Moray Integration Joint Board

DRAFT

Performance Management Framework

2019 - 2022

Contents

1. Introduction

Moray Integration Joint Board (MIJB) revised and approved their Strategic Plan for Health and Social Care in Moray, "Moray Partners in Care" 2019 to 2029, in October 2019. The Plan sets out the priorities for the MIJB for the next ten years and forms the central part of the strategic planning and performance framework.

MIJB is committed to developing a strong performance management culture in an open and transparent manner.

Implementing and embedding this Performance Management Framework (PMF) will support achievement of Moray IJB strategic priorities, with a specific focus on the following themes:

1.   Building Resilience – where people are enabled to take responsibility for their own health and wellbeing

2.   Homefirst – keeping people at home or in a homely environment

3.   Partners in Care – where people are empowered to make choices and take control

This PMF supports the MIJB in its performance management role and will:-

- Define performance management within the MIJB as it strives to deliver its Strategic Plan.
- Ensure everyone understands their responsibilities in delivering priorities and how this will be measured and reported.
- Provide a guide to all those involved in the performance management process.
- Set clear performance goals and measures that are understood This will support open scrutiny from both within MIJB, its Partner bodies and from the public.

2. Vision

Our vision as articulated in our Strategic Plan is:

"We come together as equal and valued partners in care to achieve the best health and well-being possible for everyone in moray throughout their lives"

The PMF underpins the delivery of the Strategic Plan by providing the mechanism by which the MIJB will demonstrate its progress

3. Performance Management Framework

The purpose of the PMF is to ensure that information is available which enables the Board and other key personnel to understand, monitor and assess the quality and performance of services, which will enable appropriate action to be taken when performance against set targets does not meet expectations.

Principles and Purpose

The following principles underpin this PMF:-

a) **Creating a performance culture** – these arrangements are intended to support the development of a culture of continuous improvement to deliver defined benefits to the people of Moray. This will be supported by clear objectives at all levels which drive a culture of high performance and accountability.

b) **Transparency** – the measures and evidence used to assess performance and inform decision making will be clear. Services and teams will understand what is required, how performance is measured and what to do if performance falls below expected levels. This will be supported through the implementation of rigorous assurance and review mechanisms.

c) **Delivery focus** – the performance management approach will be integrated, action orientated and focussed on delivering improved performance. Performance improvement plans, tools and techniques will be developed to support individual and team achievement.

d) **Accountability** – performance management arrangements will ensure there are clear lines of accountability in place to enable positive ownership.

Planning and performance management process

The PMF is integral to our strategic commissioning approach, as outlined in our Strategic Change and Service Improvement Framework (insert LINK)

For effective performance management, the 'Analyse-Plan-Implement-Review' cycle must operate at all levels of the MIJB. This ensures that the MIJB is continually working towards achieving its vision, delivering upon its plans and responding to the evolving needs of the Moray population.

