



# Argyll & Bute Health & Social Care Partnership

# **Integrated Joint Board**

Agenda item:

Date of Meeting: 28th September 2016

Title of Report: Argyll & Bute HSCP- Performance Report National Health and Well Being Outcome indicators

Presented by: Stephen Whiston, Head of Strategic Planning & Performance

The Integrated Joint Board is asked to:

- Note the HSCP performance against the 9 National Health and Well Being Outcome Indicators.
- Note the progress in with regard to the HSCP performance against Outcome 1 and 2
- Note the action identified to address deficiencies in performance as detailed in the exception report
- Note the national review NHS targets and the Health and Wellbeing integration indicators

## 1. Background

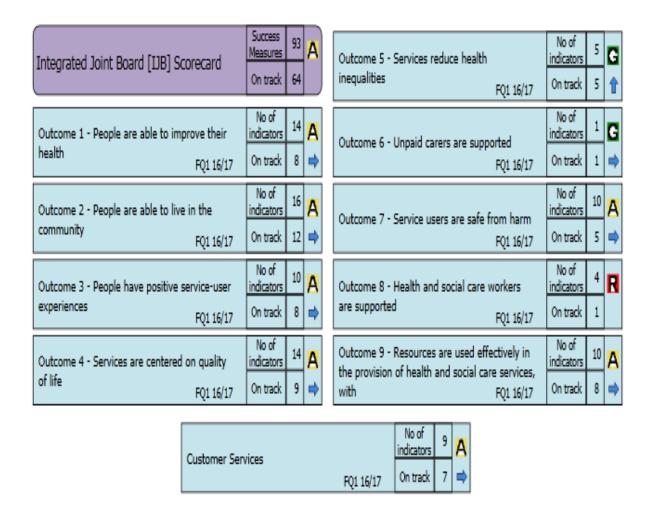
The national health and wellbeing outcomes provide a strategic framework for the planning and delivery of health and social care services. These suites of outcomes, together, focus on improving the experiences and quality of services for people using those services, carers and their families. These outcomes focus on improving how services are provided, as well as, the difference that integrated health and social care services should make, for individuals.

Currently there are 9 key National Health and Wellbeing Outcomes (NHWBO) and 23 sub-indicators which form the basis of the reporting requirement for the HSCP.

The IJB requested a detailed examination of progress against two of the NHWBO indicators at each of its Board meeting. This report presents information on Outcomes 1 and 2.

# 2. HSCP Performance against the NHWB outcomes for Financial Quarter one 2016/17

Table 1 below provides a Pyramid summary notes there are currently 93 success measures and of these 64 are currently reported as being on track.



Please note that there is a reduction in the overall number of scorecard measures from the original 95 measures reported for FQ4 15/16 to 93 for FQ1 16/17. This reduction has occurred due to a rationalisation by the Argyll and Bute Council Pyramid Team of reporting of both sickness and absence attendance and PRD measures within Outcome 8.

Previously there had been separate performance reporting of Adult Care and Childrens and Families this has now been made a single cumulative total. This has effectively resulted in a reduction to 4 measures in Outcome 8 for 16/17 against the previous 6 reported for FQ4 15/16.

#### 3. Detailed Performance Report Outcome Indicators 1 and 2

**Outcome 1** - People are able to look after and improve their own health and wellbeing and live in good health for longer.

There are 14 indicators being measured against this outcome, 8 are on track, 6 are off track.

The performance and exception report attached provides the detail of the indicators and the work in hand to bring them back onto target. The six off track indicators are listed below:

- AC1 % of Older People receiving Care in the Community
- AC15 No waiting more than 12 weeks for homecare service assessment authorised.
- No of alcohol brief interventions in line with SIGN 74 guidelines
- NHS-H7 Proportion of new-born children breastfed
- No of ongoing waits >4 wks for the 8 key diagnostic tests
- % >18 type 1 Diabetics with an insulin pump

**Outcome 2** - People, including those with disabilities or long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.

There are 16 indicators being measured against this outcome, 12 are on track and 4 are off track.

The performance and exception report attached provides the detail of the indicators and the work in hand to bring them back onto target. The four off track indicators are listed below:

- Emergency Admissions bed day rate
- AC5 Total No of Delayed Discharge Clients from A&B
- CPC01.4.4 % Waiting time from a patient's referral to treatment from CAMHS
- % of patients who wait no longer than 18 wks for Psychological therapies

# 4 National Review of NHS targets and the Health and Wellbeing integration indicators

The Scottish Government has appointed Former Chief Medical Officer Sir Harry Burns (9<sup>th</sup> September 2016) as the independent chair of the national review into targets and indicators for health and social care.

The review will work with service users, staff, professional bodies, and providers, to ensure targets and performance indicators lead to the best outcomes for people being cared for, whether in hospital, primary care, community care or social care services.

The expectation is the measurement framework will support delivery of the Scottish Government strategic priorities around improving population health and shifting resources towards more community-based and preventative approaches.

The review is expected to deliver a single suite of indicators across health and social care simplifying the measurement landscape and providing an important overview of the difference the health and social care system is making to the lives of the people of Scotland.

The review is expected to report its initial recommendations by the spring 2017.

## 5 Governance Implications

# 5.1 Contribution to IJB Objectives

The PPMF is in line with the IJB objectives as detailed in its strategic plan.

#### 5.2 Financial

There are a number of NHWBO indicators which support the quality and financial performance of the HSCP including productivity, value for money and efficiency.

#### 5.3 Staff Governance

A number of indicators under outcome 8 are pertinent for staff governance purposes

### 5.4 Planning for Fairness:

The NHWBO indictors help provide an indication on progress in addressing health inequalities.

#### 5.5 Risk

Ensuring timely and accurate performance information is essential to mitigate any risk to the IJB governance, performance management and accountability.

#### 5.6 Clinical and Care Governance

A number of the NHWBO indicators support the assurance of health and care governance and should be considered alongside that report

# 5.7 Public Engagement and Communication

A number of the NHWBO indicators support user and patient experience/assessment of the HSCP services and planning processes.