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**Item No. 7**

**Meeting Date: Wednesday 25<sup>th</sup> October 2023**

**Glasgow City  
Integration Joint Board  
Finance, Audit and Scrutiny Committee**

**Report By: Allison Eccles, Head of Business Development**

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**HSCP Performance Report Q1 2023/24 – Primary Care**

<b>Purpose of Report:</b>	To present the Joint Performance Report for the Health and Social Care Partnership for Quarter 1 of 2023/24 for Primary Care only, with the Finance Audit and Scrutiny Committee asked to review and discuss performance with the Strategic Lead for Primary Care.
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<b>Background/Engagement:</b>	The IJB Finance, Audit and Scrutiny Committee have previously agreed that a Performance Report would be produced and presented to them at each meeting, with specific service areas focused upon and relevant Service Leads in attendance. The Primary Care figures presented in this report originally featured in the wider <a href="#">Quarterly Performance Report</a> presented to the Committee on 13 <sup>th</sup> September 2023. There have been no updates in the data since, so the data from the September report for Primary Care has been replicated here. All other data has been removed to avoid duplication and to allow the Committee to focus on Primary Care.
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<b>Governance Route:</b>	<p>The matters contained within this paper have been previously considered by the following group(s) as part of its development.</p> <p>HSCP Senior Management Team <input checked="" type="checkbox"/></p> <p>Council Corporate Management Team <input type="checkbox"/></p> <p>Health Board Corporate Management Team <input type="checkbox"/></p> <p>Council Committee <input type="checkbox"/></p> <p>Update requested by IJB <input type="checkbox"/></p>
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	Other <input type="checkbox"/> Not Applicable <input type="checkbox"/>
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<b>Recommendations:</b>	The IJB Finance, Audit and Scrutiny Committee is asked to: a) note the attached performance report; and b) review and discuss performance with the Strategic Lead for Primary Care.
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<b>Relevance to Integration Joint Board Strategic Plan:</b>
The report contributes to the ongoing requirement for the Integration Joint Board to provide scrutiny over HSCP operational performance, as outlined within the Strategic Plan.

**Implications for Health and Social Care Partnership:**

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	HSCP performance activity is mapped against the 9 national health and wellbeing outcomes, ensuring that performance management activity within the Partnership is outcomes focused.
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<b>Personnel:</b>	None.
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<b>Carers:</b>	None.
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<b>Provider Organisations:</b>	None.
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<b>Equalities:</b>	No EQIA has been carried out as this report does not represent a new policy, plan, service or strategy.
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<b>Fairer Scotland Compliance:</b>	N/A
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<b>Financial:</b>	None.
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<b>Legal:</b>	None.
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<b>Economic Impact:</b>	None.
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<b>Sustainability:</b>	None.
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<b>Sustainable Procurement and Article 19:</b>	None.
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<b>Risk Implications:</b>	None.
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<b>Implications for Glasgow City Council:</b>	The Integration Joint Board's performance framework includes social work performance indicators.
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<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	The Integration Joint Board's performance framework includes health performance indicators.
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### 1. Purpose

- 1.1 To present the Joint Performance Report for the Health and Social Care Partnership for Quarter 1 of 2023/24, for Primary Care only. The Finance Audit and Scrutiny Committee is being asked to review and discuss performance with the Strategic Lead for Primary Care.

### 2. Background

- 2.1 These reports are one component of the internal scrutiny arrangements which have been put in place across the Health and Social Care Partnership. Other processes have been established to oversee and scrutinise financial and budgetary performance, clinical and care governance, and the data quality improvement regime.

### 3. Reporting Format

- 3.1 Within the attached report, performance has been classified as GREEN when it is within 2.5% of the target; AMBER between 2.5% and 5% of the target; and RED when performance is 5% or more from the target.
- 3.2 Within the report, for all indicators, their purpose is described, along with an indication of which National Integration Outcome and HSCP Strategic Priority they most closely impact upon. Also indicated is whether they have been defined at a local, corporate, or national level as outlined below.
- i. Local Health and Social Work Indicators (chosen locally by the Partnership).
  - ii. NHS Local Development Plan Indicators (specified nationally by the Scottish Government and measured as part of NHS Board accountability processes)
  - iii. National Integration Indicators (specified nationally by the Scottish Government to provide a basis against which Health and Social Care Partnerships can measure their progress in relation to the National Health and Wellbeing outcomes).
  - iv. Ministerial Strategic Group for Health and Community Care (MSG) Indicators (specified nationally to monitor progress in relation to the integration agenda)
  - v. Scottish Public Services Ombudsman (SPSO) Statutory Indicators. It is a requirement that public bodies record and report on complaints, FOIs and Subject Access Requests made at a local level.

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### 4. Summary

- 4.1 The attached report provides details of performance for all indicators at city and locality levels, including trends over time where available. Narrative is provided for those indicators which are marked as RED or AMBER, which describes the actions being taken to improve performance and the timescales for improvement.
- 4.2 The report includes the Primary Care KPIs reported upon quarterly within the regular [Quarterly Performance Reports](#), as well as one additional indicator which is updated annually and is included in the Appendix of these Quarterly Reports, along with other less frequently updated indicators.

### 5. Recommendations

- 5.1 The IJB Finance, Audit and Scrutiny Committee is asked to:
  - a) note the attached performance report; and
  - b) review and discuss performance with the Strategic Lead for Primary Care.