4. Analyse – outlining aspirational and stretching objectives

The MIJB's Strategic Plan 2019-29 "Partners in Care" fulfils a statutory requirement under the Public Bodies (Joint Working) (Scotland) Act 2014 and is the key document setting out the strategic priorities for integrated health and social care services in Moray, built up from both national and local priorities.
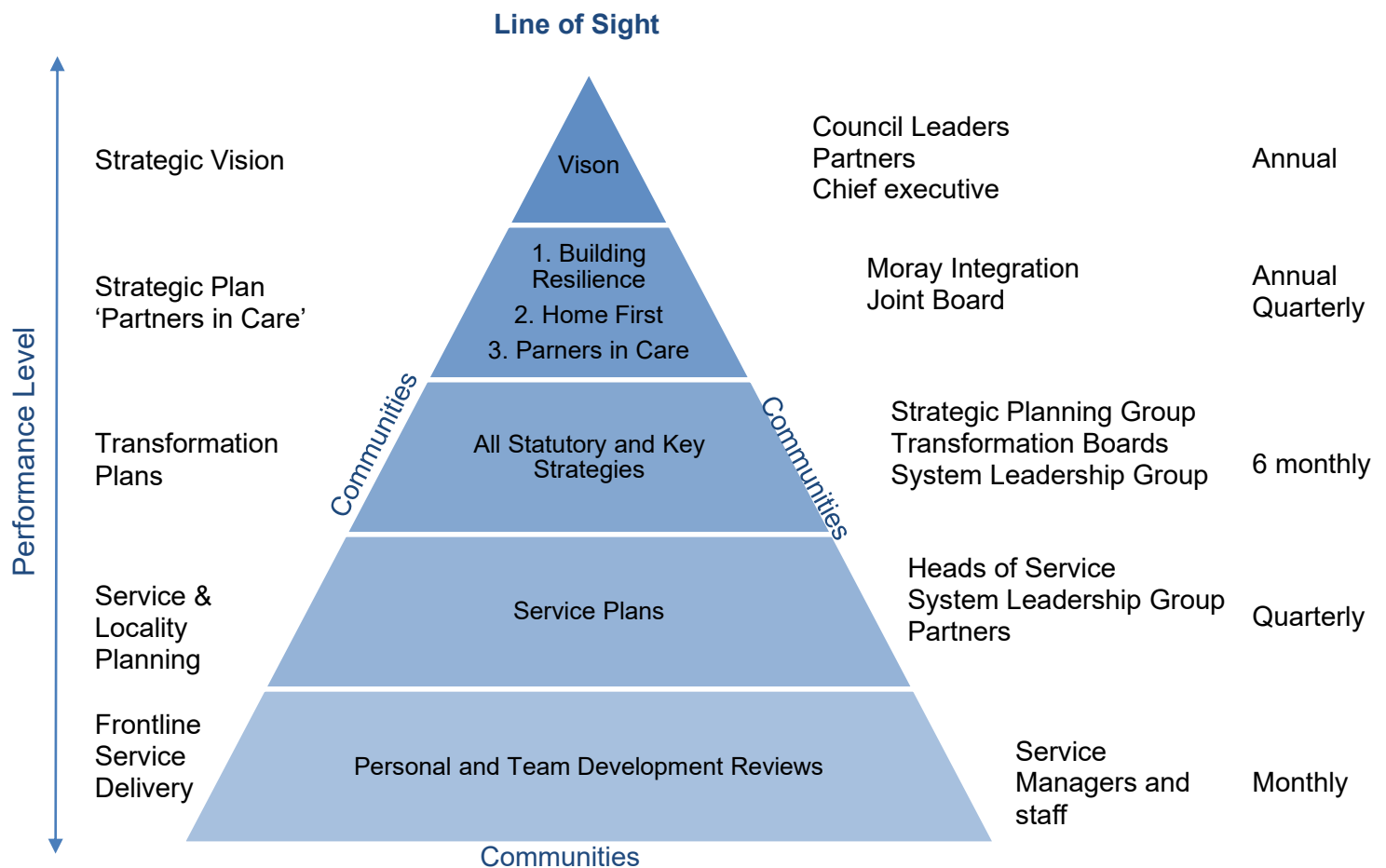
A Strategic Health Needs Analysis for the population of Moray (insert link) was completed in February 2019 and the findings informed the development of the 3 strategic themes.

These themes, performance outcomes and projects to deliver change will be set out in the developing Transformation Plan. By identifying and aligning appropriate national and local performance information to the themes it will be possible to describe in detail the shifts in service delivery that are required.

Projects taken forward by Transformation Boards will follow the Strategic Change and Service Improvement Framework, where analysis of data and provision of information is an integral element in the identification, evaluation and evidence based decision making process for option appraisal.

5. Plan

A key element of performance management and assurance arrangements is the need to ensure that individuals and teams are aware of their responsibilities in respect of delivering improvements in service and performance. MIJB's strategic priorities will be cascaded into objectives for all teams and individuals throughout the organisation and measurable targets will be agreed and set. This links directly to the continuous development and improvement of services and individuals, via individual review and development planning processes.

Line of Sight

Performance Level	Pyramid	Responsible	Frequency
Strategic Vision	Vison	Council Leaders Partners Chief executive	Annual
Strategic Plan 'Partners in Care'	1. Building Resilience 2. Home First 3. Parners in Care	Moray Integration Joint Board	Annual Quarterly
Transformation Plans	All Statutory and Key Strategies	Strategic Planning Group Transformation Boards System Leadership Group	6 monthly
Service & Locality Planning	Service Plans	Heads of Service System Leadership Group Partners	Quarterly
Frontline Service Delivery	Personal and Team Development Reviews	Service Managers and staff	Monthly

Communities

Strategic Plan

The 3 themes will be driven forward by Transformation Boards reporting to the Strategic Planning and Commissioning Group. Each Transformation Board will take

forward their specified stretch aims, describe the changes in performance that are required to deliver the aim, and monitor the performance progress.

Associated projects will have clear action plans setting out delivery milestones and measureable indicators of progress and responsibilities clearly defined.

Service Plans

Service Plans will be produced that support delivery of the Strategic Plan and will translate objectives into service targets, aligning with finance, workforce development and risk issues.

