



Perth & Kinross Integration Joint Board

Audit & Performance Committee

11 December 2023

KEY STRATEGIC PERFORMANCE INDICATOR REPORT - QUARTER TWO

Report by Chief Officer
(Report No. G/23/174)

1. PURPOSE OF REPORT

1.1 This report provides the Audit and Performance Committee with an update on strategic performance when considering the core set of integration indicators and the delivery of approved Strategic Delivery Plan (SDP) outcomes.

A key performance indicator (KPI) report for our Community Mental Health and Wellbeing Strategy is also provided within the appendices.

2. RECOMMENDATION(S)

2.1 The Audit and Performance Committee (A&PC) is asked to:

- (i) Note strategic performance in relation to the core suite of integration indicators.
- (ii) Note progress in the delivery of the outcomes defined within the Community Mental Health and Wellbeing SDP.

3. BACKGROUND/PROPOSAL

3.1 This report provides an overview of performance against the key strategic performance indicators (KPIs) up to the end of the second quarter of 2023/24 and follows the publication of our first Quarterly Performance Update report in September 2023.

3.2 Appendices 1.1 and 1.2 provide a detailed illustration of performance across the indicator set with data to September 2023 and includes comparisons to Tayside.

3.3 Appendix 1.3 provides further information with comparisons to Scotland and our peer group of similar Health and Social Care Partnership areas. Due to the national comparisons contained within this data set, it is more historical in nature. It should be noted that population make-up across different local authority areas varies considerably, and so direct comparisons should be viewed with caution. Relative movements in performance over time are more helpful with comparisons used as context only.

- 3.4 When reviewing all the data contained in this report, it is important to recognise that it is provided at an early stage and ahead of national publication. In this respect the data is useful for management purposes but may be incomplete and will be subject to change throughout future validation processes. Our practice nonetheless is to provide the Committee with the best and most up to date data available.
- 3.5 In addition to our routine performance reporting, additional research has been undertaken in respect to readmissions and this is summarised below.
- 3.6 It remains our intention to bring forward a performance report for one of our Care Group Strategic Delivery Plans at each meeting of the Audit and Performance Committee. As such this report contains an outcome focussed KPI update report for our Community Mental Health and Wellbeing Strategy at Appendix 2.

4. OVERVIEW

National Indicators (Appendix 1)

- 4.1 Performance against the indicator set is good overall. Emergency admissions have improved in the last quarter and combined with good performance in the reduction of occupied bed days (reduced 2.62%) and delayed discharges (reduced 15%), we can see that the extensive and intensive work undertaken to support our frail/elderly population is having an impact. More detail on this was recently reported to the Integration Joint Board when the board considered a [progress update on the Older People's Strategic Delivery Plan](#).
- 4.2 Readmissions to hospital within 28 days have increased marginally (3.31%) in the year to date. On average, this equates to an additional 3 people being readmitted per week compared to last year.
- 4.3 In March we reported that the rate of readmissions was increasing and that this was driven by increases in readmissions within 7 days rather than 8 to 28 days as these were declining. Taking a longer-term view, we have compared the current rate of readmission to those seen in 2019-20, the year immediately before the Covid-19 pandemic. Overall, we can see that the rate of readmissions within 7 days of discharge has increased by 55.1% for people in the 18 to 74-year-old age group. This represents an additional 6.3 people within this age group being readmitted per week compared to pre-pandemic levels.
- 4.4 In the 75+ age group readmissions have increased but to a lesser extent (26.1%). This increase represents 2.7 more people being readmitted per week compared to pre-pandemic levels.
- 4.5 The reasons for changes in readmission rates is complex with population demographics likely being a significant factor combined with the lasting effects of the pandemic on our population. We acknowledge that this increase in readmissions requires deeper and more qualitative investigation and this work will now be taken forward within a wider working group including operational colleagues.

National/Peer Group Comparisons

- 4.6 Appendix 1.3 provides an additional supplementary view of performance across the core set of KPIs with comparisons to Scotland and our Peer Group. Due to the way data is gathered nationally these comparisons come with a significant time delay and so this data covers Quarter 1 only.
- 4.7 Similar to that reported above, performance in Perth and Kinross is good across this indicator set compared to last year. Our Peer Group have similarly performed well in

this period however it is notable that our work to improve delayed discharge performance means that we now compare well with the peer group.

Qualitative Performance

- 4.8 Nationally, Health and Social Care performance is measured qualitatively via the two yearly Health and Care Experience (HACE) Survey. Although this is helpful it does not provide information readily enough for managerial purposes. Locally we use two methods of gathering qualitative data. This is done via our Service User Patient Experience (SUPE) Survey and via Care Opinion. The survey seeks to gather feedback directly from service users or their carers at or near the point of service delivery and asks questions which are linked closely to those within the national HACE survey. Table 1 provides detail on the responses received between April and September 2023 and highlights that qualitative performance is very good with all indicators indicating high levels of satisfaction.

