Midlothian Integration Joint Board

Thursday, 13th April 2023, 14:00-16:00.

IJB Performance Report

Item number:	5.10

Executive summary

The purpose of this report is to update the IJB on progress towards achieving the current IJB performance goals for the financial year 2022/23.

A report describing progress against each improvement goal is attached in Appendix 1. Due to the processes required to validate these data for publication, there is a significant reporting delay. Public Health Scotland (PHS) has moved to a schedule of quarterly, rather than monthly, updates. More recent management data are available for a number of the improvement goals but as they have not been validated, they cannot be published. A brief summary of this information is provided to support the Board's understanding of the current progress towards the improvement goals.

The Midlothian HSCP Performance Manager and the Principal Information Analyst (PHS Local Intelligence Support Team) have been supporting the NHS Lothian Performance Business Unit with plans to progress development of a local Tableau dashboard, to permit more recent management data to be available to Lothian HSCPs in a way that better informs understanding of whole-system activity.

Midlothian HSCP has made significant progress towards the development of a Hosted Service Report prototype. This has been a collaborative piece of co-design as part of Midlothian HSCP's novel approach with regard to triangulating activity, experience and outcome data, at both operational and strategic levels.

Members are asked to:
- Note the performance against the IJB Improvement Goals for 2022/23 (Appendix 1).
- Note the change in the Public Health Scotland (PHS reporting schedule) from monthly to quarterly
- Note the ongoing requirement to report on the goals set by the Scottish Government Ministerial Strategic Group for Health and Community Care and consider if additional local performance goals may be more useful for regular IJB review.
- Consider commissioning the Performance, Assurance and Governance Group (PAGG) to develop more locally set performance goal options for the Boards consideration.

Midlothian Integration Joint Board

IJB Performance Report

1   Purpose

1.1   This report sets out the progress towards achieving the current IJB performance goals (2022/23).

2   Recommendations

2.1   As a result of this report, Members are asked to:
- Note the performance against the IJB Improvement Goals for 2022/23 (Appendix 1).
- Note the change in the Public Health Scotland (PHS reporting schedule) from monthly to quarterly
- Note the ongoing requirement to report on the goals set by the Scottish Government Ministerial Strategic Group for Health and Community Care and consider if additional local performance goals may be more useful for regular IJB review.
- Consider commissioning the Performance, Assurance and Governance Group (PAGG) to develop more locally set performance goal options for the Boards consideration.

3   Background and main report

3.1   The IJB has previously identified improvement goals to monitor progress on reducing unscheduled hospital activity and use of institutional care. They are based on goals recommended by the Scottish Government Ministerial Strategic Group for Health and Community Care (find out more [here](#)).

3.2   At the IJB meeting in June 2022 the Performance Assurance & Governance Group recommended that the improvement goals for 2022/23 were set to prioritise an increase in system stability, focussing on workforce recovery and wellbeing.

3.3   An updated report describing progress against each improvement goal is attached in Appendix 1. This report is produced by the Local Intelligence Support Team (LIST) on behalf of the Midlothian HSCP. Members are asked to note the information in Appendix 1, specifically regarding data completeness. Due to the processes required to validate these data for publication, there is an inbuilt reporting delay, and this information is not taken from a "live" system. This means that we are not yet able to calculate the full year performance for some measures.

3.4   Members are asked to note that Public Health Scotland (PHS) has moved to a schedule of quarterly, rather than monthly, updates. This means that Appendix 1 does not include any updated data compared with the Performance Report submitted to the Board in February 2023.

3.5   The Midlothian HSCP Performance Manager and the Principal Information Analyst (PHS Local Intelligence Support Team) have been supporting the NHS Lothian Performance Business Unit with plans to progress development of a local Tableau dashboard. This would permit more recent management data to be available to Lothian HSCPs in a way that better informs understanding of whole-system activity.

3.6   More recent management data are available for a number of the improvement goals but as they have not been validated, they cannot be published. In order to support the Board's understanding of the current position regarding progress towards the improvement goals, a brief summary is provided below.

3.7   <u>A&E Attendances</u>
2022/23 Target Rate per 100,000 people   2,629 / month
2022/23 Running Average   2,851 / month
The validated data are only available up to September 2022.
Based on this information, the target is not currently being met.
Non-validated management information, up to and including February 2023, indicates that system activity levels continue to present a significant challenge to achieving the target set. The most recent data for February 2023 indicate a slight improvement.

3.8   <u>Emergency Admissions</u>
2022/23 Target Rate per 100,000   767 / month
2021/22 Rate   799 / month
The validated data are only available up to March 2022. Based on this information, the target is not currently being met.
Non-validated management information, up to and including February 2023, indicates that system activity levels continue to present a significant challenge to achieving the target set.

