**The Clinical & Care Governance Committee**

**Date of Meeting:** 12th May 2026

**Title of Report:** Health & Social Care Partnership - Performance Report – FQ3 2025/26 (October – December)

**Presented by:** Kristin Gillies - Head of Strategic Planning, Performance & Technology

**The Committee is asked to:**

- Acknowledge performance for FQ3 2025/26 (October –December) against latest Key Performance Indicators within the Integrated Performance Management Framework for 2025/26
- Note latest Delayed Discharge Sitrep as of 16 Feb 2026 **(Appendix 1)**
- Acknowledge latest performance against the National Health & Wellbeing Outcomes and Ministerial Steering Group Integration Indicators (**Appendix 2)**
- Acknowledge the inclusion of additional A&B HSCP performance metrics aligned to national reporting across Centre for Sustainable Delivery (CfSD) Unscheduled Care, and the Planned Care performance focus within the Operational Improvement Plan (OIP) **(Appendix 3)**

## EXECUTIVE SUMMARY

This report details performance for the Financial Quarter (FQ) 3 2025/26 (October – December). The key performance outputs are taken from the current Integrated Performance Management Framework (IPMF) Reporting Dashboard.

Overall performance for FQ3 notes 35 of 77 measures reported as on target (45%). National Delayed Discharge Sitrep and the National Health & Wellbeing Indicators performance are also provided. The HSCP Senior Leadership Team is currently reviewing the content and structure of the Integrated Performance Management Framework and has refreshed the performance metrics being presented before the IJB in a new suite of measures (Appendix 3). The new suite of measures is designed to offer a more focused approach to national pressures around Centre for Sustainable Delivery's (CfSD) Urgent & Unscheduled Care, Planned Care and NHS Highland Operational Improvement Plan (OIP), including scope for service feedback.

## 2. RECOMENDATIONS

The Clinical & Care Governance Committee is asked to:

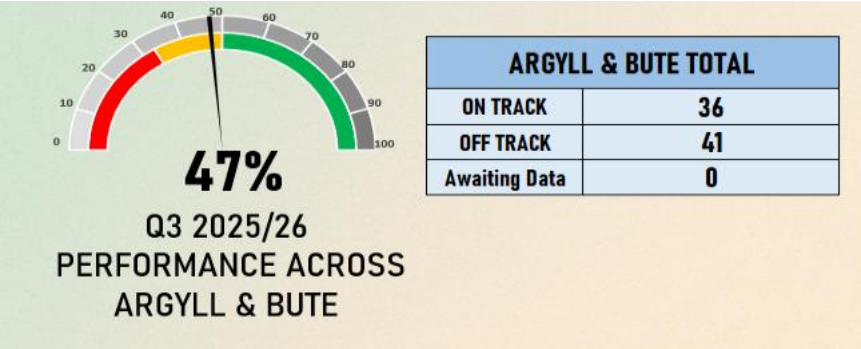
- Acknowledge performance for FQ3 2025/26 (October –December) against latest Key Performance Indicators within the Integrated Performance Management Framework for 2025/26
- Note latest Delayed Discharge Sitrep as of 16 Feb 2026 **(Appendix 1)**
- Acknowledge latest performance against the National Health & Wellbeing Outcomes and Ministerial Steering Group Integration Indicators **(Appendix 2)**
- Acknowledge the inclusion of additional A&B HSCP performance metrics aligned to national reporting across Centre for Sustainable Delivery (CfSD) Unscheduled Care, and the Planned Care performance focus within the Operational Improvement Plan (OIP) **(Appendix 3)**

## 3. DETAIL OF REPORT

The report details the HSCP (Health and Social Care Partnership) performance for FQ 3 2025/26 (October - December), highlighting key performance trends across the 77 KPIs (Key Performance Indicators). For 2025/26, the latest national update on Delayed Discharges (Appendix 1), alongside the latest performance on the National Health and Wellbeing Outcomes Indicators (Appendix 2) have been included. Additional performance metrics aligned to Urgent & Unscheduled Care, Planned Care and NHS Highland OIP NHS Highland's OIP are reported within Appendix 3.

