



IJB Performance and Finance Committee

12<sup>th</sup> July 2018

This Report relates to  
Item 6 on the Agenda

# 2017/18 Quarter 4 Integration Joint Board Performance Update

*(Paper presented by Ananda Allan)*

*For Approval*

<b>Approved for Submission by</b>	Vicky Freeman, Head of Strategic Planning
<b>Author</b>	Ananda Allan, Performance and Intelligence Manager
<b>List of Background Papers</b>	The Public Bodies (Joint Working) (Scotland) Act 2014

	<p>The Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014</p> <p>Health and Social Care Integration Public Bodies (Joint Working) Scotland Act 2014 – Core Suite of Integration Indicators</p> <p>Scottish Government Guidance for Health and Social Care Integration Partnership Performance Reports</p> <p>Integration Scheme between NHS Dumfries And Galloway and Dumfries and Galloway Council</p> <p>Dumfries and Galloway IJB Health and Social Care Strategic Plan (including Locality Plans – Annandale &amp; Eskdale; Nithsdale; Stewartry and Wigtownshire)</p> <p>Integration Joint Board Paper “<i>Performance Management Arrangements for the Integration Joint Board</i>” 14<sup>th</sup> July 2016</p> <p>Health and Social Care Senior Management Team Area Committee and Locally Agreed Indicators Paper – August 2016</p> <p>Integration Joint Board Paper “<i>Performance Management</i>” 22<sup>nd</sup> September 2016</p> <p>Performance and Finance Committee Paper “<i>Measuring Performance Under Integration</i>” March 2017</p> <p>Performance and Finance Committee Paper “<i>Ministerial Strategic Group Integration Indicators Performance Update</i>” 23<sup>rd</sup> February 2018</p>
<b>Appendices</b>	Appendix 1 - Quarter 4 Performance Report

## SECTION 1: REPORT CONTENT

<b>Title/Subject:</b>	2017/18 Quarter 4 IJB Performance Update
<b>Meeting:</b>	IJB Performance and Finance Committee
<b>Date:</b>	12 <sup>th</sup> July 2018
<b>Submitted By:</b>	Vicky Freeman
<b>Action:</b>	For Approval

### 1. Introduction

- 1.1 Section 42 of the 2014 Public Bodies (Joint Working) (Scotland) Act requires that Performance Reports be prepared by the Partnership.
- 1.2 The framework and flow of reporting have been previously agreed by Dumfries and Galloway Integration Joint Board (please see background papers above).
- 1.3 This is the 8th quarterly performance report to the Integration Joint Board. It provides information for the period 1<sup>st</sup> January 2018 to 31<sup>st</sup> March 2018 on performance against a range of indicators. These indicators relate to the commitments contained within the Integration Joint Board's Strategic Plan for Health and Social Care which, in turn, relate to the nine national outcomes.

### 2. Recommendations

#### 2.1 The IJB Performance and Finance Committee is asked to:

- **Discuss and approve the Quarter 4 Performance Report, 1 January 2018 to 31 March 2018.**

### 3. Background

- 3.1 This report follows on from work previously undertaken to develop the performance management arrangements for the Dumfries and Galloway Health and Social Care Partnership.
- 3.2 The Scottish Health and Care Experience Survey (HACE) is a postal survey which was sent to a random sample of people who were registered with a GP in Scotland in October 2017. The survey has been run every two years since 2009. The survey asks about people's experiences of accessing and using their GP practice and other local healthcare services; receiving care, support and help with everyday living; and caring responsibilities.
- 3.3 Across Dumfries and Galloway, a random sample of 16,071 adults were invited to take part in the HACE survey in October 2017 and 4,986 responded. The response

rate for the region was 31%. This is significantly better than for Scotland, where 22% of people responded.

- 3.4 Of the nearly 5,000 people who responded, 746 identified as Carers (15.1%) and 281 (5.7%) people answered questions about their experiences of social care. This is the same proportion of Carers (15.0%) and people experiencing social care (5.7%) observed in the whole of Scotland. (Note that these people did not necessarily answer every question intended for Carers and people with experience of social care.)
- 3.5 The last Census in 2011 identified that around 12% of the adult population of Dumfries and Galloway identified as Carers. Figures from the Social Care Survey in March 2017 showed that around 2% of adults in Dumfries and Galloway receive care at home. The number of people responding to the HACE survey who identified as Carers or had experience of social care is higher than the number that would have been expected in the general population, which is a positive observation.
- 3.6 Results of the HACE survey are publicly available at Partnership, GP Cluster (Locality) and individual GP practice level at this web site: [www.gov.scot/GPSurvey](http://www.gov.scot/GPSurvey)

