



To: Renfrewshire Integration Joint Board

On: 17 September 2021

Report by: Head of Strategic Planning and Health Improvement

Subject: Performance Framework Report 2021/22

Direction Required to	Direction to:	
Health Board, Council	1. No Direction Required	X
or Both	2. NHS Greater Glasgow & Clyde	
	3. Renfrewshire Council	
	4. NHS Greater Glasgow & Clyde	
	and Renfrewshire Council	

1. Summary

- 1.1 This paper sets out the HSCP's proposed Performance Framework and Performance Scorecard for 2021/22. It also includes a web link to our 2020/21 full Annual Performance Report (APR) and the APR Summary that were published on the HSCP's website on 30th July 2021.
- 1.2 Performance will continue to be presented at all IJB meetings over 2021/22. The full Scorecard updating all performance measures will be presented twice yearly at mid-year and end of year 2021/22.
- 1.3 At IJB meetings when the Scorecard is not presented, we will report performance on other key areas including unscheduled care; survey results as they become available; and benchmarking our performance on the national indicators against other HSCPs across Scotland.

2. Recommendations

It is recommended the IJB:

- Approve the HSCP's draft Performance Framework for 2021/22.
- Approve the draft Performance Scorecard for 2021/22 (at appendix one).
- Note the 2020/21 full Annual Performance Report (APR) and the APR Summary were published on the HSCP's website on 30th July 2021 and are available at:

https://www.renfrewshire.hscp.scot/article/6316/Performance-Reports

3. Performance Framework 2021/22

- 3.1 Over the last few months, we have carried out a review of Renfrewshire HSCP's Performance Framework for 2021/22. Ensuring accountability, transparency and openness, our Framework informs the Partnership's decision-making in planning service areas and provides the structure to understand, scrutinise and improve service delivery.
- We have completed the process of reviewing the Scorecard performance indicators in collaboration with Heads of Service and Service Managers to ensure we have meaningful indicators with realistic and achievable targets.

4. Format Changes to the 2021/22 Scorecard

Our approach going forward includes some changes to the format of our performance report. Performance indicators have previously been aligned to the 9 National Health and Wellbeing Outcomes and presented in Outcome order 1 to 9. In the draft Scorecard for 2021/22 (attached as Appendix one) we will still cross reference the performance indicators to the 9 outcomes, however the data will be presented and categorised under those indicators that have red, amber and green status. Presenting the data in this way will show clearly which indicators are doing well with green status; those within 10% variance of target with amber status; and those indicators that are more than 10% variance from target with red status. There were also performance indicators in the Scorecard that had no targets assigned to them. We have reviewed these indicators and Heads of Service have agreed new targets where appropriate (more detail on the new targets is in section 7).

5. Performance Indicators removed from the 2021/22 Scorecard

5.1 There were 68 indicators within the 2020/21 Scorecard and we have reduced this to 57 in the 2021/22 Scorecard. The 11 indicators not included in the 2021/22 Scorecard and the reasons for this are included in table 1 overleaf.

Table 1

Performance Indicator	Reason for deletion from 2021/22 Scorecard
People newly diagnosed with dementia have a minimum of 1 year's post-diagnostic support	
Percentage waiting for dementia post-diagnostic support within 12 week standard	Performance stable
3. Percentage of homecare clients aged 65+ receiving personal care	
4. Percentage of deaths in acute hospitals (65+)	Green status for 2 years
5. Percentage of deaths in acute hospitals (75+)	Green status for 3 years
6. The number of readmissions to hospital 65+	Reported to Heads of Service on a
7. The emergency bed days rate 65+ (rate per 1,000 population)	monthly basis
8. Number of Young Carers' Statements completed	Sits with Renfrewshire Council's Children's Services
9. Care at Home costs per hour (65 and over)	
10. Direct Payment spend on adults 18+ as a % of total social work spend on adults 18+	Local Government Benchmarking Framework indicators which will be reported separately to the IJB when the data is available.
11.Net residential costs per week for older persons	

- On review, it was recognised that some of the performance indicators are now classed as 'business as usual' where performance has remained stable for a period of time (numbers 1 to 3).
- 5.3 Some other indicators with targets have had green status for the last two to three years (numbers 4 and 5). While the performance of these indicators will still be monitored, we have deleted these from the 2021/22 Scorecard. The Senior Management Team will continue to be advised should the performance of any of these indicators cause concern.
- 5.4 A monthly Older People's Unscheduled Care Report is shared with Heads of Service and includes a number of performance indicators including two from the Scorecard: the number of readmissions to

hospital 65+ and the emergency bed days rate 65+ (rate per 1,000 population) (numbers 6 and 7). Performance against these two indicators has been stable over the last three years and was lower than average in 2020/21 due to the pandemic. As these indicators are reported to Heads of Service on a regular basis we have removed them from the Scorecard for 2021/22.

