

Title/Subject: Performance Management Framework - Update
Meeting: Falkirk Integration Joint Board
Date: 7 October 2016
Submitted by: Head of Performance and Governance NHS Forth Valley
Action: For noting

1. INTRODUCTION

- 1.1 The purpose of this report is to update the Integration Joint Board (IJB) on progress with implementing the Performance Management Framework.
- 1.2 In order for the IJB to fulfil the legislative requirements as regards performance management and reporting, the IJB approved the Performance Management Framework at the March 2016 meeting of the Board. The Board was asked to note that the performance work stream would report a progress update to the October Integration Joint Board meeting.
- 1.3 This paper summarises work undertaken to align national outcomes to local priorities with the development of a Strategy Map (Appendix 1). It goes on to propose future reporting arrangements for the IJB and provides an update on the Covalent Performance Management system.

2. RECOMMENDATIONS

The Integration Joint Board is asked to:

- 2.1 Note the update on the Performance Management Framework.
- 2.2 Note the proposal to present a mid-year position against the National Outcomes and, in addition, present a focus around the local outcome of 'community focussed supports' considering delayed discharges and some linked local measures.
- 2.3 Note that the lists of the 'Integration Functions Performance Targets' and the 'Non-Integration Functions Performance Targets' that require to be prepared and reviewed annually as per the Integration Scheme, will be presented to the next IJB in December.

3. BACKGROUND

- 3.1 Integration Joint Boards (IJBs) are responsible for effective monitoring and reporting on the delivery of services and relevant targets and measures included in the Integration Functions and as set out in Strategic Plans. The Integration Joint Board also requires to prepare and publish an Annual Performance Report, the contents of which are laid down in the Public Bodies (Joint Working)(Scotland) Act 2014, (the Act). The Annual Report requires to be approved and published by 31 July 2017.
- 3.2 The Scottish Government has developed National Health and Wellbeing Outcomes detailed in regulation supported by a Core Suite of Integration Indicators to provide a framework for Partnerships to develop their performance management arrangements. As indicated to the Board in March, Partnerships are expected to include additional relevant information beyond the minimum prescribed in order to build as full and accurate an assessment as possible as to how the integration of health and social care is delivering for people and communities. It is acknowledged that the arrangements for supporting performance management, and the requirements, will evolve over time as IJBs and partnerships become more established.

4. PERFORMANCE FRAMEWORK UPDATE

- 4.1 The Performance Framework was developed by the performance management work stream as part of an overall programme to deliver health and social care integration in Forth Valley.

As described in the Performance Framework the approach considered:

- Indicators and measurement – rationale and linkage
- Formats and frequency of reporting periods
- Levels of reporting and escalation
- Concepts and tools e.g. Scorecards, use of dashboards etc.

- 4.2 In terms of indicators and measurement, it is considered critical that the IJB is able to measure performance against the delivery of the Strategic Plan alongside the National Outcomes and Core Suite of Indicators developed by the Scottish Government. Work has been undertaken to create a 'Strategy Map' (Appendix 1) which details the partnership's Vision, expected Local Outcomes and then maps these against the National Outcomes and National Indicators. National guidance has been received as to which core indicator links to which national outcome, however in terms of local reporting it will be important to ensure it is meaningful and represents local priorities. As Locality plans become clearer additional key local indicators will also be mapped to the desired local outcome.
- 4.3 Much of the data that underpins the National Outcomes and Core Indicators are only available bi annually or annually. Work is underway to consider appropriate and available local data to support local assessment of delivery of the outcomes. As Board members will be aware, work has been undertaken to develop an approach to delivery of the Strategic Plan. The Board received a

detailed presentation of the Logic Modelling process at the last meeting and the outputs from these sessions are currently being collated and will help inform the detail of the Locality Plans and thereafter into the performance regime.

- 4.4 As the Board becomes established a performance reporting regime requires to be developed in terms of the frequency of reporting. It is anticipated that the Board will want to see regular updates of delivery against Strategic Plan outcomes and priorities and a mid-year position against the 9 National Outcomes in preparation for the Annual Report. On reviewing the Strategy Map it can be seen that by creating a suite of measures around desired local outcomes, delivery could be assessed at varying levels.
- 4.5 It is proposed that a mid-year position, using the national outcomes, is presented to the Board in December 2016. In addition a focus around the local outcome of 'community focussed supports' considering delayed discharges and some linked measures will also be presented. Moving forward a rolling programme of performance reporting will be created acknowledging the frequency of available data and the developing Locality Plans for the Strategic Plan. The sample Balanced Scorecard previously presented to the Board will be adapted to ensure a readable report for all members.
- 4.6 As previously agreed the Covalent Performance Management System is being used to develop the approach to shared information and coherent reporting for the Integration Joint Boards and Partnerships. This will allow appropriate reporting at the varying levels across the Partnerships and also appropriate escalation. This system is already used within the respective organisations. Investment was agreed to secure the ability to create a shared portal for IJB specific reporting. This portal will be hosted by NHS Forth Valley with work underway across the Partnerships to populate the system with relevant indicators. A project plan for roll out over the next year is being developed. Work is underway to complete an appropriate information sharing protocol between the parties.
- 4.7 In support of shared learning and best practice moving forward, the ability to review and compare partnerships across Scotland will be important. Both Partnerships in Forth Valley participate in the Health & Social Care Benchmarking network (HSCBN), which is an association of 30 health & social care partnerships working together to promote networking, benchmarking activity and facilitate learning through knowledge exchange. The network is funded by shared subscription, and governed with an approved 'Partnership Agreement' and data sharing protocol.
- 4.8 The network undertakes studies and reports on relevant topics such as the "HSCBN Performance Framework Project", and it also played an important role in the development of the Health and Wellbeing Outcomes. It is now actively engaged with Scottish Government and NHS Scotland in facilitating progress in the use of the national indicators for performance reporting, planning and improvement. Good practice within partnerships is showcased at network events, and recent presentations on performance reporting elsewhere is being followed up with site visits by workstream members.

