

**Report To:** Community Health & Care  
Partnership Sub Committee

**Date:** 28<sup>th</sup> February 2013

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Care Partnership

**Report No:**  
CHCP/15/2013/HW

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Planning, Health Improvement &  
Commissioning

**Contact No:** 01475 715369

**Subject:** Performance Reporting Proposed Process

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## 1.0 PURPOSE

- 1.1 To present the Sub-Committee with a proposed process for developing routine performance reports that are relevant and clear, and that support the Sub Committee's scrutiny role in respect of Inverclyde CHCP.

## 2.0 SUMMARY

- 2.1 The CHCP Management Team currently undergoes six-monthly joint Organisational Performance Reviews (OPRs) which are reported regularly to Sub-Committee. At OPR, officers are required to provide an account of performance against key targets including HEAT, SOA and our Directorate Plan.
- 2.2 Most of the targets that are examined through the OPR process are high level ones that are shaped through national policy, and are often put in place as a proxy to give an indication of our overall functioning. On that basis they do not always directly reflect the pressing issues or priorities of our communities.
- 2.3 This report therefore outlines a proposed process to develop a regular report that is more reflective of local issues. We aim to develop such a report using existing data, presented in a more accessible and meaningful format that will bring a clearer understanding of how people experience health and social care in Inverclyde and also support Sub-Committee members in their scrutiny function.
- 2.4 It is envisaged that the report will contain existing performance information which will be extracted from a range of health and social work systems and sources. The information used will primarily be quantitative data describing headline activity and performance, however it will also report on key projects within the CHCP and will outline actions we will take to improve or maintain performance. The report will be produced for the Sub-Committee on a quarterly basis and will also feed into the twice yearly May and October Organisational Performance Review (OPR) to the Health Board and Council.

Work has recently commenced within the CHCP Planning and Performance Team, with regards to scoping this task in order to develop the structure and content of the report. We hope to be in a position to present an initial draft of the report to the Sub-Committee for comment and feedback in due course.

It is anticipated that future investment of staff resource time be made in exploring the possibilities of developing Scorecards on the Corporate Performance System 'Inverclyde Performs' which may in the long term assist in this type of reporting. A diagram showing the planned processes used to gather the data is attached.

### **3.0 RECOMMENDATION**

- 3.1 Members are asked to comment as appropriate on the proposed process, and approve it subject to any comments that require the process to be amended.

**Brian Moore  
Corporate Director  
Inverclyde Community Health & Care  
Partnership**

## **4.0 BACKGROUND**

- 4.1 The CHCP Management Team currently undergoes six-monthly Organisational Performance Reviews (OPRs) which are reported regularly to Sub-Committee. At OPR, officers are required to provide an account of performance against key targets including HEAT, SOA and our Directorate Plan.
- 4.2 Most of the targets that are examined through the OPR process are high level ones that are shaped through national policy, and are often put in place as a proxy to give an indication of our overall functioning. On that basis they do not always directly reflect the pressing issues or priorities of our communities.
- 4.3 There are a number of sources of information and communications that can help us to define some of the salient issues for communities, for example Councillor Enquiries; Freedom of Information Requests; complaints; our Directorate Plan; our Annual Report, and the CHCP Quarterly Service Reviews.
- 4.4 By considering some of these factors, we will aim to develop a regular report that is more reflective of local issues. It is also recognised that the report will need to be balanced and coherent, using existing data, presented in a more accessible and meaningful format that will bring a clearer understanding of how people experience health and social care in Inverclyde, and explicitly highlight what aspects work well and where improvements need to be made. By using established data sets whenever possible, there should also be scope for us to benchmark our performance across other areas whilst recognising that as a CHCP it would not make sense to disaggregate local information into NHS or Social Work components where we have brought our data together under a single reporting system.
- 4.5 Whilst initially we will be using quantitative data sources, it is recognised that we might have to develop some qualitative measures for the future to reflect our need to evidence improved outcomes. However this would be in line with the strategic direction of the CHCP in moving towards outcomes-focused planning, commissioning and delivery across our services. On that basis we would expect that the report itself will be presented in a consistent format, but that the content will evolve over time to remain reflective of local issues. There may be scope to have particular themed reports focusing on service strands, however these would have to crucially recognise some cross-cutting activity that is vital to high-quality service delivery but not readily disaggregated to specific client groups (for example, carers support; waiting times for generic services etc.).
- 4.6 A new formal reporting structure/process has been set up with the introduction of Quarterly Performance Service Reviews (QPSR) for each Head of Service and covers their areas of responsibility. The purpose of the QPSR is to present key performance information and statistics for analysis to identify strengths and weaknesses in performance which allows for discussion on how performance is being managed and how it can be improved. A critical aspect of the QPSR process is also to update/review the progress of key actions and outcomes for each of service areas on their strategic priorities. The QPSR process is being embedded into our performance reporting framework/structures to assist with the demands of all the reporting requirements both locally and nationally.

## **5.0 PROPOSALS**

- 5.1 It is proposed that a review of the information sources outlined at 4.3 is undertaken to identify key themes emerging from communities and services.

