## 2. RECOMMENDATIONS

The Committee is invited to note the quarterly performance, further noting it will be considered at the Clinical and Care Governance Committee in respect of any action required.

## 3. DETAIL OF REPORT

The report details the HSCP (Health and Social Care Partnership) performance for Financial Quarter 4 2023/24 (January – March) highlighting key performance trends across the 93 KPIs (Key Performance Indicators). In addition, the report includes performance updates across eight service areas. The latest performance against the National Health and Wellbeing Outcomes Indicators is reported (Appendix 1). Also included is an update on System Pressures (Appendix 2) and Delayed Discharges (Appendix 3).

## 4. RELEVANT DATA & INDICATORS

### 4.1 FQ4 2023/24 (January    March) Performance Summary
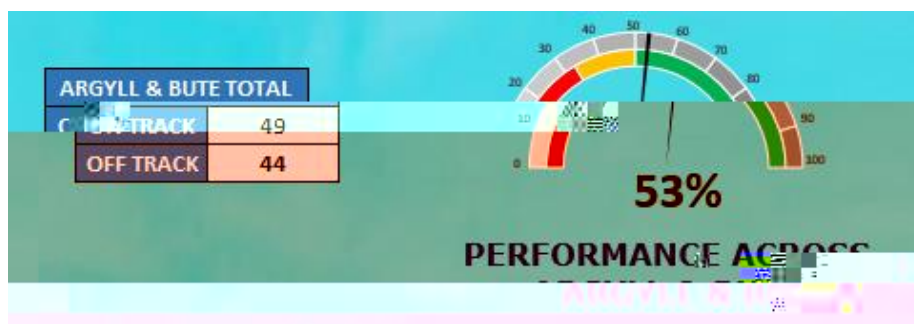


Overall performance for FQ4 notes that 53% of KPI's are scoring against target, with 49 reporting as on-track and 44 off-track, this is a slight increase (+7%) against previous FQ3 performance. The KPI's report performance against the target and include the target, actual and variance and is a mix of 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 total performance for each of the eight services and 93 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.

### 4.2 Analysis of Key Performance

This analysis identifies performance across the 8 service reporting categories within the Integrated Performance Management Framework (IPMF) and performance commentary is provided as part of Head of Service and Service Leads one-to-one sessions with analysts.

### 4.2.1 Children & Families

Across 11 KPI, C&F services performance notes 3 (27%) on track, with 8 (73%) off track against the targets set in Q4 23/24. This is a decrease from 36% on track reported (-9%) variance on the previous quarter performance.

**Performance on or above target**:

- Increasing the number of care experienced children placed at home or in Kinship or Fostering Care is on track, noting 24% above target performance.

- VAWG training is as achieving 250 staff trained against a target of 100 being trained.

**Performance below target & areas for improvement:**

- Performance around reducing numbers of care experience children looked after away from home has failed to meet target of 94, with 109 residing out with the home, 69% of all care experienced children, with no improvement on the previous quarter.

- Performance with regards to the number of children accepted onto the Emotional and Wellbeing Pathway is below the target of 100%, with 81% accepted. This is an improvement on Q3 where performance was 71%.

- It is noted that recording issues on Eclipse has resulted in several KPI's not accurately reflecting performance on the ground, this will be addressed in the 2024/25 version of the IPMF, which is currently under development.

### 4.2.2 Telecare and Digital

Benchmarked performance across 8 Key Performance Indicators (KPIs) for Telecare and Digital Services shows an increase in the overall Quarter 4 performance, with 6 KPIs (75%)

- The digitalisation of telecare equipment has further increased by 6% to reach 40%, surpassing the 25% target.

- The utilisation of Buddi hubs has increased by 43% this quarter.

- Freedom of Information requests are now back to being completed on time at a rate of 100%, after falling off target last quarter.

**Performance below target & areas for improvement:**

- The number of Telecare annual reviews overdue continues to decline, remaining below target.

- Silver Cloud referrals have decreased a further 6%.