It will be the responsibility of the relevant Service Manager to deliver and monitor progress of service plans via agreed action plans with clear and measureable milestones which will support both the delivery of the Strategic Plan priorities as well as all other service functions.   Any significant performance breaches or risks identified during the monitoring process will be escalated to the Performance Management Group or System Leadership Group for a corrective action/decision to be made.

Performance colleagues work alongside Service Managers and Lead Officers to assist in the development of local performance indicators across services and produce relevant information in the monitoring of indicators – e.g. exception reports on activity trends.

Locality plans

Locality Plans require development and the Locality Managers will be integral to this process. The plans will align to the Strategic Plan themes, link to the Transformation Plan where appropriate, but will be focussed on the specific requirements of the locality.

Any resource implications or risk of delivery of locality priorities will be escalated to Systems Leadership Group for a corrective action/decision to be made.

Individual appraisals/Personal Development Plans (PDP)

Discussions at annual appraisals will provide clarity of priorities throughout Health and Social Care Moray, so that the vision and values of the MIJB runs from the Strategic Plan to the individual staff members who ultimately will be the key to successful delivery.

Performance management processes, systems and information

Critical to good performance management is the support of robust processes and systems for identifying, collecting, producing, recording and monitoring performance information.

The strategic plan, service and project plans set out the measurable objectives and targets that describe the outcomes and change that is required. The table below outlines the mechanism to ensure accountability of delivery of these objectives.

Level	Plan	Who is Accountable?	How is it Monitored?
Strategic	Strategic and Transformation Plan	MIJB members	Reviewed at Audit Performance and Risk Committee, quarterly. Annual Performance report.
Strategic	Transformation Plan / Strategic Plan	Strategic Planning and Commissioning Group / Transformation Boards	Performance information will be reviewed by transformation boards to inform decisions on priorities and options.
Operational	Locality Plans	Chief Officer	Chief Officer review progress with Heads of Service and Locality Managers
Operational	Service and Team plans	Head of Service or relevant Service Manager	Reviewed by teams regularly using dashboards. Key system indicators reviewed at Performance Management Group. Exceptions escalated to System Leadership Group for action and reported to Audit Performance and Risk Committee
Operational	Project Initiation and Business Cases	Project lead	Data and performance information will be analysed to inform and provide evidence for decisions
Individual	Team plan or individual development plans	Each member of staff	Reviewed with line manager regularly thorough appraisal process

Performance measures, targets and standards

Strategic objective actions will be assigned to the relevant Transformation Board to enable specific focus on delivering the shift agenda. The links/co-dependencies to other work areas will be clarified during the target setting process.

The set of Performance Measures currently reported to MIJB will be reviewed and agreed for the various levels within the organisation. These include specifically

MIJB, Transformation Boards, Localities and Service Management levels. They will include:

- National Health and Wellbeing Outcomes (**APPENDIX A**)
- Publicly Accountable indicators (**APPENDIX B**)
- Locally set standards and targets for Service Management

Reporting and analysis of information

Timely and accurate data is essential for effective performance monitoring. Heads of Service and Service Managers will work alongside and be supported by performance colleagues Health and Social Care Moray and in Health Intelligence, NHS Grampian to have systems in place to collect the agreed service information for performance monitoring purposes. This will include reporting and analysis of information to support service delivery with ongoing monitoring of performance against national outcomes and local indicators

Dashboards will be used to collate the appropriate measures for the subject or service covering quality, safety, efficiency and resource allocation and will assist managers by highlighting performance variance from target by using a Red/Amber/Green status. A sample dashboard is provided in **APPENDIX C.**

Performance will continue to be monitored through the Performance Management Group on a **quarterly** basis.

Local indicators will continue to be reported to the Audit, Risk and Performance Committee of the MIJB **quarterly** basis.

National and Ministerial Group indicators will be reported to the MIJB on an **annual** basis.

An Annual Performance Report outlining the progress in delivering the Strategic Plan objectives is required to be produced and published by 31 July each year, following approval by the MIJB.

6. Implement

There are a number of key actions required to embed this PMF across Health and Social Care Moray. These will include:-

- The review of performance measures to align to the new strategic plan priorities and transformation plan outcomes

- Development of the suite of performance measures for localities

- Communicating this framework and embedding the culture of continuous performance improvement throughout the organisation.

These actions will be taken forward by the performance management group of HSCM and progress reported to Audit Performance and Risk committee.

Scrutiny and assurance

Scrutiny of quarterly performance reports on agreed key indicators is delegated to the Audit, Performance and Risk Committee by the MIJB, with the yearend scrutiny of the Annual Performance Report undertaken by the MIJB.