## 4. RELEVANT DATA & INDICATORS

### 4.1 FQ3 2025/26 (October – December) Performance Summary



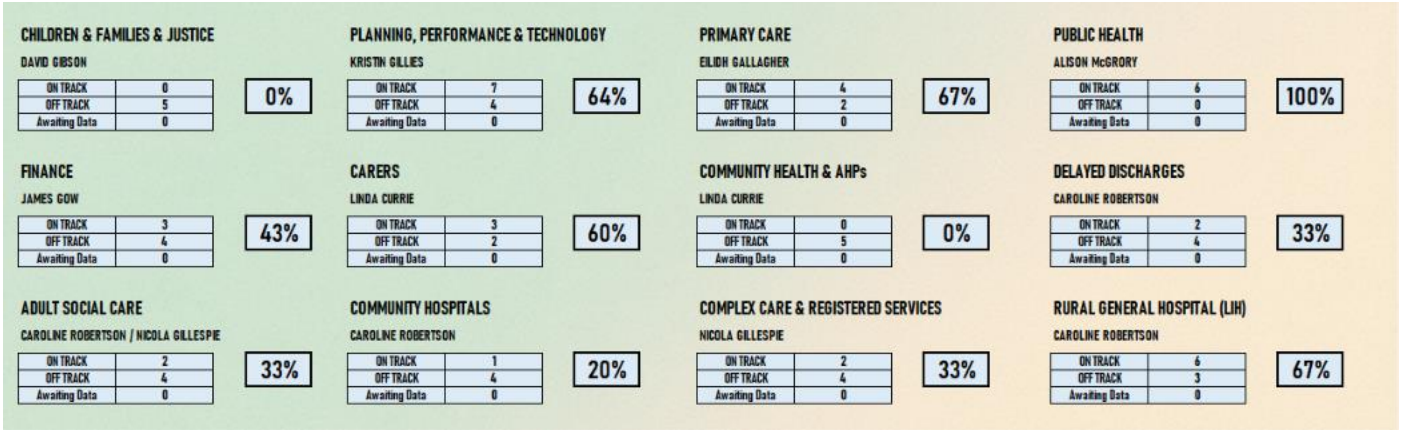

| ARGYLL & BUTE TOTAL | |
|---|---|
| ON TRACK | 36 |
| OFF TRACK | 41 |
| Awaiting Data | 0 |

Overall performance for FQ3 notes that 77 KPI's are scoring against a target, with 36 (47%) reporting as OnTrack. The KPI's report performance against the target and include the target, actual and variance and is a mix of both quantitative and qualitative indicators. The use of the green, amber and red graphics within the Dashboard is used to give an overview of the HSCP's total performance for each of the twelve services and 77 KPI's. The use of only green and red for the KPI's is used to focus delivery with regards to sustaining performance on or above target.

Additional metrics around CfSD and Planned Care are reported within Appendix 3 and will continue to be developed and threaded through A&B performance reporting, in conjunction with the current reporting cycle and the annual IPMF KPI review for 2026/27.

### 4.2 Analysis of Key Performance

This analysis identifies performance across the 12 service reporting categories within the Integrated Performance Management Framework (IPMF).




Additional metrics around CfSD and Planned Care are reporting within appendix 3, and these will continue to be developed and threaded through A&B performance reporting, in conjunction with current reporting cycle and the annual IPMF KPI review for 2026/27.

### 4.2.1 Delayed Discharges Sitrep

Overall trend performance for December 2025 notes a slight weekly variance with a weekly average of (46) delays. With regards to overall benchmarked performance, A&B remain above the Scottish average per 100,00 population. The latest Delayed Discharge sit rep per 100,000 shows increased position in Argyll & Bute HSCP with 73 noted @ 16 Feb 2026.

### 4.2.2 National Health & Wellbeing Outcome Indicators & Ministerial Steering Group Integration Indicators

The National Health and Wellbeing Outcomes provide a strategic framework for the planning and delivery of health and social care services. This suite of outcomes serves to focus on improving the experiences and quality of services for people using those services, carers, and their families. These indicators form the basis of the annual reporting requirement for Health and Social Care Partnerships across Scotland.

