# Argyll & Bute Health & Social Care Partnership

## Integrated Joint Board

**Agenda item :**

**Date of Meeting:** **1 August 2018**

**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: 1 & 2 – FQ4 17/18
- Note the actions identified to address deficiencies in performance as detailed in the exception reports.

## 1. Background

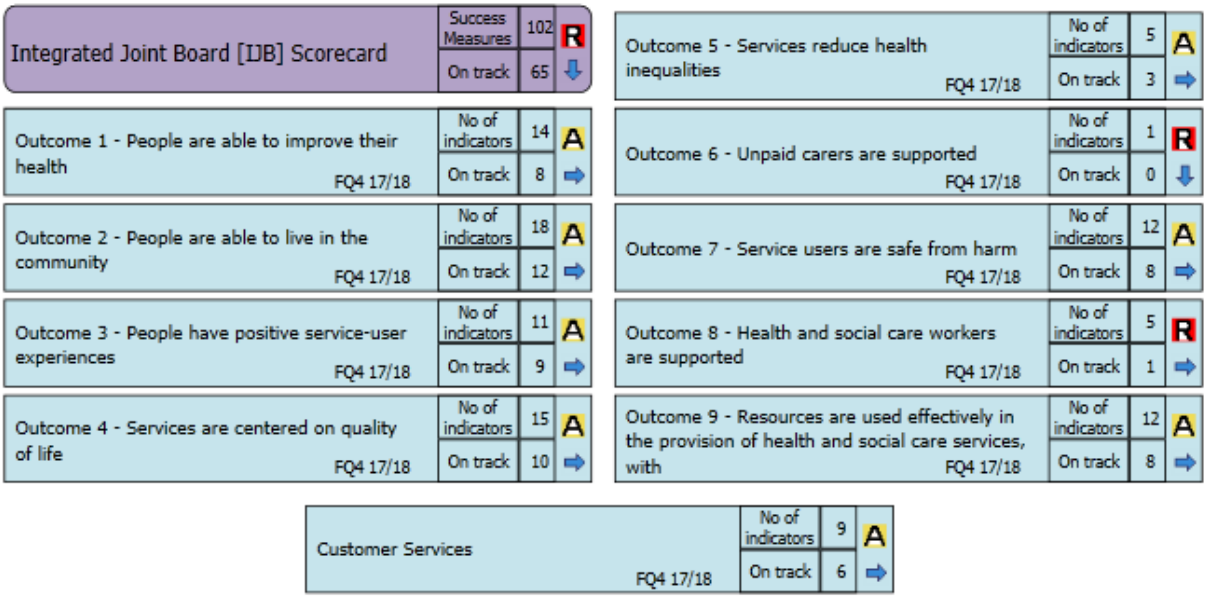
The national health and wellbeing outcomes provide a strategic framework for the planning and delivery of health and social care services. These suites of outcomes, together, focus on improving the experiences and quality of services for people using those services, carers and their families. These outcomes 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 4 17/18

Table 1 below provides a summary of the performance on the pyramid reporting system, noting the 102 scorecard success measures and of these 65 are currently reported as being on track for FQ4 17/18.

With regards to FQ1 18/19 the current reporting snapshot shows that 31 indicators are on track. It is expected that this current performance will improve as the final data submissions are collected and reported over the July/August period. FQ1 18/19 will be reported to the IJB in November.




## 2.1 FQ4 17/18 - IJB Scorecard

### Outcome 1

8 Indicators are showing on track with 6 indicators reported as off track

### Outcome: 2

12 indicators are currently on track with 6 indicators reported as off track

## 3. Details for Performance Report Outcome Indicators 1 & 2

Outcome – 1 People are able to improve their health

| | Outcome / Performance Indicator | Trend | Target | Actual | Responsible Manager |
|---|---|---|---|---|---|
| | Rate of emergency admissions per 100,000 population for adults<br>*(Linked to IJB Outcome 1,2,4,5 & 7)* | ⇑ | 11,959 | 12,066 | Lorraine Paterson |
| | AC1 - % of Older People receiving Care in the Community | ⇓ | 81 % | 74.4 % | Lorraine Paterson/Phil Cummins |
| | No of alcohol brief interventions in line with SIGN 74 guidelines | ⇑ | 1024 | 397 | Lorraine Paterson |
| | NHS-H7 - Proportion of new-born children breastfed - STANDARD | ⇓ | 33.3% | 31.9% | Alex Taylor |
| | No of ongoing waits >4 weeks for the 8 key diagnostic tests | ⇓ | 0 | 368 | Lorraine Paterson |
| | % >18 type 1 Diabetics with an insulin pump | ⇑ | 12% | 11% | Lorraine Paterson |

Outcome – 2 People are able to live in the community

| | Outcome / Performance Indicator | Trend | Target | Actual | Responsible Manager |
|---|---|---|---|---|---|
| | % of adults supported at home who agree they are supported to live as independently | ⇓ | 81% | 79% | Phil Cummins |
| | Falls rate per 1,000 population aged 65+ *(Appears as a PI in Outcomes 2,4,7,9)* | ⇑ | 22 | 26 | Lorraine Paterson |
| | AC5 - Total No of Delayed Discharge Clients from A&B | ⇓ | 12 | 28 | Phil Cummins |
| | CPC01.4.4 - % Waiting time from a patient's referral to treatment from CAMHS | ⇓ | 90% | 89% | Alex Taylor |
| | % of patients who wait no longer than 18 weeks for Psychological therapies | ⇒ | 90% | 50% | Lorraine Paterson |

## 4. MSG Measures Performance Reporting FQ3 (17/18)

| MSG Indicator | Objective | Cumulative Target for FY 17/18 | Q3 Target 17/18 | Cumulative FQ3 Performance | RAG |
|---|---|---|---|---|---|
| Unplanned Admissions | 2017/18 change: Expected target 8256 based on 5% reduction in overall total compared to FY16/17 | **8256** | **6192** | **6730** | |
| Unplanned Bed Days | 2017/18 change: Expected target 64942 based on 0.6% reduction in overall total compared to FY16/17 | **64942** | **49014** | **45802** | |
| A& E Attendances | 2017/18 change: Expected target 16079 based on sustained levels in overall total compared to FY16/17 | **16079** | **12059** | **11989** | |
| Delayed Discharges | 2017/18 change: Expected target 6403 based on 10% reduction in overall total compared to FY 16/17 | **6403** | **4797** | **5855** | |

Area specific performance for each of the 4 MSG measures can be found with Pyramid, the link is as follows:

http://pyramidlive.argyllbute.gov.uk/QPR2015/Portal/QPR.lsapi.dll?QPRPORTAL&*prmav&SES=VYn0DKG29VvoGLFvWWpmew&FMT=p&LAN=en%2c1&DTM=&RID=1040317409572032312

## 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 9 & Customer Services 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