



REPORT TO: MORAY INTEGRATION JOINT BOARD AUDIT, PERFORMANCE AND RISK COMMITTEE ON 26 NOVEMBER 2020

SUBJECT: QUARTER 2 (JULY – SEPTEMBER 2020) PERFORMANCE REPORT

BY: CHIEF FINANCIAL OFFICER

1. REASON FOR REPORT

- 1.1 To provide an update the Audit, Performance and Risk (APR) Committee on performance as at Quarter 2 (July – September 2020).

2. RECOMMENDATION

- 2.1 It is recommended that the APR Committee consider and note:

- i) the performance of local indicators for Quarter 2 (July – September 2020) as presented in the Performance Report at APPENDIX 1; and
- ii) the analysis of the local indicators that have been highlighted and actions being undertaken to address performance that is outside of acceptable target ranges as detailed in APPENDIX 1;

3. BACKGROUND

- 3.1 The purpose of this report is to ensure the Moray Integration Joint Board (MIJB) fulfils its ongoing responsibility to ensure effective monitoring and reporting on the delivery of services and on the programme of work as set out in its Strategic Plan.
- 3.2 **APPENDIX 1** identifies local indicators for the MIJB and the functions delegated by NHS Grampian and Moray Council, to allow wider scrutiny by the Board.

4. **KEY MATTERS RELEVANT TO RECOMMENDATION**

- 4.1 Local Indicators are assessed on their performance via a common performance monitoring Red, Amber, Green (RAG) traffic light rating system.

<i>RAG scoring based on the following criteria:</i>	
GREEN	If Moray is performing better than target.
AMBER	If Moray is performing worse than target but within agreed tolerance.
RED	If Moray is performing worse than target by more than agreed tolerance.

- 4.2 The detailed performance report for quarter 1 is attached in **APPENDIX 1**.

Summary:

- 4.3 Performance within Health and Social Care Moray (HSCM) as demonstrated by the agreed indicators up to the end of quarter 2 of the financial year 2020/21 is showing as generally positive once again; however the impact of COVID-19 is starting to show in some indicators. There have been changes made to routine procedures in hospitals and care homes that have impacted HSCM services both positively and negatively.
- 4.4 Despite no target being set, the three indicators without targets are being monitored and there is action underway to address concerns around what appear to be high levels of Reviews Outstanding (OA-01). There is still currently no data available for council absences in quarter 1 and quarter 2 (SM-02) due to the COVID-19 pandemic interrupting operations within the HR department. Other data is available and is presented in a separate report to this committee.
- 4.5 The impact of COVID-19, where the whole system is still working to a different set of priorities, will mean that it will not be possible to draw direct comparisons with previous years. As per the MIJB development session on 30 July 2020 a graphic that illustrates the measures and how their performance relates to the strategic priorities as outlined in the Strategic Plan 2019-29 'Partners in Care' is now presented under the Indicator Summary.
- 4.6 All indicators and trends are presented with the acknowledgement that it is likely that there will be long-term unseen implications from the pandemic and targets will likely be re-assessed and updated appropriately.
- 4.7 The table below (Figure 1) gives a summary and the historical trend by indicator since quarter 2 2019/20.

Figure 1 – Performance Summary

Code	Measure	Q2 19-20	Q3 19-20	Q4 19-20	Q1 20-21	Q2 20-21	Target	Deviation
DD	Delayed Discharge							
DD-01	Number of delayed discharges (including code 9, Census snapshot, at end of quarter)	28	33	35	10	27	25	
DD-02	Number of Bed Days Occupied by Delayed Discharges per quarter (inc code 9) 18+ population	751	971	1,208	242	803	781	
EA	Emergency Admissions							
EA-01	Rate of emergency occupied bed days for over 65s per 1000 population	2,039	2,082	2,169	2,091	2,051	2,107	
EA-02	Emergency Admissions rate per 1000 population for over 65s	178.6	183.4	182.8	178.6	178.6	182	
EA-03	Number of people over 65 years admitted as an emergency in the previous 12 months per 1000 population	123.4	126.2	125.2	122.3	123.3	127	
AE	Accident and Emergency							
AE-01	A&E Attendance rate per day per 1000 population (All Ages)	22.3	24.5	17.5	15.8	17.9	22	
HR	Hospital Re-Admissions							
HR-01	% of Emergency Readmissions to hospital within 28 days - Moray Patients (Aug 2020)	8.2%	9.9%	6.5%	11.0%	11.8%	7.5%	
HR-02	% of Emergency Readmissions to hospital for within 7 days - Moray Patients	4.2%	5.5%	3.1%	4.4%	4.4%	3.5%	
UN	Unmet Need							
UN-01	Number of Long Term Home Care hours unmet at weekly Snapshot	-	-	-	623	523	Data only for first year	
UN-02	Number of People requiring Long Term homecare hours unmet at weekly Snapshot	-	-	-	36	44	Data only for first year	
OA	Outstanding Assessments							
OA-01	Number of Reviews Outstanding at end of quarter snapshot	-	-	-	1506	1608	Data only for first year	
MH	Mental Health							
MH-01	Percentage of patients commencing Psychological Therapy Treatment within 18 weeks of referral	78%	20%	20%	21%	23%	90%	
SM	Staff Management							
SM-01	NHS Sickness Absence (% of Hours Lost) (Aug 2020)	3.80%	5.30%	4.60%	3.10%	3.30%	4%	
SM-02	Council Sickness Absence (% of Calendar Days Lost)	8.80%	8.00%	9.08%	N/A	N/A	4%	

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Moray Partners in Care 2019 – 2029”

Performance management reporting is a legislative requirement under section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014.

In addition to publishing an Annual Performance Report, the Moray Integration Scheme requires that the MIJB will “monitor the performance of the delivery of integrated services using the Strategic Plan on an ongoing basis” (para 5.2.2 of the Moray Integration Scheme refers).

(b) Policy and Legal

None directly associated with this report.

(c) Financial implications

None directly associated with this report.

(d) Risk Implications and Mitigation

There are no risk issues arising directly from this report. The long term impact of the COVID-19 on the Health and Social Care system are still

unknown and performance measurement will remain flexible to enable the service to be prepared and react to any future developments.

(e) Staffing Implications

None directly associated with this report.

(f) Property

None directly associated with this report.

(g) Equalities/Socio Economic Impact

An Equality Impact Assessment is not required for the Performance Framework because there will be no impact, as a result of the report, on people with protected characteristics.

(h) Consultations

Interim Chief Officer, MIJB; Committee Services Officer, Moray Council; Service Managers where their respective areas are relevant to this report, Health and Social Care Moray; Service Manager, Performance and Workforce; IJB Corporate Manager.

6. CONCLUSION

6.1 This report requests the APR consider and note the performance of local indicators and actions summarised in Section 4 and expanded on in APPENDIX 1.

Author of Report: Bruce Woodward, Senior Performance Officer
Background Papers: Available on request
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