The national indicators will be updated and reported within A&B HSCP's Integrated Performance Management Framework to provide the national performance position alongside the local service Key Performance Indicators suite.

The latest data in relation to 26 HWBOI and MSG Indicators reports 50% on track, with 13 on track and 13 off track. An overview of A&B HSCP's latest performance against the 26 measures is reported in Appendix 1. It should be noted that reporting periods vary across the suite of national indicator measures, with some measures reported quarterly affected by national reporting data lag.

### 4.2.3 A&B HSCP performance metrics aligned to CfSD Urgent & Unscheduled Care, Planned Care NHS Highland OIP

The HSCP Senior Leadership Team is currently reviewing the content and structure of the Integrated Performance Management Framework.

This FQ3 performance report includes several metrics with closer alignment Centre for Sustainable Delivery (CfSD) Unscheduled Care, and Planned Care more aligned to the NHS Highland Boards OIP processes, with the intention of showing A&B's progress within the content of Board level performance and also to present service-led feedback across the framework. These are provided before the IJB in (Appendix 3).

This process will continue to be developed and threaded through A&B performance reporting cycles, in conjunction with the annual IPMF KPI review for 2026/27.

## 5. CONTRIBUTION TO STRATEGIC PRIORITIES

The monitoring and reporting against Key Performance Indicators using the Integrated Performance Management Framework and Dashboard ensures the HSCP is able to deliver against key strategic priorities. This in-turn is aligned with the Strategic Plan and key objectives.

## 6. GOVERNANCE IMPLICATIONS

### 6.1 Financial Impact

Financial performance is evidenced within the IPMF Dashboard ensuring best value as well as evidencing the impact and performance against organisational budget savings.

### 6.2 Staff Governance

Key performance indicators within the IPMF ensure that staff governance requirements continue to be progressed and developed include health and safety, wellbeing and new service redesign and working practices.

### 6.3 Care and Clinical Governance

Clinical Governance and patient safety remain at the core of prioritised service delivery against the new IPMF Dashboard and National Health & Wellbeing Outcomes Indicators. The new governance structure supporting the IPMF ensures that the Clinical & Care Governance Committee remain central to performance improvement. The development of the IPMF is focussed on moving away from previous traditional styles of reporting to a fully collaborative approach with Head of Service and Service Lead commentary.

## 7. PROFESSIONAL ADVISORY

Data used within the performance dashboard is fully accessible in SharePoint with data trends and forecasting are identified to give wider strategic context. This provides the HSCP professional advisors with self –service performance information to inform their role in maintaining professional standards and outcomes.

## 8. EQUALITY & DIVERSITY IMPLICATIONS

The Integrated Performance Management Framework captures relevant indictors used to inform the HSCP E&D work.

### 8.1 PROTECTED CHARACTERISTICS

Performance detailed within this report acknowledges the rights of the Child (UNCRC), Islands. Fairer Scotland, Socio-economic Duty, Equalities - protected characteristics.

## 9. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

Data use and sharing within this report and IPMF performance dashboard is covered within the Argyll and Bute Council & NHS Highland Data Sharing Agreement

## 10. RISK ASSESSMENT

Risks and mitigations associated with performance data sources and reporting are managed and identified within the monthly Performance & Improvement Team- Work Plan.

### 10.1 STRATEGIC, OPERATIONAL OR CLIMATE RISK

Performance reports are used by operational management to identify service delivery risk and to inform mitigation action accordingly.

## 11. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

Performance reporting is available for the public via Argyll and Bute Council and NHS Highland websites. The IPMF dashboard utilises SharePoint to support manager and staff access across the HSCP.

## 12. CONCLUSION

The Clinical & Care Governance Committee is asked to considerer and acknowledge FQ3 2025/26 (October - December) performance position as detailed within the IPMF Dashboard, and the additional metrics within the revised FQ3 Performance Overview Power Point presented at (Appendix 3).

