

## Scottish Borders Health & Social Care partnership Proposed Integrated Performance Management Framework At 27th July 2016

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## **Purpose**

The integration of health and social care has two key objectives which are mutually reinforcing - securing better outcomes and experiences for individuals and communities and obtaining better use of resources across health, care and support systems at national and local levels.

The National Health and Wellbeing Outcomes provide a strategic framework for the planning and delivery of health and social care services. They are high-level statements of what health and social care partners are attempting to achieve through integration and ultimately through the pursuit of quality improvement across health and social care.

The IJB is responsible for planning and ensuring the delivery of a wide range of health and social care services, to ensure the achievement of the national outcomes. The Strategic Plan set out how this should be achieved at a strategic level and the commissioning and implementation plan gives more detail in relation to the specific expectations for change, delivering the National Health and Wellbeing Outcomes. The IJB are also required to publish an annual performance report which will set out how we are improving the National Health and Wellbeing Outcomes. These reports will include information about the core suite of integration indicators as set by the Scottish Government, supported by local measures and contextualising data to provide a broader picture of local performance.

Following the initial Proposed Integrated Performance Management Framework (7<sup>th</sup> April 2016) it has been agreed that an integrated Performance Management Framework needs to be developed and progressed.

This paper therefore sets out an outline for a Performance Monitoring Matrix which will become the core monitoring for the Performance Management Framework and will also outline the work which is required in order to further develop and progress the framework.

## **Background**

NHS Borders and Scottish Borders Council both have organisational performance frameworks already in place. The intention locally is to minimise / avoid duplication with these and the IJB performance framework as far as possible. A "Core Suite" set of 23 Integration Indicators has been set by the Scottish Government, developed from national data sources so that the measurement approach is consistent across all Health and Social Care Partnership areas. This set of core indicators underpin the 9 National Health and Wellbeing Outcomes.

The performance framework must highlight progress and delivery against the achievement of the commitments outlined within the Strategic Plan. It is therefore proposed that the best way to do this is that the initial performance framework is based on current and existing measures including the National Health and Wellbeing Outcomes. A framework consisting of three reporting levels is therefore a sensible way forward as outlined in the following diagrams.

#### Level 1

#### National Health & Wellbeing (H&W) Outcomes

Healthier Living	Independent living	Positive	Quality of life of	Reducing health
-		experiences of	service users	inequalities
		service users		

Carers are supported	Safety of service users	Supported and engaged	Resources	are	used
		workforce	effectively		

The nine national Health and Wellbeing Outcomes are high-level statements of what the Health and Social Care Partnership is attempting to achieve through integration. These outcomes and indicators will rely on nationally gathered data to ensure consistency of definition and collection methodology.

#### Level 2

#### **Publicly Accountable Indicators and Targets**

23 Health and Social Care "Core Suite" Indicators have been set by the Scottish Government, against which every Health and Social Care Partnership is required to publicly report on. These measures need to be monitored to allow performance management and improvement to take place within the partnership. These Indicators each map to one or more of the 9 National Health and Wellbeing Outcomes. In addition we already have mandatory reporting measures such as HEAT.

#### Level 3

### **Local Management Information**

Locally agreed	Locally agreed	Care group	Workforce	Financial	Corporate
Partnership	locality specific	specific	specific	performance	Performance
specific measures	measures	measures	measures		

Level 3 will require further discussion and development to determine local measures, as whilst the Core Suite of Integration Indicators set by the Scottish Government will provide an indication of progress, they will not provide the full picture. As a Partnership we will need to collect and understand a wide range of data and feedback that helps understand the system at locality level, and manage and improve services.

## **Key Issues**

The overall performance framework for the IJB therefore needs to reflect objectives and help to monitor:

- How the delivery arrangements are contributing to the delivery of the Strategic Plan
- Progress on the delivery of national outcomes and indicators
- Transformation of individual outcomes and experience
- Transformation of local health, care and support systems
- Change in local process including:
  - Effective engagement of housing and other services including the third sector and independent sector
  - o in care models
  - o in whole systems planning and investment
  - o Evidence based models of care.

Given the many elements of integrated care and the wide range of services delegated to Health and Social Care Partnerships it will be important to ensure our performance framework addresses as many of the key local dimensions as possible, including specific sub-sets of indicators for particular groups of service users and also information at a locality level. This wider dataset needs developed as commissioning matures through the IJB.