A key component of the scrutiny and performance assurance process includes the inspection of services by external scrutiny bodies. The findings from those inspections taking place during the year are reported to Clinical and Care Governance Committee or Audit Performance and Risk committee as appropriate, and will form part of the public Annual Performance Report.

Published Annual Performance Report

Under Section 42 of the 2014 Public Bodies (Joint Working) Scotland Act, the MIJB will publish an Annual Performance Report. This will follow the Scottish Government's Guidance for Health and Social Care Integration Partnership Performance Reports. The key areas included in this are:

- Assessment of Performance in Relation to the National Health and Wellbeing Outcomes
- Financial Performance and Best Value
- Reporting on Localities
- Inspection of Services
- Review of Strategic Plan (where a review has occurred)

7. Review

This stage in the cycle is about learning from the information produced and from various other sources, including findings of external inspections and audits. It is crucial to creating a performance culture and is about understanding what has and has not worked.

Analysis, knowledge and information is collated from a number of sources and assessed to check that progress is on target, or where it is not to check that the reasons for the variances are understood. Sources include:

- current performance – how are we performing against targets? Are objectives and targets still relevant and realistic?
- national priorities – have national priorities remained the same?
- self-assessment – following evaluation from strategic through to service and locality level, what have we learned about ourselves and how we are performing?
- resource availability – how are we performing financially?
- risks – what are our main risks and how are we managing these?
- surveys – what do public, service users and/or staff think about particular themes & objectives? Have the public's priorities changed?
- complaints and feedback – what are our service users saying? What are we doing well/poorly?
- staff views – what are our staff saying? Are our staff motivated and engaged in delivering our vision and objectives?
- external audits and inspections – what are our external scrutiny bodies saying about us? How do they feel we are performing following inspection? Are changes needed, if so, how quickly can we implement these?
- internal audits – do we have process of internal audit of services and if so what are the outcomes and findings of these audits?
- SWOT analysis – what are our current strengths, weaknesses, opportunities and threats?

As a result of analysing all the information, informed decisions can be made and corrective action taken where required. This may include a redistribution of resources, revised plans and timescales, or even a revision to our objectives and priorities in the next round of planning.

8. Key Outcomes

Implementation of the Performance Management Framework

Following the implementation of the Performance Management Framework it is intended the following outcomes will be achieved:

- All staff will have a clear understanding of the PMF and how their work contributes towards the delivery of MIJB priorities.
- All staff will believe that achieving good performance is important
- There will be integrated and timely reporting with high quality commentary for performance reviews
- Data quality will be considered important and good arrangements will be in place to ensure quality at all levels
- The PMF will support External scrutiny
- To provide assurance that performance information is robust
- The approach to managing performance issues will be consistent across services.
- The MIJB will play a key role in monitoring and reviewing performance

National Health and Wellbeing Outcomes

The MIJB's Strategic Plan "Partners In Care" 2019-2029 fulfils a statutory requirement under the Public Bodies (Joint Working) (Scotland) Act 2014. It is the key document setting out the strategic priorities for integrated health and social care services. This is guided both by the national health and wellbeing outcomes as well as local needs. These outcomes are described in the 'National Health and Wellbeing Outcomes Guidance' 'and include:-

Outcome 1: People are able to look after and improve their own health and wellbeing and live in good health for longer

Outcome 2: People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community

Outcome 3: People who use health and social care services have positive experiences of those services, and have their dignity respected

Outcome 4: Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services

Outcome 5: Health and social care services contribute to reducing health inequalities

Outcome 6: People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being

Outcome 7: People using health and social care services are safe from harm

Outcome 8: People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide

Outcome 9: Resources are used effectively and efficiently in the provision of health and social care services

Core Suite of National Integration Indicators

Level	Indicator No	Indicator
	NI - 1	Percentage of adults able to look after their health very well or quite well
	NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible
	NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided
	NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated
	NI - 5	Total % of adults receiving any care or support who rated it as excellent or good
	NI - 6	Percentage of people with positive experience of the care provided by their GP practice
	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
	NI - 8	Total combined % carers who feel supported to continue in their caring role
	NI - 9	Percentage of adults supported at home who agreed they felt safe
	NI - 10	Percentage of staff who say they would recommend their workplace as a good place to work
	NI - 11	Premature mortality rate per 100,000 persons (European age-standardised mortality rate per 100,000 for people aged under 75)
	NI - 12	Emergency admission rate (per 100,000 population)
	NI - 13	Emergency bed day rate (per 100,000 population)
	NI - 14	Readmission to hospital within 28 days (per 1,000 population)
	NI - 15	Proportion of last 6 months of life spent at home or in a community setting
	NI - 16	Falls rate per 1,000 population aged 65+
	NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections
	NI - 18	Percentage of adults with intensive care needs receiving care at home
	NI - 19	Number of days people aged 75+ spend in hospital when they are ready to be discharged (per 1,000 population)
	NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency
	NI - 21	Percentage of people admitted to hospital from home during the year, who are discharged to a care home
	NI - 22	Percentage of people who are discharged from hospital within 72 hours of being ready
	NI - 23	Expenditure on end of life care, cost in last 6 months per death