- Only one installation of the Just Checking system was completed during this quarter

### 4.2.3 Public Health and Primary Care

Public Health and Primary Care Quarter 4 performance notes 10 (77%) measures on track, no change from Quarter 3. Public Health have achieved 100% target performance across all 5 KPIs in Q4 of 2023/24. Out of the 8 Key Performance Indicators (KPIs) for Primary Care services, 3 (37.5%) are currently off track, while 5 (62.5%) are on track to meet their set targets. This overall performance aligns with Q3, however, there have been changes in which specific KPIs are meeting or not meeting their targets.

**Performance on or above target**:

- IPMF No 63: In Q4, we increased the number of quit dates set by achieving 20, exceeding the target of 10, representing an 82% increase from Q3. Noted we were on target in Q2, exceeded by one in Q3 with a significant change in Q4.

- IPMF No 64: Our actual performance of monitoring contracts and KPIs has consistently matched the target of 100% for each quarter of 2023/24, remaining at 100%.

- IPMF No 65: In Q4, we achieved 31 engagement activities, significantly exceeding the target of 1, marking a continuous improvement throughout each quarter of 2023/24 and a 19% increase from Q3.

- IPMF No 66: We successfully achieved the rolling training target of 68 with an actual count of 69. Our actual performance has shown steady increase in each quarter of 2023/24, representing a 19% improvement compared to Q3.

- IPMF No 67: In Q4, we achieved 163 referrals to community link workers, exceeding the target of 101. Our performance has seen a consistent trend above the target each quarter, and we improved by 10% compared to Q3.

- The "ChildSmile: Enroll 100% of eligible nurseries into Daily Toothbrushing Programme" demonstrated exceptional performance, reaching 97%, well above the 80% target.

- The Fluoride Varnish Programme remains consistent, still implemented in 29% of eligible schools for P1-P3 pupils.

- Vaccination transfer from GP practices has been successfully accomplished.

- "Community Link Workers within Primary Care settings established within areas with the highest level of deprivation" achieved full compliance, meeting the target of 100%.

- Significant progress was observed in the reduction of instances of 2C practices entering contingency measures, with a remarkable 96% improvement from Q3. The number decreased from 56 occurrences to only 2 during Q4.

**Performance below target & areas for improvement:**

- There has been an unusually large increase in unplanned admissions to hospital,

- The review of case conferences within 3 months of the initial meetings failed to meet the target again, remaining at 50% completion on time.

### 4.2.9 NATIONAL HEALTH & WELLBEING OUTCOMES (HWBOI) and MINISTERIAL STEERING GROUP (MSG) 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 27 HWBOI and MSG Indicators reports 37% on track, with 10 on track and 17 off track. An overview of A&B HSCP's latest performance against the 27 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. The next update for this data will be reported after Jul 2024.

## 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 ffia  l

## 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 committee is asked to note FQ4 2023/24 (January - March) 2024 performance as detailed in the IPMF Dashboard

## 13. DIRECTIONS

| Directions required to Council, NHS Board or both. | Directions to: | tick |
|---|---|---|
| | 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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**Appendix 1** – HWBOI & MSG Integration Indicators.

**Core Suite of Integration Indicators**

Indicators 1-9. The results of the 2024 HACE survey will be published by the Scottish Government on 28 May 2024, and will be updated and included in the PHS Core suite publication on 2 July 2024.

Indicators 12,13,14,15,16,18 Calendar year 2023 is used here as a proxy for 2023/24 due to the national data for 2023/24 being incomplete. This

PHS has not provided information for indicator 20 beyond 2019/20 because detailed PLICS cost information is not available. PHS previously published information to calendar year 2020 using costs from 2019/20 as a proxy but, given the impact of the COVID-19 pandemic on activity and expenditure, PHS no longer c3( c  n0tM1y19q0. )8(n)-3(o)-3( lo)6(n)-3(g)-3(e)-3(r c3( c  n0tM1y19q0.o90is3( c-3(g)-p6(a)-3(tio)s )-3(tioi32 (a)-3(n0tN