- 5.5 Renfrewshire Council's Children's Services has responsibility for supporting young carers to complete young carers' statements (number 8) therefore this indicator is less relevant for the HSCP and has been removed for 2021/22.
- The indicators in the table at numbers 9 to 11 are from the Local Government Benchmarking Framework. The Framework provides an opportunity to compare performance across council areas using a suite of indicators identified by the Improvement Service. There are no targets aligned to these indicators and updates on performance are provided annually. The Heads of Service agreed that these indicators should be removed from the Scorecard and a separate report on the Framework indicators will be presented to the IJB when the data is next available.
- 5.7 The IJB will be notified should performance seriously decline on any of the 11 indicators shown in Table 1.

6. Change of Target

One performance indicator included in the Scorecard is to reduce the rate of pregnancies for those under 16 years of age (rate per 1,000 population). Our target for this indicator was 3.1 and this has been achieved over the last three years with rates of 2.4 (2018/19); 1.5 (2019/20) and 1.0 (2020/21). Our recommendation is to reduce the target to a rate of 1.6, which is an average of the last three years' performance. The rate is now so low that even a slight increase in numbers will increase the rate and at this point it is not clear what the impact of the pandemic will be due to access to contraception and lack of planned activities etc.

7. New Targets

7.1 Targets have been allocated to 5 performance indicators in the 2021/22 Scorecard and these are detailed in table 2. The target set for 2021/22 is based on the average performance over the last three years for each of the indicators. While we have assessed the targets as both realistic and achievable, we are still recovering from the pandemic and are uncertain what challenges the winter period will bring. This is particularly relevant to the target set for emergency admissions from

care homes. The care homes are supported by care home liaison nurses and advanced nurse practitioners that work with the care homes to reduce avoidable admissions to hospital.

7.2 Table 2 shows the 2021/22 target and the performance achieved in 2020/21.

Table 2

Performance Indicator	Target for 2021/22	2020/21 value
Emergency Admissions from	692	506
Care Homes		
2. Number of adult support	114	86
plans completed by carers		
3. Number of adult support	46	51
plans declined by carers		
4. Number of adults with a new	221	201
Anticipatory Care Plan		
5. Percentage of routine OT	45%	41%
referrals allocated within 9		
weeks		

8. Performance Indicators with no Targets

- 8.1 Section two of the Performance Scorecard contains indicators with no targets allocated to them. There are a number of reasons why it is not appropriate for some indicators to have specific targets and this is detailed in sections 8.2 to 8.6. Performance against these indicators is still monitored closely.
- 8.2 Sensitive Routine Enquiry (SRE) Indicators this work was paused during the pandemic. Improvement work on the collation of SRE data is now progressing across NHSGGC as previously data had to be pulled manually from files/case notes. This is an issue across all Health Board areas and will be discussed at the next Public Health Scotland Gender Based Violence (GBV) Leads Network.
- 8.3 Ministerial Scottish Government (MSG) Indicators NHSGGC has not set HSCP level targets/projections for 2021/22. Projections for 2022/23 for emergency admissions 65+ were discussed at the GGC Delivery Group meeting in July 2021, however the targets will be at a GGC level and until agreed with the Board as part of the Design & Delivery Plan will not be broken down by HSCP. Performance against these indicators will continue to be closely monitored in line with the NHSGGC Unscheduled Care Commissioning Plan and similar to

previous years, a performance report on the MSG indicators will be presented to the IJB in March 2022.