## 13. DIRECTIONS

| | **Directions to:** | tick |
|---|---|---|
| Directions required to Council, NHS Board or both. | No Directions required | x |
| | Argyll & Bute Council | |
| | NHS Highland Health Board | |
| | Argyll & Bute Council and NHS Highland Health Board | |

## 14. PREVIOUS REVIEW OF THE REPORT

| **Meeting** | **Title of report** | **Date** | **Output (if relevant)** |
|---|---|---|---|
| | | | |

## REPORT AUTHOR AND CONTACT

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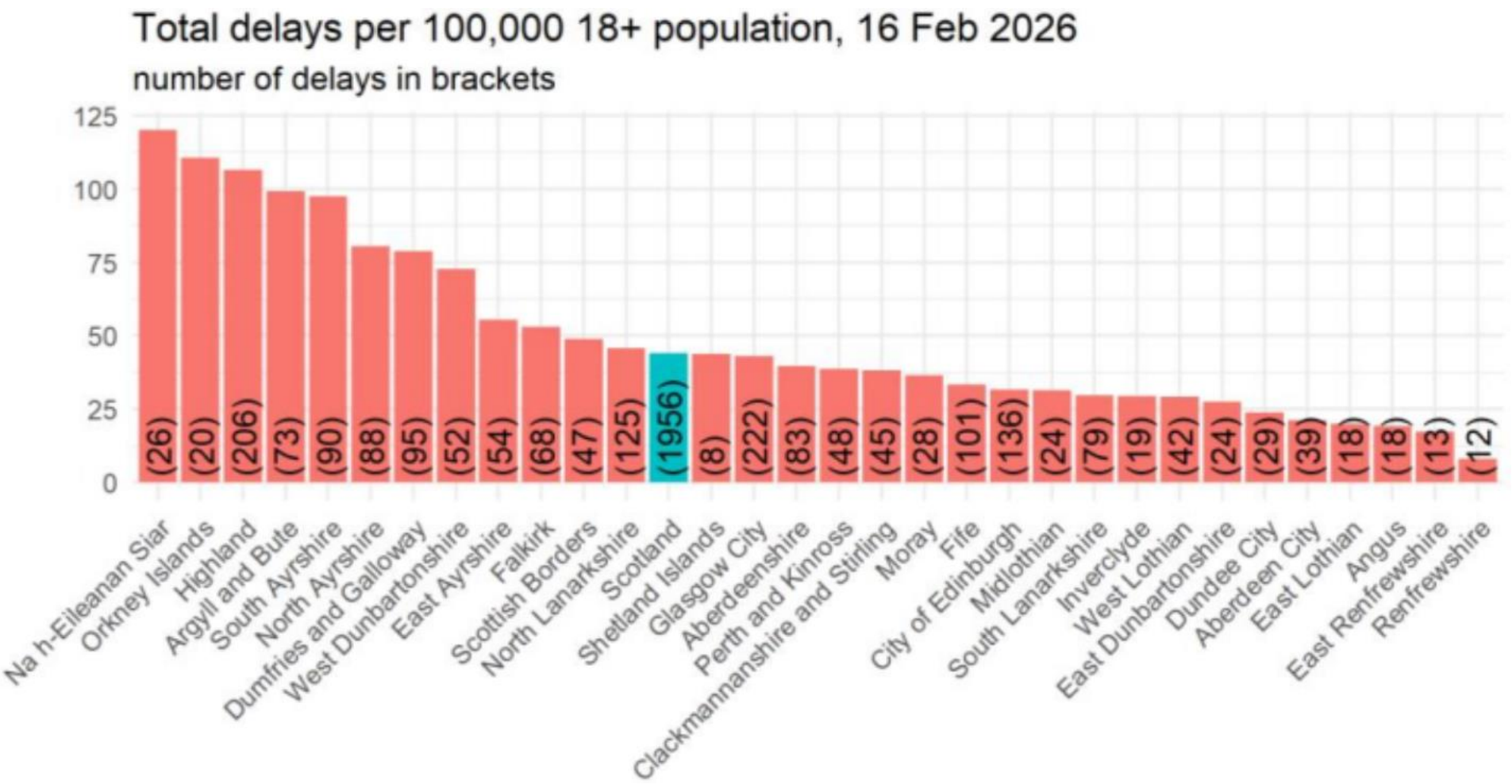
**Email**: james.brooks@argyll-bute.gov.uk

