

Midlothian Integration Joint Board



10th February 2022, 2.00pm

Performance Overview Report

Item number: 5.6

Executive summary

The purpose of this report is to update the IJB on progress towards achieving the current IJB performance goals.

Board members are asked to:

- Note the performance against the IJB performance goals;
 - Identify IJB representation on Data Assurance and Governance Group (section 3.4);
 - Approve reallocation of existing fixed-term funding for recruitment (section 3.5);
 - Approve request for additional fixed-term for recruitment (section 3.6).
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Performance Overview Report

1 Purpose

The purpose of this report is to update the IJB on progress towards achieving the current IJB performance goals.

Board members are asked to:

2 Recommendations

2.1 As a result of this report what are Members being asked to:-

- Note the performance against the IJB performance goals
- Identify IJB representation on Data Assurance and Governance Group (section 3.4)
- Approve reallocation of existing fixed-term funding for recruitment (section 3.5)
- Approve request for additional fixed-term for recruitment (section 3.6)

3 Background and main report

3.1 The IJB has previously identified improvement goals to monitor progress implementing the Strategic Plan. The improvement goals focus 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.

3.2 The IJB approved the following revised improvement goals at the IJB meeting in April 2021:

- Reduce Unscheduled Admissions into hospital by 5% by April 2022 compared to 2017/18
- Reduce Unplanned Occupied Bed Days (OBD) by 10% by April 2022 compared to 2017/18
- Maintain Emergency Department attendances at the level of 2017/18
- Maintain Delayed Discharge Occupied Bed Days below 40% of the 2017/18 activity
- Reduce the percentage of time people spend in a large hospital in their last six months of life.
- Maintain the proportion of people over the age of 65 who are living in the community at 97% or higher.

3.3 A report describing progress against each improvement goal is attached in Appendix 1. This report is informed by LIST data and is produced by the LIST team, on behalf of the Midlothian HSCP.

3.4 Performance Measurement

To support the development of a Partnership-wide Performance Framework, a new Data Assurance & Governance Group will be created with membership drawn from the HSCP SMT, the HSCP Performance team, finance colleagues and representation from the IJB. The group's initial meeting will take place in April 2022 and will meet on a monthly basis thereafter. The remit will include examination of performance data and the application of appropriate scrutiny to ensure governance and quality standards are met.

Board members are asked to give consideration as to how this representation is best achieved (for example standing members, attendance on rotation, etc); and to identify any potential volunteers.

3.5 Performance Team Recruitment Update

The Board had previously approved fixed-term funding for the role of Programme Manager (NHS Grade 8a) with responsibility for performance. Elouise Johnstone was appointed and commenced in post on 10th January 2022.

The Board had also approved fixed-term funding to recruit a Data Analyst (NHS Grade 7) and significant efforts had been made to align this recruitment through the central NHS Lothian Analytical Services team. In recognition of the challenges associated with recruiting to this role, a review of the existing roles and skills within the Performance Team was completed.

Based on this information, the recommendation is that the funding be reallocated to permit recruitment of a fixed-term Assistant Programme Manager (NHS Grade 6). The benefits of this approach include a small financial efficiency, a more appropriate skillset, and the continued stability of the existing team.

Board members are asked to consider and approve this revised proposal.

3.6 Additional Recruitment to support delivery of Strategic Plan

The Draft Strategic Plan for 2022 / 2025 is currently at consultation stage. Once the Plan has been formally adopted, a number of priority areas requiring enhanced focus will be identified. Additional staffing resource will be required to provide this bespoke support and the recommendation is that funding be agreed for 2 x WTE fixed-term Assistant Programme Managers (NHS Grade 6) for a period of two years. The posts will be nominally hosted within the Performance Team and will work flexibly across the Partnership to support the implementation of the Strategic Plan.

(Total cost for 2 x WTE NHS Band 6 for two years = £216k, based on 2021/22 pay rates, funded from IJB reserves.)

Board members are asked to consider and approve this additional funding.

3.7 IJB Development Session March 2022

The next Development Session is scheduled for March 2022 and the focus will be on Performance. The session will be held in MS Teams, following the model of previous sessions, making best use of the functionality – this will include break out rooms to encourage discussion around specific questions.

The session will provide the Board with an opportunity to discuss existing performance data provision, whether it meets the needs of the Board, and how it can be improved.

Board members are asked to submit any specific data / performance questions they wish to be considered in advance to Elouise Johnstone (by 28th February 2022).

4 Directions

4.1 There are no implications on the Directions.

5 Equalities Implications

5.1 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 population groups that make more use of hospitals than other groups – for example older people or people living in areas of deprivation.

6 Resource Implications

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

7 Risk

7.1 The main risk is that the IJB fails to set a suitable ambitious pace of change across the health and care system to reduce hospital utilisation and respond to the changing demographics

8 Involving people

8.1 The Strategic Planning Group was consulted in 2017 to agree the first set of Local Improvement Goals. The revised improvement goals in this paper were discussed at the April 2019 SPG meeting.

9 Background Papers

10.1 Appendix One: LIST Report describing progress against the IJB performance goals.

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