**Appendix 2**- System Pressures Reporting - April 2024



Argyll and Bute Systems Pressures Summary Report – April 2024 Update
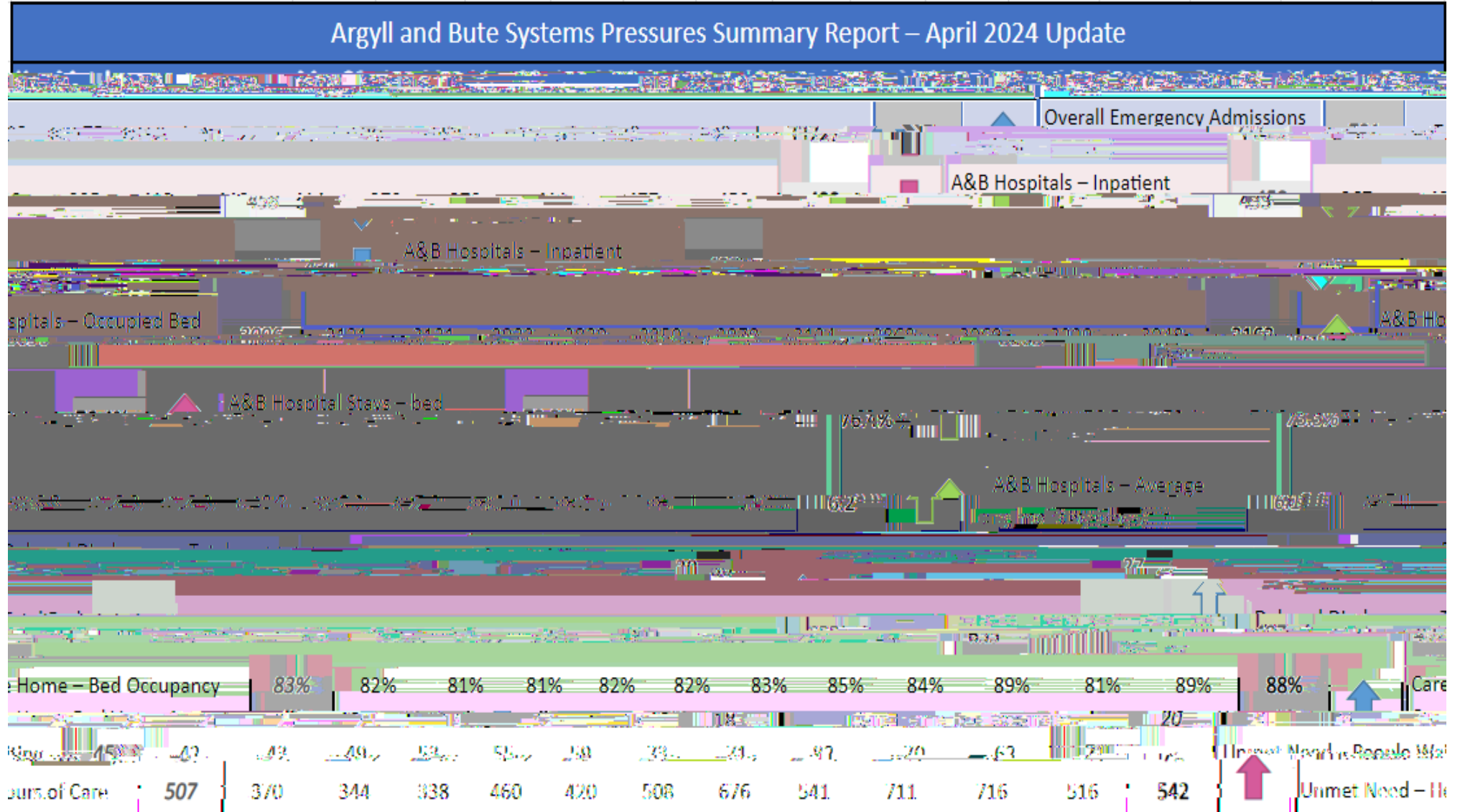
**Appendix 3**- Delayed Discharge Sitrep – 15<sup>th</sup> April 2024