**Appendix 1** - Delayed Discharge Sitrep – 16th February 2026




The latest Delayed Discharge sit rep per 100,000 shows increased position in Argyll & Bute HSCP with 73 noted @ 16 Feb 2026. This compares with 46 noted at December 2025 census point.
With regards to overall benchmarked performance A&B remain above the Scottish average per 100,00 population.
Overall trend performance for December 2025 notes a slight weekly variance with a weekly average of (46) delays.

**Appendix 2** – HWBOI & MSG Integration Indicators.

## Core Suite of Integration Indicators

### HWBOI-Outcomes

Data notes 55.5% (5 of 9) HWBOI Outcomes measures reporting as above the national Scotland Rate. It is worth noting that performance will be influenced and vary in line with the total number of respondents participating in this voluntary survey. As such, caution should be noted with regards to previous comparison and trends. Benchmarking performance against 7 comparator HSCPs is noted below.

| Core Suite of Integration Indicators | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Scotland |
|---|---|---|---|---|---|---|---|---|
| 1 - Percentage of adults able to look after their health very well or quite well | 93.0% | 93.2% | 93.2% | 90.8% | 90.8% | 92.0% | 92.0% | *90.7%* |
| 2 - Percentage of adults supported at home who agreed that they are supported to live as independently as possible | 79.0% | 79.9% | 79.9% | 75.0% | 75.0% | 73.0% | 73.0% | *72.4%* |
| 3 - Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided | 76.0% | 72.5% | 72.5% | 66.9% | 66.9% | 53.0% | 53.0% | *59.6%* |
| 4 - Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated | 72.0% | 73.7% | 73.7% | 66.0% | 66.0% | 59.0% | 59.0% | *61.4%* |
| 5 - Total % of adults receiving any care or support who rated it as excellent or good | 79.9% | 78.3% | 78.3% | 68.6% | 68.6% | 74.0% | 74.0% | *70.0%* |
| 6 - Percentage of people with positive experience of the care provided by their GP practice | 84.8% | 84.5% | 84.5% | 77.6% | 77.6% | 84.0% | 84.0% | *68.5%* |
| 7 - Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life | 74.2% | 76.5% | 76.5% | 76.7% | 76.7% | 67.0% | 67.0% | *69.8%* |
| 8 - Total combined % carers who feel supported to continue in their caring role | 32.7% | 35.0% | 35.0% | 38.0% | 38.0% | 38.0% | 38.0% | *31.2%* |
| 9 - Percentage of adults supported at home who agreed they felt safe | 82.9% | 78.7% | 78.7% | 76.4% | 76.4% | 67.0% | 67.0% | *72.7%* |

### HWBOI – Outcomes - Benchmarking

| Indicator | Title | Argyll & Bute | HSCP A | HSCP B | HSCP C | HSCP D | HSCP E | HSCP F | HSCP G | Scotland |
|---|---|---|---|---|---|---|---|---|---|---|
| NI - 1 | Percentage of adults able to look after their health very well or quite well | 92.0% | 91.1% | 92.0% | 93.0% | 92.5% | 92.2% | 93.5% | 90.8% | 90.7% |
| NI - 2 | Percentage of adults supported at home who agreed that they are supported to live as independently as | 73.0% | 74.1% | 74.7% | 71.9% | 76.5% | 71.9% | 77.4% | 67.2% | 72.4% |
| NI - 3 | Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided | 53.0% | 62.4% | 63.9% | 60.5% | 61.9% | 59.5% | 63.4% | 57.9% | 59.6% |
| NI - 4 | Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated | 59.0% | 55.6% | 67.1% | 65.9% | 74.4% | 65.7% | 62.1% | 56.0% | 61.4% |
| NI - 5 | Total % of adults receiving any care or support who rated it as excellent or good | 74.0% | 65.2% | 76.3% | 75.7% | 65.6% | 68.7% | 72.6% | 64.8% | 70.0% |
| NI - 6 | Percentage of people with positive experience of the care provided by their GP practice | 84.0% | 62.1% | 71.1% | 80.4% | 67.9% | 68.6% | 73.7% | 72.3% | 68.5% |
| NI - 7 | Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life | 67.0% | 70.1% | 76.1% | 73.6% | 76.0% | 69.3% | 76.2% | 66.1% | 69.8% |
| NI - 8 | Total combined % carers who feel supported to continue in their caring role | 38.0% | 33.7% | 35.8% | 32.0% | 34.6% | 28.2% | 28.0% | 32.8% | 31.2% |
| NI - 9 | Percentage of adults supported at home who agreed they felt safe | 67.0% | 63.7% | 79.6% | 78.2% | 79.9% | 70.0% | 71.9% | 66.8% | 72.7% |

