Argyll & Bute Health & Social Care Partnership

Integrated Joint Board

Agenda item:

Date of Meeting: November 2017

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 |(IJB) is asked to:

- Note the HSCP performance against National Health and Well Being Outcomes 5&6 for FQ2 17/18
- Note the actions identified to address deficiencies in performance as detailed in the exception reports
- Note the performance against Integration Authorities Performance Indicators- September 2017

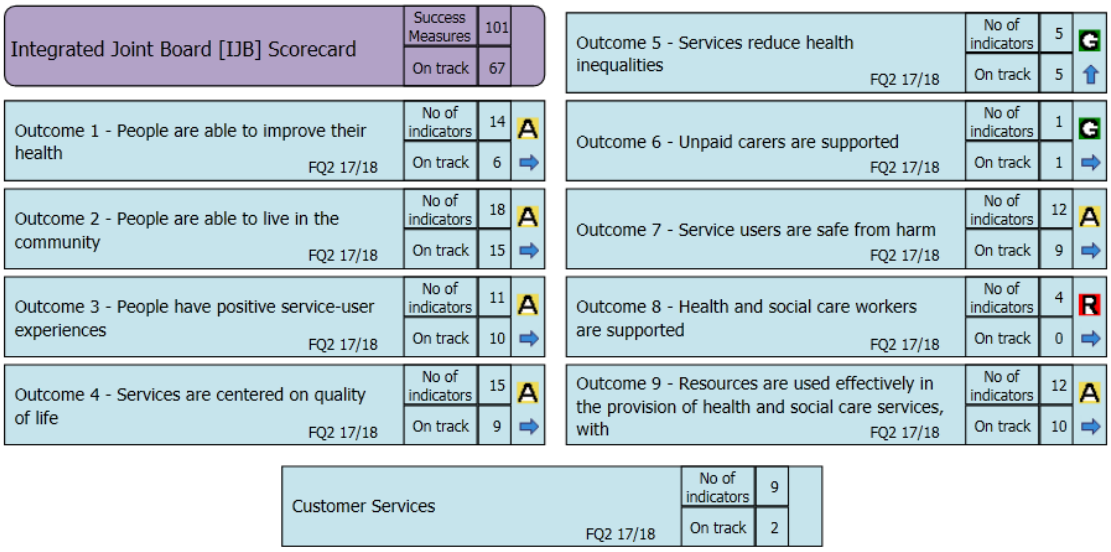
1. Background

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

2 HSCP Performance against the NHWB outcomes for Financial Quarter 2 17/18

Figure 1 below provides a summary of the performance on the pyramid reporting system, noting the 101 scorecard success measures and of these 67 are currently reported as being on track for FQ2 17/18



Outcome 5: 5 of 5 measures are all reporting on track.

Outcome 6: 1 of 1 measure showing as on track.

3 Detailed Performance Report Outcome Indicators 5 & 6 (FQ2 17/18)

Outcome 5 – Services reduce health inequalities

- Rate of emergency admissions per 100,000 population for adults
- Rate of premature mortality per 100,000 population
- AC21 <=3 weeks wait between SM referral & 1st treatment
- No of treatment time guarantee completed waits >12 weeks
- No of treatment time guarantee ongoing waits >12 weeks

Outcome 6 – Unpaid carers are supported

- % of carers who feel supported to continue in their caring role

4 Integration Authorities Performance Indicators- FQ2 17/18 (Jul - Sep 2017)

Measures	Sub-Indicators	Target	A&B/ GG&C	Bute	Cowal	H &L	Islay & Jura	Kintyre	Mid Argyll	Mull, Iona, Coll, Tiree and Colonsay	Oban & Lorn	Total FQ2	FQ1 17/18
Unplanned Admissions	Total number of admissions	Reducing unplanned admissions by 10%	**A&B**	29	53	0	14	40	58	16	112	**322**	**322**
			GG&C	26	80	168	5	21	22	7	19	**348**	**372**
	A&E conversion rate	Remain at current performance	**A&B**	0	33.3	0	0	50	60	45.8	22.6	**38.8**	**66.1**
			GG&C	55.6	59	25.4	75	70.6	61.3	60	56	**74.4**	**48.4**
Unplanned bed days	Total number of bed days acute specialities	Reducing bed days by between 1-10%.	**A&B**	149	334	0	41	291	310	142	571	**1838**	**1766**
			GG&C	128	465	686	44	235	142	13	25	**1738**	**1778**
	Total number of bed days mental health specialities		**A&B**	210	277	0	5	310	679	0	298	**1779**	**2277**
			GG&C	53	139	1082	0	0	0	0	0	**1274**	**1082**
A&E performance	Number of attendances *	Remain at current levels of performance	**A&B**	NK	NK	NK	NK	NK	NK	NK	443	**443**	**560**
			GG&C	36	83	544	4	17	31	5	25	**745**	**768**
	% seen within 4hrs		**A&B**	NK	NK	NK	NK	NK	NK	NK	98%	**97.9**	-
			GG&C	94%	90%	93%	75%	94%	90%	100%	100%	**93.2**	-
Delayed discharges	Total number of bed days occupied * Sep 2017	Reducing delayed discharges occupied bed days by 10%.	**A&B**	24	45	2	0	60	46	32	324	**533**	**369**
			GG&C	0	0	53	0	0	0	0	0	**53**	**127**
			Total	**24**	**45**	**55**	**0**	**60**	**46**	**32**	**324**	**586**	**496**

Note:
**** NK - Excludes Community hospital A&E activity at present only RGH and GGC units***
 # includes all patient delayed discharge reasons

In the three areas the HSCP is aiming to improve performance improvements are evidenced in reducing unplanned admissions in both Argyll and Bute and NHSGG&C hospitals and delayed discharges occupied bed days in NHS GG&C between the 2 quarters.

However, there is a worsening performance in Delayed discharge occupied bed days in Argyll and Bute and in Reducing acute and mental health occupied bed days. Operational Managers will be preparing exception reports for these measures as they have just been included on Pyramid as at 9th November.

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 outcomes 5& 6 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