- 8.4 Safe from Harm Indicators it is less appropriate to have targets against the 'safe from harm' indicators. For example, there were 22 suicides in Renfrewshire in 2020 and while we work to reduce this number, it is not appropriate to set a target against this indicator. The direction of travel will continue to be monitored and reported on the scorecard. For the performance indicators in the service areas: adult protection contacts; mental health officer service etc. we want all those that need the service to access it to keep them safe from harm. This number may fluctuate from year to year.
- 8.5 Social Care there are two social care indicators that do not have targets allocated for 2021/22: homecare hours provided (rate per 1,000 population aged 65+) and population of clients receiving telecare (rate per 1,000 population aged 75+). Performance against these indicators will be monitored throughout 2021/22 and if appropriate targets will be set for 2022/23.
- 8.6 Prescribing variance from budget when performance is below the prescribing variance from budget e.g. 5.72% under budget in 2020/21, this is positive and it is less relevant to set a specific target against this indicator.

9. Performance Reporting to Boards/Groups/Teams

- 9.1 As reported at the June IJB meeting, the HSCP is creating Care Group Planning Fora to develop the priorities for the new Strategic Plan and provide a consistent approach across all service areas. Performance dashboards will be created with each group using relevant indicators from the IJB Scorecard. In addition, further indicators will be identified for the new Strategic Plan priorities using both quantitative and qualitative measures. Learning Disabilities, for example, is an area where we want to establish meaningful indicators to evidence the work being carried out in the service and the positive impact this has on people's health and wellbeing outcomes.
- 9.2 Table 3, overleaf, summarises the proposed reporting cycle for 2021/22.

Table 3

Performance Framework 2021/22									
Board/Group/Team	Reports	Frequency							
Integration Joint Board (IJB)	Annual Performance Report	Performance reported to all IJB meetings							
	Performance Scorecards								
	Unscheduled Care								
	Survey results								
	Benchmarking								
Senior Management Team (SMT)	Dashboards showing areas of concern (red and amber status)	Monthly							
	Service level reports e.g. Children's Services; Mental Health								
Heads of Service and Service Managers	Service level dashboards and reports	Quarterly							
Strategic Planning Group (SPG)	Annual Performance Report	Annually							
	Performance measures aligned to the Strategic Plan								
SPG Sub Groups	Care Group Dashboards based on the priorities identified for the 2022-25 Strategic Plan	Bi-annual							
Chief Executives NHSGGC/Council	Organisational Performance Reviews	Bi-annual							

10. Planning and Performance Team

The planning and performance role within the HSCP is provided by a small team and uses data from both the NHS and Council systems. We are keen to have a more integrated approach around our performance management and increase the resilience of the team. A new role has been created to support this and we hope to recruit a Senior Planning and Performance Development Officer post in the coming months.

11. Final Annual Performance Report 2020/21

11.1 The final Annual Performance Report for 2020/21 was published online on Friday 30 July 2021 at the following link and printed copies are available on request:

https://www.renfrewshire.hscp.scot/article/6316/Performance-Reports

11.2 A summary 'easy read' version of the Annual Performance Report 2020/21 was also developed and is available online at the same link above.

Implications of the Report

- 1. Financial None
- 2. HR & Organisational Development None
- 3. **Community Planning None**
- **4. Legal** Meets the obligations under clause 4/4 of the Integration Scheme.
- 5. **Property/Assets** None
- **6. Information Technology** None
- 7. Equality & Human Rights The recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement have been identified arising from the recommendations contained in the report.
- 8. Health & Safety None
- 9. **Procurement** None
- 10. Risk None
- **11. Privacy Impact** None

List of Background Papers – None.

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Renfrewshire Integration Joint Board Scorecard 2021-2022

	National Health and Wellbeing Outcomes
1	People are able to look after and improve their own health and wellbeing and live in good health for longer
2	People are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community
3	People who use health and social care services have positive experiences of those services, and have their dignity respected
4	Health and social care services are centred on helping to maintain or improve the quality of life of service users
5	Health and social care services contribute to reducing health inequalities
6	People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing
7	People using health and social care services are safe from harm
8	People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged in the work they do
9	Resources are used effectively in the provision of health and social care services

Perfor Status	rmance Indicator s		Direction of Travel		Target Source
	Alert: 14		Improvement	N	National
	Warning: 9		Deterioration	В	NHSGGC Board
	Target achieved: 16		Same as previous reporting period	L	Local
	No targets: 18			М	MSG

This Performance Scorecard is for the financial Year 2021/22 and mid-year data for April to September 2021 will be presented to the IJB on 19 November 2021. In light of the exceptional circumstances surrounding the COVID-19 pandemic, some data for 2020/21 remains unvalidated and should be seen as indicative.