Currently we have local performance data which is gathered regularly and can be used as sub-sets for the indicators. There is also potential locally sourced information which can be used as sub-sets for the indicators if they are judged to directly contribute to the outcome of the indicator. This is evident in the level 2 indictors that have been included within this report. It should be noted that what has been provided within level 2 is what NHS Borders and Scottish Borders Council currently report on within their retrospective organisations therefore the IJB must consider if these are appropriate and if members would wish to receive these.

As the Core Suite of 23 indicators are primarily measured on an annual or Biennial basis the local Level 3 data will be required more frequently and must demonstrate a direct causal link to the indicator.

#### Recommendation

It is therefore proposed we work with the Performance Monitoring Matrix (as per Appendix 1) for the next 12 to 24 months. This matrix encompasses principally level 1 and level 2 measures and the table currently shows the source of information and frequency of publication. To augment this information, local information currently gathered can be used as the starting point for level 3 measures.

The Performance Monitoring Matrix must set out measures which inform the decision making process. To further progress this framework we need to fully understand what it is managers required to direct the operation of the IJB.

## **Priority measures for 2016/17**

Over the three years of the Strategic Plan, performance will be measured by progress in relation to all of the indicators included in our developing Performance Management Framework. In year 1 of the Plan (i.e. 2016/17) we are focusing on key target areas – supporting people at home and the wellbeing of our staff. Therefore, we will be prioritising work that will contribute to improving performance against the following seven indicators:-

- Percentage of people who are discharged from hospital within 72 hours of being ready (Health &Wellbeing Outcomes 2, 3 and 9);
- Number of bed days people spend in hospital when they are ready to be discharged (H&W Outcomes 2, 3, 4 and 9);
- Overall Rates of emergency hospital admissions in adults (H&W Outcomes 1, 2, 4, 5 and 7);
- Readmissions to hospital within 28 days of discharge (H&W Outcomes 2,3, 7 and 9);
- Admissions to hospital in the over 65s as a result of falls (H&W Outcomes 2, 4, 7 and 9);
- Percentage of adults with intensive care needs receiving care at home (H&W Outcomes 2 and 6);
- Proportion of employees who would recommend their workplace as a good place to work (H&W Outcome 8).

## How this will be managed

The corporate services functions in both NHS Borders and Scottish Borders councils will together collate data on the indicators included in the Performance Monitoring Framework. These will be regularly reviewed by the Chief Officer for the Health and Social Care Partnership and the Health and Social Care Management Team. In turn, reports will be provided to the IJB at intervals to be mutually agreed.

## Appendix 1 Draft Performance Management measures against National Health and Wellbeing Outcomes

#### Notes:

- 1. Individual performance measures often map to more than one of the National Health and Wellbeing Outcomes, therefore some indicators appear more than once in the matrix below. In some cases, indicators map to a greater number of Outcomes than shown here, but the full one-to-many relationship is not always shown here (typically in the case of indicators that map to more than two of the National Health and Wellbeing Outcomes).
- 2. More information on the Core Suite of Integration Indicators for Health and Social Care Partnerships is published at <a href="http://www.gov.scot/Topics/Health/Policy/Adult-Health-SocialCare-Integration/Outcomes/Indicators">http://www.gov.scot/Topics/Health/Policy/Adult-Health-SocialCare-Integration/Outcomes/Indicators</a>.

	LEVEL 1			LEVEL 2				LEV	EL 2/3
H&W O No		Core Suite Indicator No.	Core Suite Indicator	Source	Core (Y/N)	Frequency of publication	Produced by	Additional Local Information Gathered	Potential Local Information Required
1	People are able to look after and improve their own health and wellbeing and live in good health for longer.	1 11	Percentage of adults able to look after their health very well or quite well  Premature mortality rate  Emergency admissions rate per 100,000 population aged 18+ (to Acute Hospitals, Geriatric Long Stay, and Acute	Scottish Government Health and Care Experience Survey NRS - European Age- Standardised mortality rate per 100,000 for people aged under 75 in Scotland.  ISD - SMR01/SMR01-	Y	Biennial	SG	Dementia: Registration - HEAT Standard Detect Cancer Early - HEAT Standard IVF Treatment Waiting Times – HEAT Standard Smoking Cessation - HEAT Standard	
		12	Psychiatric Hospitals)	E/SMR04	Υ	Annual	ISD		