Local Indicators

Level	Indicator No	Indicator
	L07	Rate of emergency occupied bed days for over 65s per 1000 population
	L08	Emergency Admissions rate per 1000 population for over 65s
	L09	Number of people over 65 years admitted as an emergency in the previous 12 months per 1000 population
	L10	Number of Bed Days Occupied by Delayed Discharges per quarter (inc code 9) per 1000 18+ population
	L11	Number of delayed discharges inc code 9 (Census snapshot, monthly average for quarter)
	L12	A&E Attendance rates per 1000 population (All Ages)
	L13	A&E Percentage of people seen within 4 hours, within community hospitals
	L14	Percentage of new dementia diagnoses who receive 1 year post-diagnostic support
	L15	Smoking cessation in 40% most deprived after 12 weeks
	L16	Percentage of clients receiving alcohol treatment within 3 weeks of referral
	L17	Percentage of clients receiving drug treatment within 3 weeks of referral
	L18	Number of Alcohol Brief Interventions being delivered (includes ABIs in priority and wider settings where data can be aligned to HSCP)
	L19A	Number of complaints received and % responded to within 20 working days - NHS
	L19B	Number of complaints received and % responded to within 20 working days - Council
	L20	NHS Sickness Absence % of Hours Lost
	L21	Council Sickness Absence (% of Calendar Days Lost)
	L41	Percentage of patients commencing Psychological Therapy Treatment within 18 weeks of referral

Ministerial Strategic Group indicators

1.	Emergency Admissions - Number of emergency admissions
2.	Unplanned bed days - Number of unscheduled hospital bed days; acute, Number of unscheduled hospital bed days; geriatric long stay, Number of unscheduled hospital bed days; mental health
3.	A&E - Number of A&E attendances, % seen within 4 hours, Number of admissions from A&E, A&E conversion rate (%)
4.	Delayed Discharges - Number of delayed discharge bed days
5.	End of Life Care - Percentage of last six months of life by setting, Bed days in last six months of life by setting
6.	Balance of Care - Percentage of population in community or institutional settings

SAMPLE MONTHLY PERFORMANCE DASHBOARD

Service: Period:

Performance Perspective	Sample Indicators	Out-turn	Traffic Light	Trend
People	Staff turnover			
	Absence rates			
	Locum/agency levels			
	IMatter Survey results			
Standards	Number of incidents reported			
	Number serious adverse incidents			
	Number of complaints received			
	% complaints completed within timescale			
	Cleanliness			
Service Delivery	Waiting times for service			
	Levels of Unplanned work			
	Levels of emergency demands			
	Levels of Unmet need			
Finance	Spend against budget			
	Cost per client			

Traffic Light Key:

Red   = target not met and out with tolerable variance

Amber = target not met but within tolerable variance

Green = target achieved or exceeded

General Guidance

Developing Local Performance Indicators

To ensure our performance indicators are meaningful and effective, the following criteria are considered when developing individual indicators/measures:

- relevant - to the MIJB aims and objectives, and are therefore aligned to both the national outcomes and local deliverables;
- attributable – the measured activity is aligned to the priorities of the MIJB and it is clear where accountability lies;
- well defined – clear and unambiguous, so data will be collected consistently and the measure is easy to understand and use;
- timely – producing information regularly enough to track progress and quick enough for all data still to be useful;
- reliable – accurate to allow for its intended use and responsive to change;
- comparable – with either past periods or similar activity elsewhere

Target Setting

All objectives, actions and targets should be SMART:

Specific: the need for a specific goal over a more general one, stating exactly what is expected

Measurable: if it is not measurable, how will we know how we are performing?

Achievable: goals and targets need to be challenging yet realistic, and not necessarily aspirational

Relevant: choosing objectives that matter and have a strong link to the improvement priorities

Time-bound: helps us to focus our efforts, and quite often deadlines are externally set