3.9   <u>Unplanned Bed Days</u>
2022/23 Target Rate per 100,000   5,074 / month
2021/22 Rate   4,779 / month
The validated data are only available up to March 2022. Based on this information, the target is currently being met.
Non-validated management information, up to and including February 2023, indicates that system activity levels continue to present a significant challenge to achieving the target set. The most recent data for February 2023 indicate a slight improvement.

3.10   <u>Delayed Discharge Occupied Bed Days</u>
2022/23 Target Rate per 100,000   820 / month
2022/23 Running Average   1,077 / month
The validated data are only available up to September 2022. Based on this information, the target is not currently being met.
Non-validated management information, up to and including February 2023, indicates that system activity levels continue to present a significant challenge to achieving the target set.

3.11   <u>End of Life – Percentage of Last Six Months Spent in Large Hospitals</u>
2022/23 Target Rate   <8.7%
2020/21 Rate   7.9%

The validated data are only available for 2020/21. Based on this information, the target is currently being met.
It is not possible to refer to management information as these data are not held locally.

3.12   Balance of Care
       2022/23 Target Rate   >96.4%
       2020/21 Rate   97% (provisional data)
       The validated data are only available on a provisional basis for 2020/21. Based on this information, the target is currently being met.
       It is not possible to refer to management information as these data are not held locally.

3.13   Midlothian HSCP has made significant progress towards the development of a Hosted Service Report prototype. This has been a collaborative piece of co-design, involving:
       o   the Dietetics Service (led by Karen Henderson, Service Manager),
       o   Executive Sponsor for the Quality Management System (Hannah Cairns, Chief Allied Health Professional (AHP)),
       o   Executive Sponsor for OutNav (Gill Main, Integration Manager),
       o   Matter of Focus, and
       o   the Midlothian HSCP Performance Team.

3.14   This co-designed report will fulfil three key functions:
       o   it will provide assurance to NHS Lothian as required by a partner organisation;
       o   it will provide information to other Lothian HSCPs relating to equity of service provision;
       o   it will demonstrate the contribution made by the Dietetics Service to the achievement of Midlothian IJB's six strategic aims.

3.15   The NHS Lothian Performance Business Unit is keen to learn from Midlothian HSCP's novel approach with regard to triangulating activity, experience and outcome data at both operational and strategic levels, to inform the design of a standardised method of Hosted Service reporting across all Lothian HSCPs.

3.16   Midlothian HSCP is significantly further ahead regarding Hosted Service reporting, both in terms of progress and ambition. In recognition of this position, Midlothian HSCP's Chief AHP has offered to present the AHP Governance & Assurance Tableau Dashboard to NHS Lothian's Performance Business Unit. As an interim step, this dashboard should provide the initial activity dataset required by the central Performance Business Unit, with no additional resource implications.

4   Policy Implications

4.1   There are no policy implications arising from this report.

5   Directions

5.1   This report does not directly impact upon service ability to deliver existing Directions.

It is acknowledged that there will be a requirement for ongoing review and revision to the Performance Report, in alignment with any revisions to existing Directions / issue of new Directions at any stage in the reporting period.

6   Equalities Implications

6.1   There are no equality implications from focussing on these goals but there may be implications in the actions that result from work to achieve them.

The focus of most of the goals is on reducing hospital activity and hospitals are not used equally by the population. There are groups of people that make more use of hospitals than others – for example older people, people living in areas of deprivation or people who live alone.

7   Resource Implications

7.1   There will be resource implications resulting from further action to achieve these improvement goals.

8   Risk

8.1   By continuing to use the goals set by the Scottish Government Ministerial Strategic Group for Health and Community Care also as IJB improvement goals, the IJB is at risk of being unable to take appropriate strategic action to counter the continued instability of health and care systems, the significant operational system pressures, and the ongoing challenges of supporting workforce wellbeing.

9   Involving people

9.1   The Performance Assurance & Governance Group (PAGG) meet monthly to review and discuss these measures as part of wider data assurance. Membership of the group will be expanded to ensure increased representation of elected officials, the third sector and public health.

10   Background Papers

None.

AUTHOR'S NAME	Elouise Johnstone
DESIGNATION	Programme Manager for Performance
CONTACT INFO	elouise.johnstone@nhslothian.scot.nhs.uk
DATE	22 March 2023

Appendices:

Appendix 1: Local Intelligence Support Team (LIST) Report describing progress against the IJB improvement goals 2022/23.