			Percentage of adults	Scottish					
			supported at home who	Government					
			agree that they are	Health and Care					
			supported to live as	Experience					
		2	independently as possible	Survey	Υ	Biennial	SG		
				Survey	ı	Dieminai	30	-	
			Emergency admissions rate per 100,000						
			The state of the s						
			population aged 18+ (to Acute Hospitals, Geriatric	ISD -					
			Long Stay, and Acute	SMR01/SMR01-					
		12	Psychiatric Hospitals)	E/SMR04	Υ	Annual	ISD		
			Percentage of adults with	L/Sivinto 1		71111441	132	_	
			intensive care needs						
		18	receiving care at home						Number of people aged 65+ receiving
			Percentage of adults	Scottish					homecare
			supported at home who	Government					Percentage of homecare clients 65+
			agree that they had a say	Health and Care					(receiving a service at weekends,
			in how their help, care or	Experience					receiving personal care, receiving service
		3	support was provided.	Survey	Υ	Biennial	SG		during evenings/overnight)
			Emergency bed day rate						Total number of homecare hours per 1,000 pop'n aged 65+
			per 100,000 population						New Clients receiving a community care
			aged 18+ (to Acute						assessment
	People, including those		Hospitals, Geriatric Long	ISD -				% of people aged 65 or over with	New personal care clients receiving a new
	with disabilities, long-term		Stay, and Acute Psychiatric	SMR01/SMR01-				intensive needs receiving care at	service
	conditions, or who are frail,	13	Hospitals)	E/SMR04	Υ	Annual	ISD	home	Number of internal homecare service
2	are able to live, as far as							Dementia: Post-Diagnosis Support -	users (65+)
	reasonably practicable,							HEAT Standard	Number of external homecare packages
	independently and at home		Readmission to hospital					Increase the number of telecare clients	(65+)
	in a homely setting in the	14	within 28 days	ISD - SMR01	Υ	Annual	ISD		Number of internal and external
	community.			ISD Scotland.					homecare hours delivered per week
				SMR01 (Acute					(65+)
				hospitals),					Total homecare hours per week (65+)
				SMR01-E					Number of people on waiting list (TPL) for
				(Geriatric Long					homecare assessment /
				Stay beds),					referral (All Ages)
				SMR04 (Acute					Number of homecare service users (under
			Proportion of last 6	psychiatric					65)
			months of life spent at	hospitals) and NRS death					Number of under 65s waiting on a
		15	home or in a community setting	registrations	Υ	Annual	ISD		homecare service
		13	Setting	registrations		Aiiiidai	130		
			Falls rate per 1,000						
		16	population aged 65+	ISD - SMR01	Υ	Annual	ISD		
			Percentage of adults with						
			intensive care needs	SG - Social Care					
		18	receiving care at home	return	Υ	Annual	SG		

			Number of days people						
			spend in hospital when						
			they are ready to be						
			discharged, per 1,000						
		19?	population	ISD - EDISON	V	Annual	ISD		
		13:	population	ISD EDISON		Ailitual	135		
			Percentage of health and						
			care resource spent on						
			hospital stays where the	ISD Health and					
			patient was admitted in an	Social Care/IRF					
		20	emergency - adults 18+	team.	Υ	Annual	ISD		
			Percentage of people						
			admitted to hospital from						
			home during the year, who						
			are discharged to a care	Indicator under					
		21	home	development	Υ	TBC	TBC		
			Percentage of people who						
			are discharged from						
			hospital within 72 hours of	Indicator under					
		22	being ready	development	Υ	Annual	ISD		
			zemg ready	acreiopinent	·	7	.52		
			Expenditure on end of life	Indicator under					
		23	care	development	Υ	Annual	ISD		
			Percentage of adults	Scottish					
			supported at home who	Government					
			agree that they had a say	Health and Care					
			in how their help, care or	Experience					
		3	support was provided.	Survey	Υ	Biennial	SG		
			Percentage of adults	Scottish		2.0	30		
			supported at home who	Government					
			agree that their health and	Health and Care					
			care services seemed to be	Experience					
	People who use health and	4	well co-ordinated	Survey	Υ	Biennial	SG	% ofadults feeling safe	Percentage of users satisfied with the
	social care services have		in an ear an area	Scottish		J.C.Mai		A&E Waiting Times: 4-Hour Waits -	Community Alarm Service,
3	positive experiences of		Percentage of adults	Government				HEAT Standard	Telecare provision
	those services, and have		receiving any care or	Health and Care				Drugs & Alcohol Waiting Times - HEAT	% of adults satisfied with social care or
	their dignity respected.		support who rate it as	Experience				Standard	social work services
		5	excellent or good	Survey	Υ	Biennial	SG	Standard	
		3	CACCHETT OF BOOK	Scottish	-	Dicinilai	30		
			Percentage of people with	Government					
			positive experience of the	Health and Care					
			care provided by their GP	Experience					
		6	practice	Survey	Υ	Biennial	SG		
		0	<u> </u>	Survey		Diemilai	30		
		1.4	Readmission to hospital	ICD CNADOA	V	Annual	ICD		
		14	within 28 days	ISD - SMR01	Y	Annual	ISD		

