

Item No. 7

Meeting Date: Wednesday 25th October 2023

To present the Joint Performance Report for the Health and Social Care Partnership for Quarter 1 of 2023/24 for

Glasgow City Integration Joint Board Finance, Audit and Scrutiny Committee

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Purpose of Report:

HSCP Performance Report Q1 2023/24 – Primary Care

	Primary Care only, with the Finance Audit and Scrutiny Committee asked to review and discuss performance with the Strategic Lead for Primary Care.
Background/Engagement:	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 Quarterly Performance Report presented to the Committee on 13 th 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.

Governance Route:	The matters contained within this paper have been previously considered by the following group(s) as part of its development.
	HSCP Senior Management Team ⊠ Council Corporate Management Team □
	Health Board Corporate Management Team □
	Council Committee
	Update requested by IJB □

	Other
	Not Applicable □
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Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked
Necommentations.	to:
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	a) note the attached performance report; and
	b) review and discuss performance with the Strategic
	Lead for Primary Care.
Relevance to Integration Joint B	loard Strategic Plan:
· · · · · · · · · · · · · · · · · · ·	ing requirement for the Integration Joint Board to provide
scrutiny over HSCP operational pe	erformance, as outlined within the Strategic Plan.
Implications for Health and Soci	al Care Partnership:
Reference to National Health &	HSCP performance activity is mapped against the 9
Wellbeing Outcome:	national health and wellbeing outcomes, ensuring that
3	performance management activity within the Partnership
	is outcomes focused.
	To outcomes reduced.
Personnel:	None.
i ersonner.	None.
Carara	None.
Carers:	None.
Dravidar Organizations	Nana
Provider Organisations:	None.
E P.C	N. FOIA Land and the first discount description
Equalities:	No EQIA has been carried out as this report does not
	represent a new policy, plan, service or strategy.
	Terri
Fairer Scotland Compliance:	N/A
	T
Financial:	None.
Legal:	None.
Economic Impact:	None.
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Custoinabilitus	Nana
Sustainability:	None.
	T
Sustainable Procurement and	None.
Article 19:	
Risk Implications:	None.
Implications for Glasgow City	The Integration Joint Board's performance framework
Council:	includes social work performance indicators.
	, the state of the

Implications for NHS Greater	The Integration Joint Board's performance
Glasgow & Clyde:	e framework includes health performance indicators.

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.

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.



CORPORATE PERFORMANCE REPORT

QUARTER 1 2023/24

1. QUARTERLY INDICATORS

Indicator	Prescribing Costs: Compliance with Formulary Preferred List
Purpose	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.
Type of Indicator	Local HSCP indicator
Health & Wellbeing	Outcome 9 (See Appendix 2)
Outcome	
Strategic	Priority 1 (See Appendix 1)
Priority	
HSCP Leads	Gary Dover, Assistant Chief Officer (Primary Care and Early Intervention)

Lassitu	20/21			21/22				22/23			
Locality	Target	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
City		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	78%	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)	
NHSGGC		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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Indicator	2. Prescribing Costs: Annualised cost per weighted list size
Purpose	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.
Type of Indicator	Local HSCP indicator
Health & Wellbeing Outcome	Outcome 9 (See Appendix 2)
Strategic Priority	Priority 1 (See Appendix 1)
HSCP Leads	Gary Dover, Assistant Chief Officer (Primary Care and Early Intervention)

l applitu	20/21			21/22				22/23			
Locality	Target	Mar	Jun	Sep	Dec	Mar	Jun	Sep	Dec	Mar	
City	0	£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	Cost	£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	(or same)	£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	as Board average	£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)	
NHSGGC	average	£164.9	£167.9	£169.4	£170.7	£173.0	£174.7	£178.0	£181.7	£187.7	

Performance Trend

Costs in all localities increased between December and March but all localities and the city remain GREEN, considerably below the Health Board average.

This indicator is reported one quarter in arrears.

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2. ANNUAL INDICATOR

Indicator	Type/ Outcome	Target	Date	Locality	%
Antibiotic Prescribing: Total Antibiotic Use -	Local HSCP Indicator	50%	Jan- Mar	NE	78.1% (G)
Items per 1,000 list size per day	Outcome 9		23	NW	78.4% (G)
				S	60.9% (G)
				City	N/A

Comments

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).

APPENDIX 1

HEALTH & SOCIAL CARE PARTNERSHIP CORPORATE PRIORITIES

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

APPENDIX 2

Outcome 1	People are able to look after and improve their own health and wellbeing and live in good health for longer
Outcome 2	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
Outcome 3	People who use health and social care services have positive experiences of those services, and have their dignity respected
Outcome 4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services
Outcome 5	Health and social care services contribute to reducing health inequalities
Outcome 6	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
Outcome 7	People using health and social care services are safe from harm
Outcome 8	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
Outcome 9	Resources are used effectively and efficiently in the provision of health and social care services