Table 1

National Qualitative Indicators*		Number of Respondents (omitting blanks)
% of adults able to look after their health very well or quite well	96%	55
% of adults supported at home who agree that they are supported to live as independently as possible	84%	43
% of adults supported at home who agree that they had a say in how their help, care or support was provided	100%	80
% of adults supported at home who agree that their health and care services seemed to be well co-ordinated	96%	53
% of adults receiving any care or support who rate it as excellent or good	97%	59
% of people with positive experience of care while accessing HSCP Services [^]	100%	90
% of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life.	98%	54
% of carers who feel supported to continue in their caring role	88%	8
% of adults supported at home who agreed they felt safe.	100%	86

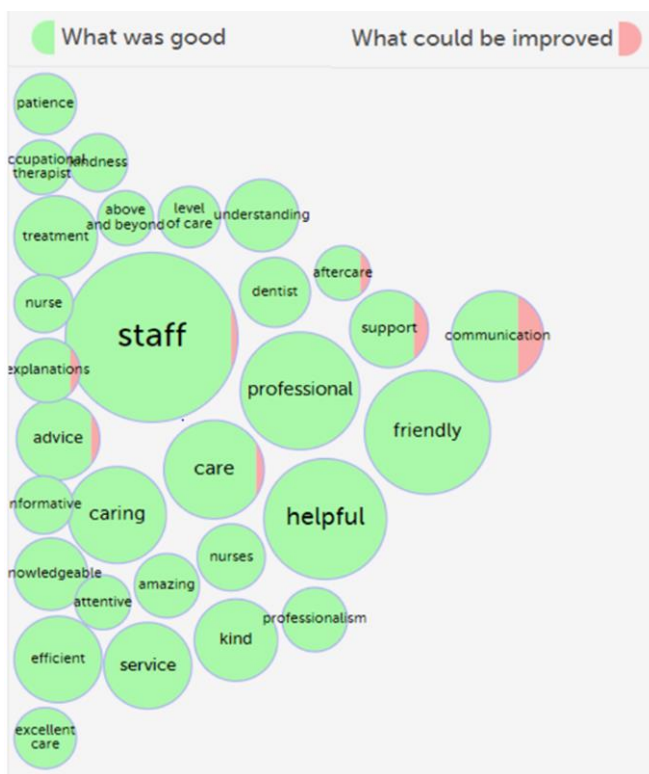
*data sourced via local SUPE survey and mapped to national indicators which are biennially produced via the national health and care experience survey

[^] deviation from HACE question which relates directly to experiences when accessing GP practices.

- 4.9 Care Opinion gathers more detailed individual stories of the experiences of people who use our services. Figure 1 demonstrates the type of feedback received in this reporting period. For reference the size of a circle indicates the frequency with which the words appear in Care Opinion stories with green colouring indicating positivity. In the reporting period, April to September 2023, of the 141 stories published on Care Opinion, 90% were judged by moderators as positive or not

critical of the service they received, 3% were minimally critical, 5% mildly critical and 2% were moderately critical.

Figure 1



5. CARE GROUP PERFORMANCE OVERALL

5.1 As previously discussed within the A&PC we have committed to bringing forward one Care Group KPI report at each meeting of the Committee. Appendix 2 sets out in detail the latest performance report for Community Mental Health and Wellbeing. In summary progress is good with most indicators on target. More detail on the actions taken to improve services is contained with the recent [update report to the IJB](#).

6. CONCLUSION

- 6.1 Performance to date against the core set of indicators is good when compared to 2022/23 with notable improvement in respect to delayed discharges in particular.
- 6.2 We continue to develop our approach to performance reporting and how this links to overall strategic progress. As this work continues, we will develop targets which seek to drive improvement bearing in mind the local context.
- 6.3 It is our intention to provide the A&PC with further performance reports at each committee meeting. These will include an expansion of links between our approved SDP outcomes and our overall strategic aims.

Author(s)

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1. IMPLICATIONS, ASSESSMENTS, CONSULTATION AND COMMUNICATION

Strategic Implications	
HSCP Strategic Commissioning Plan	YES
Transformation Programme	None
Resource Implications Financial	
Financial	None
Workforce	None
Assessments	
Equality Impact Assessment	None
Risk	None
Other assessments (enter here from para 3.3)	None
Consultation	
External	None
Internal	YES
Legal & Governance	
Legal	None
Clinical/Care/Professional Governance	None
Corporate Governance	YES
Directions	None
Communication	
Communications Plan	None

1. Strategic Implications

Strategic Commissioning Plan

1.1 This routine performance report supports the delivery of the Perth & Kinross Strategic Commissioning Plan in relation to all five deliverables below:

- 1 prevention and early intervention,
- 2 person centred health, care and support,
- 3 work together with communities,
- 4 inequality, inequity and healthy living, and
- 5 best use of facilities, people and resources.

Transformation Programme

1.2 This report has no direct Transformation Programme implications.

2. Resource Implications

Financial

2.1 This report has no direct financial implications.

Workforce

2.2 This report has no direct workforce related implications.

3. Assessments

Equality Impact Assessment

3.1 This report sets out progress in respect to performance in against the nationally agreed integration indicators. In doing so it provides assurance of progress in relation to our Strategic Commissioning Plan which includes the reduction of in the impact of inequalities.

Risk

3.2 This report has no direct risk implications.

Other assessments

3.3 This report provides an assessment of performance against national integration indicators.

4. Consultation

External

4.1 N/A

Internal

- 4.2 The contents of this report have been reviewed internally with the Executive Management Team.
- 4.3 The contents of Appendix 2 have been reviewed by Community Mental Health and Wellbeing portfolio lead.

Impact of Recommendation

- 4.4 N/A

5. Legal and Governance

- 5.1 This report supports the delivery of the IJB's public reporting responsibilities.

6. Directions

- 6.1 N/A

7. Communication

- 7.1 N/A

2. BACKGROUND PAPERS/REFERENCES

- 2.1 The documents that have been relied on in preparing the report, other than those committee reports already referenced within the main body of the report are as follow:

Core Suite Integration Indicators September 2023 Update

Perth & Kinross Performance Update 06.23

NHST TAN Local Indicator Report 07.23

PHS NI-AgeGrouping_data_02_23

Improvement Service Sub-Council Area Population Projections

All documents will be kept available for inspection by the public for four years from the date of the meeting at which the report is presented.

9. APPENDICES

Appendix 1 - Perth & Kinross Health and Social Care Partnership, National Indicators Key Performance Update

Appendix 2 – Community Mental Health and Wellbeing: Performance Management Framework KPI Report.