				ICD CII					
				ISD Scotland.					
				SMR01 (Acute					
				hospitals),					
				SMR01-E					
				(Geriatric Long					
				Stay beds),					
				SMR04 (Acute					
			Proportion of last 6						
				psychiatric					
			months of life spent at	hospitals) and					
			home or in a community	NRS death					
		15	setting	registrations	Υ	Annual	ISD		
							ISD/SG/L		
							ocally		
							TBC		
			Proportion of care services				(indicator		
			graded 'good' (4) or better				under		
			in Care Inspectorate	Care			develop		
		17	·		Y	Annual	ment)		
		1/	inspections	Inspectorate	ſ	Alliludi	ment)		
			Number of days people						
			spend in hospital when						
			they are ready to be						
			discharged, per 1,000						
		19?	population	ISD - EDISON	Υ	Annual	ISD		
			Percentage of people who						
			are discharged from						
			hospital within 72 hours of	Indicator under					
		22	being ready	development	Υ	Annual	ISD		
			Expenditure on end of life	Indicator under					
		23	care	development	Υ	Annual	ISD		
			Percentage of adults					18 Weeks Referral To Treatment - HEAT	
			supported at home who					Standard	
			The state of the s	Scottish				Alcohol Brief Interventions - HEAT	
			agree that their services						
			and support had an impact	Government				Standard	
			in improving or	Health and Care				All Inpatient Services – Admissions,	
			maintaining their quality of	Experience				Discharges, Length of Stay	
		7	life.	Survey	Υ	Biennial	SG	Allied Health Professionals	
			Emergency admissions					Musculoskeletal waiting times*	
	Health and social care		rate per 100,000					CAMHS Waiting Times - HEAT Standard	
	services are centred on		population aged 18+ (to					Cancer Waiting Times: 31-Day Decision	
4	helping to maintain or		Acute Hospitals, Geriatric	ISD -				To Treat - HEAT Standard, 62-Day	
4	. •		The state of the s	SMR01/SMR01-				Referral To Treatment - HEAT Standard	
	improve the quality of life	12	Long Stay, and Acute		Y	0	ICD	Community hospital inpatient -	
	of service users.	12	Psychiatric Hospitals)	E/SMR04	Y	Annual	ISD	Admissions, Discharges, Length of Stay	
			Emergency bed day rate						
			per 100,000 population					Diagnostics Waiting > 6 Weeks - HEAT	
			aged 18+ (to Acute					Standard	
			Hospitals, Geriatric Long	ISD -				Palliative Care - Admissions, Discharges,	
			Stay, and Acute Psychiatric	SMR01/SMR01-				Length of Stay	
		13	Hospitals)	E/SMR04	Y	Annual	ISD	Patient Treatment Time Guarantee (12	
		- 13	Falls rate per 1,000	2/Sitino-		71111301	100	Weeks) - HEAT Standard	
		16		ISD - SMR01	\ <sub>\</sub>	Annual	ISD	Proportion of care services graded	
		16	population aged 65+	ISD - SIVIKUT	Y	Annuai	טטו	(good' (4) or bottor in Care	

