



REPORT TO: MORAY INTEGRATION JOINT BOARD AUDIT, PERFORMANCE AND RISK COMMITTEE ON 25 JULY 2019

SUBJECT: QUARTER 4 (JANUARY – MARCH 2019) PERFORMANCE REPORT

BY: CHIEF FINANCIAL OFFICER

1. REASON FOR REPORT

1.1 To update the Audit, Performance and Risk Committee on the performance of the Moray Integration Joint Board (MIJB) as at Quarter 4 (January – March) 2018/19.

2. RECOMMENDATION

2.1 **It is recommended that the Audit Performance and Risk Committee consider and note:**

- i) **the performance of local indicators for Quarter 4 (January – March 2019) as presented in the summary report at APPENDIX 1;**
- ii) **the detailed analysis of the local indicators that have been highlighted as requiring further analysis as contained within APPENDIX 2; and**
- iii) **that a review of local indicators is underway and a report with recommendations will be presented to the next committee.**

3. BACKGROUND

3.1 The purpose of this report is to ensure the 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 the The National Core Suite of Integration Indicators which have been developed from national data sources to ensure the measurement approach is consistent across all partnerships in Scotland.

3.3 **APPENDIX 2** identifies local indicators that are linked to the strategic priorities of the MIJB and the functions delegated by NHS Grampian and Moray Council, to allow wider scrutiny by this Committee.

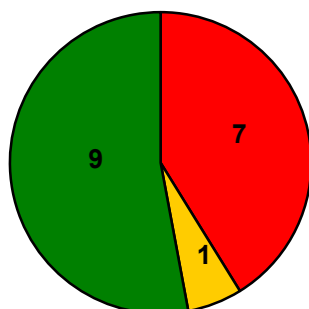
4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1 National Indicators have been released for 2018/19. Indicators are presented in **APPENDIX 1**. Indicators NI1 to NI10 are outcome indicators based on questions in the biennial health and care experience survey. There was no survey done in 2017/18 with the next survey due to be run during 2019/20.
- 4.2 The one indicator where Moray is showing as Red is Delayed Discharge related (NI-19 Number of days people aged 75+ spend in hospital when they are ready to be discharged (per 1,000 population). A separate report is being presented in relation to Delayed Discharges.
- 4.3 Indicators NI12, 13, 14, 16 and 20 are currently being reviewed by Information Services Division (ISD) and are likely to change. Therefore the figures in **APPENDIX 1** for these indicators and all the Scottish averages are provisional and will be updated when the final figures are provided by ISD.
- 4.4 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 (Where there is no target, previous quarter is used):</i>	
GREEN	If Moray is performing better than target.
AMBER	If Moray is performing worse than target but within 5% tolerance.
RED	If Moray is performing worse than target by more than 5%.
▲ - ▼	Indicating the direction of the current trend.

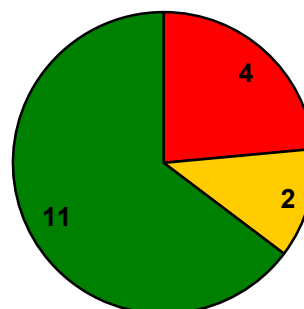
- 4.5 The performance information for quarter 4 is attached in **APPENDIX 2**. Moray has 17 local indicators 11 of which are green, 2 amber and 4 indicators showing their status as red.
- 4.6 Of the 7 red indicators in Q3, 3 are now green and 4 remain red (one of these is L14 which is only updated yearly so no change was expected). There was 1 amber indicator in Q3 which remains amber but is showing an improvement (L09 65+ Emergency Admissions). Of the 9 green indicators in quarter 3, 8 remain green, one is now Amber (L12 – A&E Attendance Rates per 1000 population (All Ages), this is due to the current nature of the measures without targets being measured on previous quarter's performance (See 4.8)).

Summary of indicators
Qtr 3 2018/19



■ RED ■ AMBER ■ GREEN

Summary of indicators
Qtr 4 2018/19



■ RED ■ AMBER ■ GREEN

- 4.7 Indicators which are RED (not meeting local targets and outwith tolerances) at quarter 4 have been highlighted by the Performance Team with the relevant Service Managers. An investigation into the reasons why the indicator is red has been undertaken and potential remedial actions have been identified, discussed and implemented to improve performance where possible. **APPENDIX 3** provides exception reporting and supplementary information which explains the background to current performance and the management action being undertaken to address the underlying issues.
- 4.8 Narrative on the low number of Alcohol Brief Interventions (ABIs) has been provided in **APPENDIX 3** and further to that the Grampian Alcohol and Screening Brief Intervention Strategy has been provided as **APPENDIX 4**. The implementation plan for this strategy is currently being worked on with the intention of being published in late 2019.
- 4.9 A review of local indicators is being undertaken to establish if the indicators submitted to this committee remain an appropriate and representative indication of emerging strategic priorities. Review of the targets that have been set and determining if those without require targets or should be presented as information only. Progress and recommendations on this matter will be reported to the next committee.

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Commissioning Plan 2016 – 2019

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

Appendix 3 highlights some of the difficulties being experienced in staff recruitment and sickness absence and the subsequent impact on service delivery. Further detailed analysis is being undertaken and management are exploring additional approaches and solutions to address this issue

(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

Consultation on this report has taken place with the following staff who are in agreement with the content in relation to their area of responsibility:-

- Chief Officer, MIJB
- Caroline Howie, Committee Services Officer
- Service Managers, Health and Social Care Moray
- Corporate Manager

6. CONCLUSION

6.1 This report requests the Audit, Performance and Risk Committee comment on performance of local indicators and actions summarised in the highlight report (APPENDIX 3).

6.2 Progress on the review of Indicators to be brought to the next Audit, Performance and Risk Committee.

Author of Report: Bruce Woodward, Senior Performance Officer

Background Papers: Available on request

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