As previously outlined to the IJB, while the Scorecard Report continues to highlight how the Partnership has performed against the measures normally used for comparison year on year, it is difficult to draw direct comparisons to previous performance data due to the pandemic. The HSCP will therefore continue to proactively monitor performance trends to assess the impact of the pandemic throughout 2021/22.

<u>Section 1 – Performance Indicators with Targets</u>

14 Red Indicators	Performance is more than 10% variance from target							
Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source	
1. Child and Adolescents Mental Health (CAMHS) - % of patients seen within 18 weeks (Outcome 3)	66.7%	70.1%		80%	•		N	
2. Percentage of Primary Care Mental Health Team patients referred to first appointment offered within 4 weeks (Outcome 3)	90.5%	89.0%		100%	•		В	
3. Reduce drug related hospital stays - rate per 100,000 population (Outcome 4)	2019/20 data not available until Oct 2021	2020/21 data not available until Oct 2022		170	-		N	
4. Percentage of children seen within 18 weeks for paediatric Speech & Language Therapy assessment to appointment (Outcome 4)	100%	63%		95%	•		В	
5. Smoking cessation - non-smokers at the 3- month follow-up in the 40% most deprived areas (Outcome 5)	173	161		182	•		В	
6. Number of carers accessing training (Outcome 6)	255	165		220	•		L	
7. Number of adult support plans completed for carers (age 18+) (Outcome 6)	162	86		114	•		L	
8. Number of adult support plans declined by carers (age 18+) (Outcome 6)	34	51		46	•		L	
9. % of health staff with completed TURAS profile/PDP (Outcome 8)	49.3%	41.7%		80%	•		В	
10. Sickness absence rate for HSCP NHS staff (Outcome 8)	4.75%	5.65%		4%	•		N	

Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source
11. % of new referrals to the Podiatry Service seen within 4 weeks in Renfrewshire (Outcome 9)	90.1%	67.0%		90%	•		В
12. % of new referrals to the Podiatry Service seen within 4 weeks in NHSGGC (Outcome 9)	91.4%	62.0%		90%	•		В
13. % of diabetic foot ulcers seen within 4 weeks in Renfrewshire (Clyde) (Outcome 9)	81.7%	77.0%		90%	•		В
14. % of diabetic foot ulcers seen within 4 weeks in NHSGGC (Outcome 9)	81.2%	75.0%		90%	•		В

9 Amber Indicators		Performance is less than 10% variance from target						
Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source	
15. Percentage of long term care clients receiving intensive home care (national target: 30%) (Outcome 2)	27%	29%		30%	•		N	
16. Percentage of routine OT referrals allocated within 9 weeks (Outcome 2)	42%	41%		45%	•		L	
17. Number of adults with a new Anticipatory Care Plan (Outcome 2)	159	201		221	•		L	
18. Percentage of patients who started treatment within 18 weeks of referral to Psychological Therapies (Outcome 3)	92.3%	86.8%		90%	•	_	N	

Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source
19. A&E waits less than 4 hours (Outcome 3)	87.4%	Feb 21 87.4%		95%	-		N
20. Percentage of NHS staff who have passed the Fire Safety LearnPro module (Outcome 3)	80.2%	84.4%		90%	•	_	В
21. Reduce the percentage of babies with a low birth weight (<2500g) (Outcome 4)	6.7%	Sep 20 6.1%		6%	•	_	В
22. Formulary compliance (Outcome 9)	78.1%	Feb 21 77.5%		78%	•	_	L
23. Prescribing cost per treated patient (Outcome 9)	£91.34	Feb 21 £88.37		£86.63	•	_	L

16 Green Indicators	Performance is on or exceeds target						
Performance Indicator	19/20 Value	20/21 Value	2021/22 Value	Target	Direction of Travel	Status	Target Source
24. Exclusive breastfeeding at 6-8 weeks (Outcome 1)	24.4%	Sep 20 29.5%		21.4%	•	>	В
25. Percentage of clients accessing out of hours home care services (65+) (Outcome 2)	90%	90%		85%	_	②	L
26. Number of clients on the Occupational Therapy waiting list (as at position) (Outcome 2)	315	159		350	•	②	L
27. Reduce the rate of pregnancies for those under 16 years of age (rate per 1,000 population) (Outcome 4)	1.5	1.0		1.6	•	>	L
28. At least 80% of pregnant women in each SIMD quintile will have booked for antenatal care by the 12th week of gestation (Outcome 4)	94.4%	Sep 20: 93.3%		80%	•	⊘	N

Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source
29. Uptake rate of child health 30-month assessment (Outcome 4)	95.5%	87%		80%	•	②	N
30. Percentage of children vaccinated against MMR at 5 years (Outcome 4)	99.0%	Dec 20 96.5%		95%	•	②	N
31. Percentage of children vaccinated against MMR at 24 months (Outcome 4)	95.0%	Dec 20 98.8%		95%	•	②	N
32. Reduce the rate of alcohol related hospital stays per 1,000 population (now rolling year data) (Outcome 4)	8.4	Dec 20 7.4p		8.9	•	②	N
33. Percentage of paediatric Speech & Language Therapy wait times triaged within 8 weeks (Outcome 4)	100%	100%		100%	-	②	В
34. Alcohol and Drugs waiting times for referral to treatment. % seen within 3 weeks (Outcome 4)	95.9%	Dec 20 95.8%		91.5%	-		N
35. Emergency admissions from care homes (Outcome 4)	746	506		692	•	Ø	L
36. Exclusive breastfeeding at 6-8 weeks in the most deprived areas (Outcome 5)	16.7%	20.8%		19.9%	•	⊘	В
37. Improve the overall iMatter staff response rate (Outcome 8)		ring COVID 9.		60%	-	Ø	В
38. % of complaints within HSCP responded to within 20 days (Outcome 8)	78%	82%		70%	•	②	В
39. Sickness absence rate for HSCP Adult Social Work staff (work days lost per FTE) (Outcome 8)	18.08	13.5		15.3	•	②	L

Section 2 – Performance Indicators without Targets

Sensitive Routine Enquiry Indicators (4)								
Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source	
40. Number of routine sensitive inquiries (Outcome 3)	200	Paused due to COVID-		-	•		-	
41. Number of referrals made as a result of the routine sensitive inquiry being carried out (Outcome 3)	1	Paused due to COVID-		-	-		-	
42. Number of staff trained in sensitive routine enquiry (Outcome 5)	28	Paused due to COVID- 19		-	•		-	
43. Number of staff trained in Risk Identification Checklist and referral to MARAC. (Outcome 5)	64	Paused due to COVID- 19		-	•		-	

Ministerial Scottish Government Indicators (5)								
Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source	
44. Number of unscheduled hospital bed days; acute specialties (18+) (Outcome 2)	126,904	110,986p		-	•		М	
45. Number of emergency admissions (18+) (Outcome 2)	18,173	14,396p		-	•		М	
46. Number of delayed discharge bed days (Outcome 2)	9,122	8,759		-	•	**	М	
47. Total number of A&E attendances (Outcome 9)	60,238	39,344p		-	•		М	
48. Number of A&E attendances (18+) (Outcome 9)	47,297	31,832p		-	•		М	

Safe from Harm Indicators (6)								
Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source	
49. Number of Alcohol Brief Interventions (Outcome 1)	224	53		-	•		-	
50. Number of suicides (Outcome 7)	16 (2019)	22 (2020)		-	•		-	
51. Number of Adult Protection contacts received (Outcome 7)	3,106	3,487		-	-		-	
52. Total Mental Health Officer service activity (Outcome 7)	683	627		-	-		-	
53. Number of Chief Social Worker Guardianships (as at position) (Outcome 7)	110	115		-	-		-	
54. Percentage of children registered in this period who have previously been on the Child Protection Register (Outcome 7)	11%	29%		-	-	2	-	

Social Care Indicators (2)								
Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source	
55. Homecare hours provided - rate per 1,000 population aged 65+ (Outcome 2)	414	390		-	-		-	
56. Population of clients receiving telecare (75+) - Rate per 1,000 (Outcome 2)	50	46		-	•		-	

Prescribing Indicator (1)								
Performance Indicator	19/20 Value	20/21 Value	21/22 Value	Target	Direction of Travel	Status	Target Source	
57. Prescribing variance from budget (Outcome 9)	2.61% under budget	5.72% under budget		-	•		-	

Notes
* Denotes an indicator where year-end data is unavailable due to the impact of the COVID-19 pandemic.

p Denotes provisional data