		17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections  Number of days people spend in hospital when they are ready to be discharged, per 1,000 population	Care Inspectorate	Y	Annual	ISD/SG/L ocally TBC (indicator under develop ment)	Psychological Therapies Waiting Times - HEAT Standard Time interval between first contact and completion of community care assessment - All Clients, Critical Risk Eligibility Criteria Clients, Substantial Risk Eligibility Criteria Clients, Moderate Risk Eligibility	
		20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency - adults 18+	ISD Health and Social Care/IRF team.	Y	Annual	ISD		
5	Health and social care services contribute to	11	Premature mortality rate	NRS - European Age- Standardised mortality rate per 100,000 for people aged under 75 in Scotland.	Y	Annual	NRS	Antenatal Access - HEAT Standard	
	reducing health inequalities	12	Emergency admissions rate per 100,000 population aged 18+ (to Acute Hospitals, Geriatric Long Stay, and Acute Psychiatric Hospitals)	ISD - SMR01/SMR01- E/SMR04	Y	Annual	ISD		
6	People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing.	8	Percentage of carers who feel supported to continue in their caring role	Scottish Government Health and Care Experience Survey	Y	Biennial	SG		Percentage of carers who feel supported to continue in their caring role. Total respite in weeks for adults (aged 18- 64) Total respite in weeks for older people (aged 65+)
7	People who use health and	9	Percentage of adults supported at home who agree they felt safe Emergency admissions rate per 100,000 population aged 18+ (to Acute Hospitals, Geriatric	Scottish Government Health and Care Experience Survey	Y	Biennial	SG	% of Looked After Children Health Assessments (of those requested) completed on time Hospital-Acquired Infection: C Diff - HEAT Standard, Sabs - HEAT Standard Learning disability - Admissions, Discharges, Length of Stay Mental Health including Forensic - Admissions, Discharges, Length of	Number of people in long term care (65+) Number of residents under 65 in independent care homes
		12	Long Stay, and Acute Psychiatric Hospitals)	SMR01/SMR01- E/SMR04	Y	Annual	ISD	Stay Number of residents aged 65+ (internal	

			Emergency bed day rate						
			per 100,000 population						
			aged 18+ (to Acute						
			Hospitals, Geriatric Long	ISD -					
			Stay, and Acute Psychiatric	SMR01/SMR01-					
		13	Hospitals)	E/SMR04	Υ	Annual	ISD		
			Readmission to hospital						
		14	within 28 days	ISD - SMR01	Υ	Annual	ISD		
			Falls rate per 1,000						
		16	population aged 65+	ISD - SMR01	Υ	Annual	ISD		
			population agea so	100 01111101		7.1111.00.1	ISD/SG/L		
							ocally		
							TBC		
			Proportion of care services				(indicator		
			graded 'good' (4) or better				under		
				Coro			develop		
		47	in Care Inspectorate	Care	\ <u>\</u>	A			
		17	inspections	Inspectorate	Υ	Annual	ment)		
			Percentage of health and						
			care resource spent on						
			hospital stays where the	ISD Health and					
			patient was admitted in an	Social Care/IRF					
		20	emergency - adults 18+	team.	Υ	Annual	ISD		
									Average number of working days per
									employee lost through sickness
									absence for Adult Services
									Average number of working days per
									employee lost through sickness
									absence for Older People Services*
									Percentage of staff who say they would
									recommend their workplace as
									a good place to work.*
									Sickness Absence (measured on a 12
									month rolling basis) - HEAT Standard
									Total number of days lost through long
									term sickness absence as a
	People who work in health								percentage of total working days available
	and social care services are								for all SWS employees for
	supported to continuously								Adults*
	improve the information,		Percentage of staff who						Total number of days lost through long
	support, care and		say they would	NHS Staff					term sickness absence as a
	treatment they provide and		recommend their	Survey (No					percentage of total working days available
	feel engaged with the work		workplace as a good place	equivalent yet					for all SWS employees for
8	they do.	10	to work		Υ	Annual/TBC	SG		Older People*
	,		Percentage of adults	Scottish				All Inpatient Services - Bed Occupancy	Number of residents aged 65+ (internal
			supported at home who	Government				Rates	care homes)
	Resources are used		agree that their health and	Health and Care				Community hospital inpatient - Bed	Number of residents aged 65+
9	effectively in the provision		care services seemed to be	Experience				Occupancy Rates	(independent care homes)
9	of health and social care	4			v	Pionnial	sc		Net Residential Costs Per Capita per Week
	services, without waste.	4	well co-ordinated	Survey	Υ	Biennial	SG	Delayed Discharge (Number of patients	
			Readmission to hospital	165 614504	.,		100	waiting for more than 2 weeks	for Older Adults (65+)
		14	within 28 days	ISD - SMR01	Υ	Annual	ISD	for discharge to an appropriate setting).	Direct payments spend on adults 18+ as a