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# **CORPORATE PERFORMANCE REPORT**

**QUARTER 1  
2023/24**

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## 1. QUARTERLY INDICATORS

<b>Indicator</b>	1. Prescribing Costs: Compliance with Formulary Preferred List
<b>Purpose</b>	To monitor compliance with the Preferred Prescribing List. This list has been produced by Pharmacy Support teams and consists of recommendations for first and second choice medications for prescribing with the aim of improving prescribing efficiency.
<b>Type of Indicator</b>	Local HSCP indicator
<b>Health &amp; Wellbeing Outcome</b>	Outcome 9 (See Appendix 2)
<b>Strategic Priority</b>	Priority 1 (See Appendix 1)
<b>HSCP Leads</b>	Gary Dover, Assistant Chief Officer (Primary Care and Early Intervention)

Locality	Target	20/21	21/22				22/23			
		Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
<b>City</b>	78%	76.83 (G)	76.72 (G)	74.68 (A)	75.98 (A)	75.96 (A)	76.17 (G)	76.54 (G)	76.89 (G)	76.41 (G)
NE		77.63 (G)	77.51 (G)	75.57 (A)	76.94 (G)	76.67 (G)	77.01 (G)	77.24 (G)	77.48 (G)	77.02 (G)
NW		76.04 (A)	75.90 (A)	73.94 (R)	75.42 (A)	75.33 (A)	75.45 (A)	75.85 (A)	76.37 (G)	75.87 (A)
S		76.79 (G)	76.70 (G)	74.50 (A)	76.04 (A)	75.86 (A)	75.92 (A)	76.50 (G)	76.79 (G)	76.32 (G)
<b>NHSGGC</b>		76.84	76.73	74.71	76.17	75.96	76.87	76.54	76.85	76.45

### Performance Trend

During Q4, there was a slight decrease in performance across all parts of the city with performance in the North West moving from GREEN to AMBER, while the other localities and the city wide figure remained GREEN.

This indicator is reported one quarter in arrears.

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<b>Indicator</b>	2. Prescribing Costs: Annualised cost per weighted list size
<b>Purpose</b>	To monitor prescribing costs. This divides the total prescribing costs by the weighted list size across practices. This indicator does not provide information on the external factors that affect prescribing costs such as new drugs, guidelines or national drug shortages.
<b>Type of Indicator</b>	Local HSCP indicator
<b>Health &amp; Wellbeing Outcome</b>	Outcome 9 (See Appendix 2)
<b>Strategic Priority</b>	Priority 1 (See Appendix 1)
<b>HSCP Leads</b>	Gary Dover, Assistant Chief Officer (Primary Care and Early Intervention)

Locality	Target	20/21	21/22				22/23			
		Mar	Jun	Sep	Dec	Mar	Jun	Sep	Dec	Mar
<b>City</b>	Cost below (or same) as Board average	£147.6 (G)	£150.2 (G)	£151.2 (G)	£152.3 (G)	£154.2 (G)	£156.8 (G)	£159.7 (G)	£155.3 (G)	£160.2 (G)
NE		£144.5 (G)	£147.0 (G)	£147.9 (G)	£149.5 (G)	£151.1 (G)	£158.3 (G)	£163.1 (G)	£162.1 (G)	£169.3 (G)
NW		£145.6 (G)	£148.1 (G)	£149.4 (G)	£149.5 (G)	£150.9 (G)	£149.9 (G)	£150.5 (G)	£154.2 (G)	£157.8 (G)
S		£152.8 (G)	£155.7 (G)	£156.5 (G)	£158.1 (G)	£160.7 (G)	£161.4 (G)	£165.0 (G)	£169.1 (G)	£174.1 (G)
<b>NHSGGC</b>		£164.9	£167.9	£169.4	£170.7	£173.0	£174.7	£178.0	£181.7	£187.7

<b>Performance Trend</b>
<p>Costs in all localities increased between December and March but all localities and the city remain GREEN, considerably below the Health Board average.</p> <p>This indicator is reported one quarter in arrears.</p> <p><a href="#">Back to Summary</a></p>

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**2. ANNUAL INDICATOR**

<b>Indicator</b>	<b>Type/ Outcome</b>	<b>Target</b>	<b>Date</b>	<b>Locality</b>	<b>%</b>
1. Antibiotic Prescribing: Total Antibiotic Use - Items per 1,000 list size per day	Local HSCP Indicator  Outcome 9	50%	Jan- Mar 23	<b>NE</b>	<b>78.1%</b> <b>(G)</b>
				<b>NW</b>	<b>78.4%</b> <b>(G)</b>
				<b>S</b>	<b>60.9%</b> <b>(G)</b>
				<b>City</b>	N/A
<b>Comments</b>					
Target is at least 50% of practices to attain <1.65 items per 1000 patients per day or a reduction of >0.13 items per 1000 patients in the last year. Target is based on Scottish lower quartile and measured Jan-March annually. Equivalent figures in 2022 were 100% (NE); 96.08% (NW); 98% (S).					

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**APPENDIX 1**

**HEALTH & SOCIAL CARE PARTNERSHIP CORPORATE PRIORITIES**

<b>Priority 1</b>	Prevention, early intervention, and harm reduction
<b>Priority 2</b>	Providing greater self-determination and choice
<b>Priority 3</b>	Shifting the balance of care
<b>Priority 4</b>	Enabling independent living for longer
<b>Priority 5</b>	Public Protection

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**APPENDIX 2**

<b>Outcome 1</b>	People are able to look after and improve their own health and wellbeing and live in good health for longer
<b>Outcome 2</b>	People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community
<b>Outcome 3</b>	People who use health and social care services have positive experiences of those services, and have their dignity respected
<b>Outcome 4</b>	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services
<b>Outcome 5</b>	Health and social care services contribute to reducing health inequalities
<b>Outcome 6</b>	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being
<b>Outcome 7</b>	People using health and social care services are safe from harm
<b>Outcome 8</b>	People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide
<b>Outcome 9</b>	Resources are used effectively and efficiently in the provision of health and social care services