#### 4. Main Body of the Report

- 4.1 Please see Quarter 4 Performance Report – 1 January 2018 to 31 March 2018 (Appendix One).
- 4.2 Indicators which have particular points to note:
- 4.2.1 **A15 Proportion of the last 6 months of life spent at home or in a community setting (p.11)** – The provisional figures for 2017/18 show that the proportion of time people in their last 6 months of life, spent in a community setting, has gone up from 87.7% to 89.2%.
- 4.2.2 **B4 Treatment time guarantee (TTG) (p.16)** – The March 2018 figure of 77.7% is lower than the prediction but higher than the Scottish figure of 75.9%. January to March 2018 was the worst period of winter pressures across the country.
- 4.2.3 **B6 Percentage of patients waiting less than 12 weeks for a new appointment (p.18)** – The technical problem that was discovered affecting this indicator was repaired. The percentage of people waiting less than 12 weeks for a first outpatient appointment was 90.4% in the month of March 2018. This is above the desired trajectory for this indicator. The Scottish rate was 75.1% in the month of March 2018.
- 4.2.4 **B7 Diagnostic Waiting Times for 8 key tests (p.19)** – In the quarter ending March 2018, 98.0% of people waiting to undergo 8 key diagnostic tests were seen within 6 weeks against a target of 100%. The Scottish rate for the same period was 80.6%.
- 4.2.5 **C1 Adults assessing Telecare as a percentage of the total number of adults supported to live at home (p.20)** – The percentage of adults supported to live at home who are accessing telecare has risen to 70.0% in March 2018 against a target of 73%.

- 4.2.6 **C2-4 Number of adults receiving care at home via SDS Option 1, 2 and 3 (p.21)** – The first people receiving their care through Option 2 are starting to be seen in the official figures. The number is small but is expected to rise over time.
- 4.2.7 **C9 Feedback received by referrers on actions taken within 5 days of receipt of adult protection referral (p.32)** - Across Dumfries and Galloway in the quarter ending March 2018, 62.6% of people referring a Duty to Inquire case to Adult Support and Protection (ASP) received feedback within 5 days of receipt of referral against a target of 75%.
- 4.2.8 **A3 Adults supported at home who agree they had a say in how their help, care or support was provided (p.36)** - 80.0% of the adults in Dumfries and Galloway supported at home who responded to the HACE survey, agreed they had a say in how their care or support was provided. This is higher than the result for Scotland (75.6%). A further 8.0% (21 people) responded that they did not agree they had a say in how their help, care or support was provided.
- 4.2.9 **A4 Adults supported at home who agree their health and care services seemed to be well co-ordinated (p.37)** - 83% of adults in Dumfries and Galloway supported at home who responded to the HACE survey, agreed that their health care services seemed to be well co-ordinated. This is statistically significantly higher than the result for Scotland (74.3%).
- 4.2.10 **A6 Positive experience of the care provided by their GP practice (p.38)** - 87% of adults in Dumfries and Galloway who responded to the Health and Care Experience Survey (HACE) agreed they had a positive experience of care from the GP practice. This figure is 5% lower than the previous result. There is substantial variation between different GP practices, with locality averages ranging from 81-91%.
- 4.2.11 **A8 Carers who feel supported to continue in their caring role (p.40)** - Of the 673 Carers who responded to the Health and Care Experience Survey (HACE) in Dumfries and Galloway, 40% responded that they agreed they felt supported to continue in their caring role. This is a decrease of 9% since 2016 which is a statistically significant difference. The figure for Scotland was 37%.
- 4.2.12 **B18 Sickness Absence Rate (p.35)** –The rate of sickness absence amongst NHS employees rose from 4.9% to 5.3% in January to March 2018 and rose from 6.0% to 7.8% for Adult Social Services, against a target of 4%. Challenging levels of absence contribute to the winter pressures during the January – March 2018 period.
- 4.2.13 **E1 Emergency admissions per month (p. 43) and E2 Unscheduled hospital bed days for acute specialties (p.44)** – These indicators have been updated to show the complete data for the quarter ending December 2017 (now at 99% complete). The figures are closely following the predicted values.

## **5. Conclusions**

The 2017/18 Quarter 4 report is the fourth instalment of performance reporting for the Health and Social Care Partnership this financial year.

## **SECTION 2: COMPLIANCE WITH GOVERNANCE STANDARDS**

### **6. Resource Implications**

6.1. None

### **7. Impact on Integration Joint Board Outcomes, Priorities and Policy**

7.1. Robust performance management arrangements are critical to the delivery of the Strategic Commissioning Plan.

### **8. Legal & Risk Implications**

8.1. Regular performance reporting by the Integration Joint Board is a legislative requirement.

### **9. Consultation**

9.1. IJB Workshop – 20<sup>th</sup> May 2016

9.2. Performance Management Group – 17<sup>th</sup> June 2016

9.3. All members seminar – Mid December 2016

### **10. Equality and Human Rights Impact Assessment**

10.1. None

### **11. Glossary**

IJB	Integration Joint Board
NHS	National Health Service