	15	Proportion of last 6 months of life spent at home or in a community setting	ISD Scotland. SMR01 (Acute hospitals), SMR01-E (Geriatric Long Stay beds), SMR04 (Acute psychiatric hospitals) and NRS death registrations	Y	Annual	ISD	HEAT Standard. Learning disability - Bed Occupancy Rates Mental Health including Forensic - Bed Occupancy Rates Net Residential Costs Per Capita per Week for Older Adults (65+) Palliative Care - Bed Occupancy Rates	% of total social work spend on adults 18+ Home care costs for people aged 65 or over per hour £
	16	Falls rate per 1,000 population aged 65+	ISD - SMR01	Υ	Annual	ISD		
	19?	Number of days people spend in hospital when they are ready to be discharged, per 1,000 population	ISD - EDISON	Y	Annual	ISD		
	20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency - adults 18+	ISD Health and Social Care/IRF team.	Y	Annual	ISD		
	22	Percentage of people who are discharged from hospital within 72 hours of being ready	Indicator under development	Y	Annual	ISD		
	23	Expenditure on end of life care	Indicator under development	Υ	Annual	ISD		

# **Appendix 2 - 2015/16 Performance against measures**

## a) National (Core Suite) Indicators based on survey data. Priority indicators for focus in 2016/17 are highlighted in yellow\_-

Health & Wellbeing Outcome No(s)	Core Suite Indicator	Latest Available Period	Previous Available Period	Borders target (as per Strategic Plan)	Latest Indicator Borders	Latest Indicator Scotland	Absolute change from Previous	Trend
1	Percentage of adults able to look after their health very well or quite well.	2015/16	2013/14	At least 96%	95%	93%	-1%	Ψ
2	Percentage of adults supported at home who agree that they are supported to live as independently as possible.	2015/16	2013/14	85%	85%	84%	2%	<b>1</b>
2, 3	Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided.	2015/16	2013/14	85%	85%	83%	5%	<b>1</b>
3, 9	Percentage of adults supported at home who agree that their health and care services seemed to be well co-ordinated.	2015/16	2013/14	85%	75%	75%	-4%	Ψ
3	Percentage of adults receiving any care or support who rate it as excellent or good	2015/16	2013/14	85%	84%	81%	1%	<b>1</b>
3	Percentage of people with positive experience of the care provided by their GP practice.	2015/16	2013/14	90%	90%	87%	0%	<b>1</b>
4	Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life.	2015/16	2013/14	86%	87%	84%	4%	<b>^</b>
6	Percentage of carers who feel supported to continue in their caring role.	2015/16	2013/14	50% by 2018/19, rising thereafter	41%	41%	0%	<b>1</b>
7	Percentage of adults supported at home who agree they felt safe.	2015/16	2013/14	86%	90%	84%	9%	<b>1</b>
8	Percentage of staff who say they would recommend their workplace as a good place to work.	2015	2015	At least 61%, rising to 70%	57% (NHS Borders only)	59% (NHS Borders only)	1%	1

# b) National (Core Suite) Indicators based on organisational/system data. Priority indicators for focus in 2016/17 are highlighted in yellow, table c outlines the most up to date data against these measures.

Health & Wellbeing Outcome No(s)	Core Suite Indicator	Latest Available Period	Previous Available Period	Borders target (as per Strategic Plan)	Latest Indicator Borders	Latest Indicator Scotland	Absolute change from Previous	Trend
1, 5	Premature mortality rate (per 100,000 population)	2014	2013	Maintain downward trend. No specific target set.	321.7	423.2	-1.2	Ψ
1, 2, 4, 5, 7	Emergency admissions rate per 100,000 population aged 18+ (to Acute Hospitals, Geriatric Long Stay, and Acute Psychiatric Hospitals)	2013/14	2012/13	General target to reduce overall rate by 10%.  Baseline year to be formally agreed by IJB. 10% reduction on 2013/14 figure would be to a rate of 12,930 per 100,000, still considerably higher than Scottish average	14,368	7,780	826.2	<b>^</b>
2, 4, 7	Emergency bed day rate per 100,000 population aged 18+ (to Acute Hospitals, Geriatric Long Stay, and Acute Psychiatric Hospitals)	2013/14	2012/13	Reduce this rate over time. Exact target not set; baseline year to be set by IJB.	127,536	97,266	33,611	<b>^</b>
2, 3, 7, 9	Readmission to hospital within 28 days – Borders residents (treated within and outwith Borders)			General target to reduce overall rate by 10% (based on known figures for BGH as hospital of treatment).  Baseline year to be formally agreed by IJB.	Official figure for all Borders residents TBC	Official figure for all Borders residents TBC		
2, 3, 9	Proportion of last 6 months of life spent at home or in a community setting	2013/14	2012/13	91.6%. NB This target was based on a related indicator (Quality Outcome Measure 10) produced to a different definition - using data for acute hospitals only (SMR01).	85.5%	86.6%	0.3	<b>↑</b>