**HWBOI- Performance Data**

Data notes 66.7% (6 of 9) HWBOI Performance measures reporting as above the national Scotland Rate. Note Indicators 17 and 19 are reported at FY 24/25 with measures 11, 12, 13, 14, 15, 16, 18 reported as at Calendar year 2024 as a proxy for 2024/25 due to the national data for 2024/25 being incomplete. This is in line with guidance issued by Public Health Scotland which was communicated to all Health and Social Care Partnerships. Using more complete calendar year data for 2024 should improve the consistency of reporting between Health and Social Care Partnerships.

| Core Suite of Integration Indicators | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Scotland |
|---|---|---|---|---|---|---|---|---|
| 11 - Premature mortality rate per 100,000 persons* | 393 | 403 | 398 | 386 | 398 | 410 | 410 | 442 |
| 12 - Emergency admission rate (per 100,000 population)* | 12,938 | 12,402 | 10,702 | 12,004 | 11,968 | 12,204 | 12,064 | *11,559* |
| 13 - Emergency bed day rate (per 100,000 population)* | 112,235 | 108,088 | 91,065 | 106,155 | 118,552 | 120,888 | 120,636 | *113,627* |
| 14 - Readmission to hospital within 28 days (per 1,000 population)* | 83 | 80 | 96 | 89 | 84 | 85 | 84 | *103* |
| 15 - Proportion of last 6 months of life spent at home or in a community setting* | 90.0% | 90.8 | 92.4 | 90.8% | 89.6% | 89.7% | 90.0% | *89.2%* |
| 16 - Falls rate per 1,000 population aged 65+* | 26.2 | 26.0 | 24.3 | 29.2 | 27.6 | 28.4 | 26.6 | *22.5* |
| 17 - Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections | 74.2% | 85.0% | 87.0% | 80.0% | 79.0% | 77.3% | 84.2% | *81.9%* |
| 18 - Percentage of adults with intensive care needs receiving care at home* | 68.4% | 70.8.0% | 72.3% | 72.1% | 72.2% | 68.3% | 68.8% | *64.7%* |
| 19 - Number of days people spend in hospital when they are ready to be discharged (per 1,000 population) | 640 | 540 | 343 | 570 | 804 | 912 | 882 | *952* |
| 20 - Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency* | 22.0% | 22.0% | N/A | N/A | N/A | N/A | N/A | *N/A* |