- 4.9 As previously highlighted to the Board, lists of the 'Integration Functions Performance Targets' and the 'Non-Integration Functions Performance Targets' require to be prepared and reviewed annually as per the Integration Scheme. These will be presented to the next IJB in December.

5. CONCLUSIONS

- 5.1 Work has been progressing to implement the Performance Management Framework with further detail scheduled to be presented to the IJB in December.

Resource Implications

Implementation of the Performance Management Framework at this stage is being supported across the partnerships using current resources.

Impact on IJB Outcomes, Priorities and Outcomes

Performance Management is core to assessing the delivery of IJB outcomes and priorities.

Legal & Risk Implications

The management of performance with appropriate reporting is part of the Integration Joint Board's Integration Scheme. Risk and Performance are closely linked. As the performance management system becomes more established, routine updating to the IJB Risk Register will be undertaken as regards risks to delivery of outcomes and priorities.

Consultation

Consultation to this stage has been through the Forth Valley wide Performance Management Workstream

Equalities Assessment

An effective performance management system will support a reduction in inequalities focussing on priorities and also assist in reporting legislative requirements timeously.

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Date: 19 September 2016

List of Background Papers:

Integration of Health and Social Care IJB's Performance Management Framework

March 2016

Falkirk Integration Joint Board Strategy Map - Appendix 1

| Vision | To enable people to live full independent and positive lives within supportive communities | | | | |
|---|--|---|---|---|--|
| Local Outcomes | <u>SELF MANAGEMENT</u> - of Health, Care and Wellbeing. | <u>AUTONOMY & DECISION MAKING</u> –Where formal support is needed people can exercise control over choices. | <u>SAFETY</u> - H&SC support systems keep people safe and live well for longer. | <u>SERVICE USER EXPERIENCE</u> People have a fair & positive experience of health and social care. | <u>COMMUNITY FOCUSSED SUPPORTS</u> -to live well for longer at home or homely setting. |
| National Outcomes (9) | 1) Healthier living 2) Reduce Inequalities | 4) Quality of Life | 7) People are safe | 3) Positive experience and outcomes 8) Engaged work force 9) Resources are used effectively | 2) Independent living 6) Carers are supported |
| National Indicators (23) (* Indicator under development nationally) | 1) % of adults able to look after their health well/quite well 11) Premature mortality rate | 7) % of adults who agree support has impacted on improving/maintaining quality of life 12*) Rate of Emergency admissions for adults 17) % of care services graded 'good' (4) or better by Care Inspectorate | 9) % of adults supported at home who felt safe 13*) Emergency bed day rate for adults 14*) Readmission to hospital within 28 days rate 16*) Falls rate per 1000 population 65+ yrs | 3) % of adults who agree that they had a their say in how help/care was provided 4) % of adults supported at home who agree their health and care services are co-ordinated 5) % of adults receiving care and support rated as excellent or good 6) % of people with positive GP experiences 10) % of staff who recommend their place of work as good 19) Rate of days people aged 75+ spend in hospital when they are ready to be discharged, 20) % of total health and care spend on hospital stays where the patient admitted as an emergency (22*) % people discharged from hospital within 72 hours of being ready 23) Expenditure on end of life care | 2) % of adults supported at home who agree they are supported to be independent 21*) % of people admitted to hospital from home then discharged to care home 15) % of last 6 months of life spent at home or in community 18) % of adults 18+ yrs receiving intensive support at home 8) % of carers who feel supported in their role <i>Note linkage to 'Experience'</i> 19) Rate of days people aged 75+ spend in hospital when they are ready to be discharged, (22*) % people discharged from hospital within 72 hours of being ready |
| Local Indicators (Under development) | <ul style="list-style-type: none"> ED Attendance Life expectancy age 65+ Deaths from Cancer/CHD | <ul style="list-style-type: none"> *Dementia – post diagnostic tgt, Mental Health/Learning Disability data | <ul style="list-style-type: none"> HAI Telecare data 75+ Adult Protection | <ul style="list-style-type: none"> Local Client/patient data Patient Experience survey Staff Survey data Financial and Budgetary info | <ul style="list-style-type: none"> Hours of homecare for clients 65+ Respite hours provided Em/Admission 65+75+ per 100,000 |