Note: Premature mortality rate for 2015 expected to be published by NRS by end August 2016. For the other indicators we expect to receive official figures for 2014/15 within the next 3 months, date TBC by Scottish Government/ISD.

Health & Wellbeing Outcome No(s)	Core Suite Indicator	Latest Available Period	Previous Available Period	Borders target (as per Strategic Plan)	Latest Indicator Borders	Latest Indicator Scotland	Absolute change from Previous	Trend
2, 4, 7, 9	Falls rate per 1,000 population aged 65+	2014/15	2013/14	General target to reduce overall rate by 10%. Baseline year to be formally agreed by IJB. 10% reduction on 2013/14 figure would be to a rate of 19.1 per 1,000.	21.0	20.5	-0.2	Ψ
3, 4, 7	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	2014/15		No target yet. Indicator under development and these figures are provisional.	73.9% (pending final indicator definition)	81.2% (pending final indicator definition)		
2	Percentage of adults with intensive care needs receiving care at home	2013/14	2012/13	Increasing from 65%. NB This measure does not reflect clients on Self Directed Support, which reduces apparent % for this indicator.	64.6%	59.9%	-6.3%	•
2, 3, 4, 9	Number of days people (aged 75+) spend in hospital when they are ready to be discharged, per 1,000 population	2014/15	2013/14	Target not set for this specific indicator. Associated target to reduce delayed discharge bed days for patients aged 75+ to 73% of total DD bed days, down from 84%.	627.8	1044	23.8	•
2, 4, 7, 9	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency - adults 18+	2013/14	2012/13	Reduce this proportion over time. Exact target not set; baseline year to be set by IJB.	21.0%	22.8%	3.7%	<b>↑</b>

Note: For the indicators listed above as latest available year 2013/14 we expect to receive official figures for 2014/15 within the next 3 months, date TBC by Scottish Government/ISD.

Health & Wellbeing Outcome No(s)	Core Suite Indicator	Latest Available Period	Previous Available Period	Borders target (as per Strategic Plan)	Latest Indicator Borders	Latest Indicator Scotland	Absolute change from Previous	Trend
2	Percentage of people admitted to hospital from home during the year, who are discharged to a care home			No target yet. National indicator under development.	Indicator under development			
2, 3, 9	Percentage of people who are discharged from hospital within 72 hours of being ready			No target yet. National indicator under development.	Indicator under development			
2, 3, 9	Expenditure on end of life care			No target yet. National indicator under development.	Indicator under development			

Note: Work to develop the 72-hour delayed discharge measure is in progress locally. Publication of nationally consistent measure TBC.

## c) Latest available data - Priority indicators for focus in 2016/17

Health & Wellbeing Outcome No(s)	Core Suite Indicator	Target	Trajectory	Apr 2016	May 2016	Jun2016	Performance Direction
8	Percentage of staff who say they would recommend their workplace as a good place to work. <sup>1</sup>	ТВС	ТВС	N/A	N/A	N/A	-
1, 2, 4, 5, 7	Emergency admissions rate per 100,000 population aged 18+ (to Acute Hospitals, Geriatric Long Stay, and Acute Psychiatric Hospitals) <sup>2</sup>	TBC	TBC	943.6 (Feb16)	910.3 (Mar16)	807.7 (Apr16)	<b>†</b>
2, 3, 7, 9	Readmission to hospital within 28 days – Borders residents (treated within and outwith Borders) <sup>3</sup>	TBC	ТВС	211 (Feb 16)	226 (Mar 16)	125 (Apr 16)	<b>†</b>
2, 4, 7, 9	Falls rate per 1,000 population aged 65+4	ТВС	ТВС	0.75 (Feb16)	0.75 (Mar16)	0.64 (Apr16)	<b>†</b>
2, 3, 4, 9	Number of days people (aged 75+) spend in hospital when they are ready to be discharged, per 1,000 population <sup>5</sup>	ТВС	ТВС	6.71	6.40	6.98	1
2, 3, 9	Percentage of people who are discharged from hospital within 72 hours of being ready <sup>6</sup>	ТВС	ТВС	N/A	N/A	N/A	-