**HWBOI- Performance Data – Benchmarking**

| Indicator | Title | Argyll & Bute | HSCP A | HSCP B | HSCP C | HSCP D | HSCP E | HSCP F | HSCP G | Scotland |
|---|---|---|---|---|---|---|---|---|---|---|
| NI - 11 | Premature mortality rate per 100,000 persons | 410 | 390 | 357 | 400 | 428 | 330 | 358 | 407 | 442 |
| NI - 12 | Emergency admission rate (per 100,000 population) | 12,064 | 12,560 | 9,710 | 9,214 | 10,438 | 8,338 | 9,981 | 13,127 | 11,559 |
| NI - 13 | Emergency bed day rate (per 100,000 population) | 120,636 | 94,390 | 104,376 | 102,850 | 105,962 | 87,123 | 125,062 | 110,293 | 113,627 |
| NI - 14 | Readmission to hospital within 28 days (per 1,000 population) | 84 | 119 | 91 | 116 | 95 | 77 | 120 | 122 | 103 |
| NI - 15 | Proportion of last 6 months of life spent at home or in a community setting | 90.0% | 92.2% | 89.1% | 90.3% | 87.9% | 91.1% | 88.2% | 89.2% | 89.2% |
| NI - 16 | Falls rate per 1,000 population aged 65+ | 26.6 | 25.4 | 23.0 | 14.6 | 23.8 | 17.7 | 16.3 | 23.6 | 22.5 |
| NI - 17 | Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections | 84.2% | 71.3% | 82.5% | 84.8% | 76.4% | 81.1% | 70.6% | 84.6% | 81.9% |
| NI - 18 | Percentage of adults with intensive care needs receiving care at home | 68.8% | 63.1% | 62.0% | 54.8% | 70.3% | 60.6% | 59.5% | 70.4% | 64.7% |
| NI - 19 | Number of days people spend in hospital when they are ready to be discharged (per 1,000 population) | 882 | 166 | 238 | 1,876 | 639 | 980 | 1,605 | 814 | 952 |
| NI - 20 | Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |

## Ministerial Steering Group Indicators

| Ministerial Steering Group Indicators | 2018/19 | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | 2025/26* |
|---|---|---|---|---|---|---|---|---|
| MSG 1.1 - Number of emergency admissions | 8,374 | 8,231 | 6,918 | 7,820 | 7,935 | 8,377 | 8179 | 3871 |
| MSG 1.2 - Number of Admissions from A&E | 5,244 | 4,945 | 3,668 | 5,040 | 4,957 | 5,097 | 4816 | 2215 |
| MSG 2.1 - Number of unplanned bed days acute specialties | 65,794 | 64,027 | 53,390 | 67,303 | 77,165 | 80,085 | 79859 | 30089 |
| MSG 2.2 - Number of unplanned bed days MH specialties | 13,747 | 12,556 | 10,478 | 8,319 | 8,640 | 10,456 | 11024 | 5593 |
| MSG 3.1 - Number of A&E attendances | 13,985 | 14,171 | 10,091 | 15,647 | 16,774 | 17,740 | 18448 | 9434 |
| MSG 3.2 - % A&E attendances seen within 4 hours | 93.40% | 89.67% | 92.79% | 85.50% | 80.03% | 80.28% | 80.73% | 80.83% |
| MSG 4.1 - Number of DD bed days occupied | 9,530 | 7,863 | 5,354 | 7,742 | 11,944 | 12,757 | 14042 | 6777 |
| MSG 5.1 - % of last six months of life by setting community & hospital | 90.00% | 89.6 | 90.80% | 90.80% | 89.60% | 89.40% | N/A | N/A |
| MSG 6.1 - % of 65+ population at Home (unsupported) | 92.10% | 92.10% | 92.50% | 92.60% | 93.20% | 93.40% | N/A | N/A |

MSG Indicators have been updated to FY 2024/25 and are presented as a proxy for part year 2025/26 (April – Sep) based on latest available publication. MSG Indicators 1.1 & 1.2 & 2.1 notes slight fall in activity compared to the last reporting year, however this may be due to impact of data lag. Activity around Emergency Admissions, Unplanned Bed Days, A&E attendances and Delayed Discharge Bed Days all noted performance exceeding pre –Covid levels. This highlights the necessity to consider approaches to alleviate systems pressures around Urgent and Unscheduled Care and expedite hospital flow, particularly around significant increases seen in A&E Admissions and Delayed Discharges.

Data notes 67% (6 of 9) HWBOI Outcomes measures reporting as above the national Scotland Rate. It is worth noting that performance will be influenced and vary in line with the total number of respondents participating in this voluntary survey. As such, caution should be noted with regards to previous comparison and trends

**Appendix 3 – A&B HSCP performance metrics aligned to NHS Highland's OIP**

**Please see pdf attached.**