26	185		
Mental Health Officer Posts Total FTE	Q2 25/26	20.00	Q3 25/26	20.00	18.86	

Designation: Assistant Chief Executive - People

Date: 14 January 2026

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Background Papers: N/A

Appendices: N/A