

**REPORT TO THE HEALTH AND WELLBEING BOARD  
2 December 2014**

**HEALTH AND WELLBEING BOARD PERFORMANCE DASHBOARD AND QUARTER 2  
POSITION 2014/15**

**1. PURPOSE OF REPORT**

- 1.1 The purpose of this report is to provide Board Members with an update on the development of a performance dashboard for the Health and Wellbeing Board, and to report the current position at the end of quarter 2 (2014/15) on the agreed Health and Wellbeing Strategy and Better Care Fund suite of metrics. The Better Care Fund goes live in April 2015.

**2. RECOMMENDATIONS**

**It is recommended that:-**

- 2.1 Members note the report and progress being made in the development of a performance dashboard for the Health and Wellbeing Board;**
- 2.2 Members receive the quarter 2 exception report on the progress being made across the agreed suite of metrics in the Health and Wellbeing Strategy and Better Care Fund.**
- 2.3 Members agree to receive, as a minimum, 6 monthly exception reports on performance against the delivery of the Health and Wellbeing Strategy and Better Care Fund, with detailed project/scheme reports (deep dives) throughout the course of the year.**

**3. INTRODUCTION/BACKGROUND**

- 3.1 The Health and Wellbeing Board (H&WB) agreed a suite of performance metrics in its revised Health and Wellbeing Strategy 2014/19 (H&WBS) as a means to assess progress against the delivery of priorities and outcomes shared across the health and care system. This represents a suite of 16 indicators (contained in appendix one).
- 3.2 In September 2014, the H&WB agreed its Better Care Fund submission which contained a mandated suite of 6 metrics, due to be reported nationally, with a particular focus around reducing emergency admissions to the Hospital.
- 3.3 It is important that the H&WB receives regular exception reports on the performance against these metrics and the supporting narrative to understand what progress is being made; any areas of risk/ underperformance; what assurances are in place that issues identified are being addressed with appropriate corrective/ mitigating action; and what further action may be required.
- 3.4 To ensure appropriate systems are in place to facilitate this, the drive for continuous improvement and ensure the H&WB is able to discharge its responsibilities around systems leadership, a performance dashboard has been developed.

3.5 The performance dashboard will enable H&WB members to assess, at a glance, progress being made and on exception basis, whilst also requesting and receiving detailed reports on any areas of risk/ underperformance. This will enable the H&WB to be assured that all necessary action is being taken to address any issue/ risk throughout the course of the year. To supplement this and to aid further understanding, detailed project/ scheme specific reports 'deep dives' will be brought forward during the year on all transformation schemes identified as those with the greatest potential for systems impact.

#### 4. PERFORMANCE DASHBOARD AND QUARTER 2 POSITION 2014/15

4.1 Attached at appendix one is the Performance Dashboard for the H&WB, this contains 22 metrics. The dashboard reports the latest position (quarter 2 - 2014/15) across the suite of measures. It is however important to note that, a significant proportion of the metrics have data lags and are in the main, reported at an annual frequency from either the NHS Outcomes Framework (NHSOF), Adult Social Care Outcomes Framework (ASCOF) or Public Health Outcomes Framework (PHOF). This presents difficulty in reporting data on a quarterly or six monthly frequency. To counteract this, it is important that local proxies/ supporting volumetric measures and/or other forms of intelligence are developed and shared to enable an assessment to be made in year against the progress being made and the delivery of the best possible health and wellbeing outcomes for local people and communities in Barnsley. The column headed 'exception commentary' is particularly important in this context, providing detail behind the performance data to paint the picture locally.

4.2 Furthermore, the principles of exception reporting in terms of escalation and risk mean that where areas of underperformance are identified at H&WB level, the Board may request a 'deep dive' into a specific project/scheme to gain assurance that all the necessary action is being taken across the entire system and to understand the story behind the performance data. This is particularly important in the context of the Better Care Fund and the challenging aspirations which have been set against current trends and demand. Risks need to be quantified and understood, and the implications, as far as possible, need to be mitigated across the system.

4.3 The intention is that this will be supplemented with an annual year end report which takes stock of progress made over the year, brings in annually released data and dovetails with the development of strategic intelligence such as the Joint Strategic Needs Assessment, to inform future strategic planning at the H&WB and the cascade into individual agency planning.

4.4 At the end of quarter two 2014/15 the performance position was as follows:-

- **7 - metrics were on Green,**
- **0 - metrics were on Amber,**
- **6 - metrics were on Red,**
- **9 - metrics had no data available other than baselines; therefore no assessment against performance could be made.**

Of the metrics on **Red**, the following exception commentary is provided:-

- **Smoking status at time of delivery**  
Additional resources have been put in place to increase the number of pregnant women to help them stop smoking. Figures indicate that the additional resource is now having an impact on the number of successful quitters.
- **Alcohol attributable hospital admissions – males and females**  
Significant lag on data. Systems and processes are being put in place to capture and report against admissions and ensure appropriate intervention is put in place. A project group is being initiated under the DAAT to bring stakeholders together and oversee the process. Latest data in 12/13 does not reflect the changes/ current position locally.
- **Total non-elective admissions in to hospital (general & acute) all-age - Better Care Fund metric**  
Total Emergency Admissions has increased in 2014/15 to date against a planned backdrop of reducing these linked to the BCF. Actions agreed by the CCG and linked to the BCF are designed to reduce emergency admissions.
- **Delayed transfers of care (delayed days) from hospital (aged 18+) - Better Care Fund metric**  
An increase in DTOC has been seen across South Yorkshire. The target is the annual monthly average and as the baseline demonstrates the rate has been higher in the first 2 quarters. DTOC are reviewed regularly as part of operational planning.
- **Proportion of people who feel they are supported to manage their long term conditions – Better Care Fund metric**  
The CCG have an outcome ambition to increase the proportion of people supported to manage their long term conditions for 2014/15 and initiatives within the CCG are aimed at improving the rate; particularly in relation to primary care development. The target was set based on only 2012/13 data and will therefore be reviewed as part of the 2014/15 planning round based on the latest available data.

## 5. NEXT STEPS/ CONCLUSION

- 5.1 The performance dashboard will be an extremely useful means for the H&WB to assess and manage performance and the delivery of the Health and Wellbeing Strategy and BCF. Regular exception reports will be brought to the H&WB, supplemented by project/scheme deep dives around agreed transformational themes, evidenced in the Better Care Fund and broader system transformation. This will ensure the H&WB is able to execute its systems leadership and oversight role as it moves to ensure a safe and sustainable health and care system in the future.

### Appendix

Appendix 1 – H&WB Performance Dashboard Qrt 2 position 2014/15

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