- <sup>1</sup> Not available monthly as the Staff Survey is an annual publication
- <sup>2</sup> Data has a lag time as the source is SMR01, 01E and 04 national returns
- <sup>3</sup> Data has a lag time as the source is Discovery using SMR01 national returns
- <sup>4</sup> Indicator is measured as the number of patients who have been admitted with an ICD10 diagnosis of fall in any position. Data has a lag time as the source is SMR01 national returns.
- <sup>5</sup> Data includes both regular and complex case delayed days
- <sup>6</sup> Data not currently collected

#### d) Other Level 2 (and some level 3) Indicators already monitored locally

Health & Wellbeing Outcome No(s)	Current Collection	Previous Collection	Standard Descriptor	Current Standard	Current Performance	Performance Last Month	Performance Compared to Last Month	Status
1	May-16	Apr-16	Diagnosis of dementia	1116	1029	1030	Ψ	
1, 4	Apr-16	Mar-16	Treatment within 62 days for Urgent Referrals of Suspicion of Cancer	95%	95.80%	100%	Ψ	
1, 4	Apr-16	Mar-16	Treatment within 31 days of decision to treat for all Patients diagnosed with Cancer	95%	100%	100%		
1	Dec-15	Sep-15	Smoking cessation 12 week successful quits in most deprived areas (cumulative)	72	96	67	<b>^</b>	
2	Jun-16	May-16	% of Adults 65+ receiving care at home to sustain an independent quality of life as part of the community compared to those in a care home.	70%	72.8%	71.7%	<b>^</b>	•
2	Q1 2016/17	Q4 2014/15	Number of people able to maintain themselves at home through the receipt of Telecare services (with support)	600	577	581	Ψ	_
3	Jun-16	May-16	% of adults feeling safe	90%	61%	72%	<b>1</b>	

3	May-16	Apr-16	4-Hour Waiting Target for A&E	95%	92.8%	94.6%	Ψ	
3	May-16	Apr-16	Alcohol/Drug Referrals into Treatment within 3 weeks	95%	88%	100%	Ψ	
3	Jun-16	May-16	Adults with self-directed care arrangements per 1,000 population	7	10.1	8.8	<b>^</b>	

Status key:

Improved performance / On target



Minor change in performance / Just off target



Area for improvement / Off target

Health & Wellbeing Outcome No(s)	Current Collection	Previous Collection	Standard Descriptor	Current Standard	Current Performance	Performance Last Month	Performance Compared to Last Month	Status
4	May-16	Apr-16	18 Wk RTT: 12 wks for outpatients	0	359	316	Ψ	
4	May-16	Apr-16	18 Wk RTT: 12 wks for inpatients	0	1	4	<b>^</b>	
4	May-16	Apr-16	Alcohol Brief Interventions	220	188	73	<b>^</b>	
4	May-16	Apr-16	CAMHS % of patients seen within 18 weeks	95%	87.5%	79.3%	<b>^</b>	
4	May-16	Apr-16	6 Week Waiting Target for Diagnostics	0	84	54	Ψ	•
4	May-16	Apr-16	Psychological Therapy % of patients seen within 18 weeks	95%	83%	89%	Ψ	•
4	Q1 2016/17	Q4 2015/16	Proportion of new service users who receive a service within 6 weeks of assessment (year to date)	95%	98%	95%	<b>^</b>	
7	Jun-16	May-16	Number of residents aged 65+ (internal care homes, independent care homes)	-	656	658	Ψ	
8	May-16	Apr-16	Sickness Absence Reduced (NHS Borders)	4%	5%	5%	-	
8	Apr-16	Mar-16	Percentage of Working Days Lost per Department - People	4%	3.5%	3.5%	-	•
9	May-16	Apr-16	No Delayed Discharges over 72 hours (3 days)	-	8	6	Ψ	-
9	May-16	Apr-16	No Delayed Discharges over 2 wks	0%	4	3	4	
9	Q1 2016/17	-	Number of Single Shared Assessments undertaken across the Community Health and Care Partnership (Year to date)	200	206	-	-	-