We will then review the data that is available relating to these themes, and undertake analysis to attempt to map a rounded picture of overall performance; emerging trends, and the various drivers that can have an impact on performance.

- 5.2 It is also proposed that we bring an initial report to Sub-Committee for comment on its relevance and usefulness, and to seek the views of Members to inform the final structure and content of future performance reports.

## **6.0 IMPLICATIONS**

- 6.1 Legal: There are no legal implications in respect of this report.
- 6.2 Finance: There are no financial implications in respect of this report.

| <b>Cost Centre</b> | <b>Budget Heading</b> | <b>Budget Year</b> | <b>Proposed Spend this Report</b> | <b>Virement From</b> | <b>Other Comments</b> |
|--------------------|-----------------------|--------------------|-----------------------------------|----------------------|-----------------------|
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- 6.3 Personnel: There are no personnel implications.
- 6.4 Equalities: There are no equalities implications.
- 6.5 Repopulation: There are no repopulation implications.

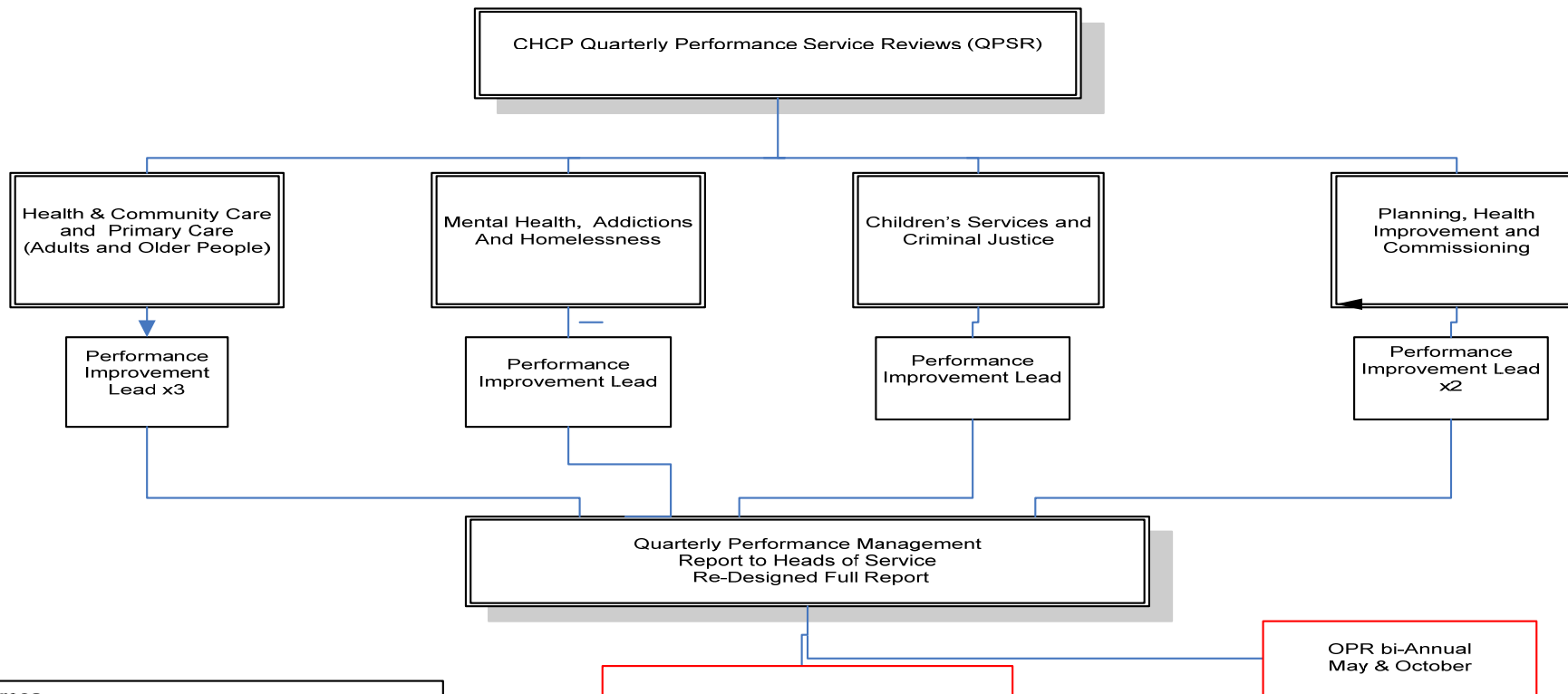
## **7.0 CONSULTATION**

- 7.1 Consultation has taken place with services through the Quarterly Service Review process.

## **8.0 LIST OF BACKGROUND PAPERS**

- 8.1 None

# APPENDIX 1



**Information sources:**  
 Single Outcome Agreement SOA  
 Organisational Performance Review OPR  
 SOLACE Indicators  
 Corporate KPI's 'Inverclyde Performs'  
 CHCP Annual Report  
 CSWO Annual Report  
 Councillor Enquiries  
 FOI Requests  
 Complaints  
 Directorate Plan  
 New Proposed Health Measures  
 SG Early Years Collaborative Approach Workstream Indicators

Quarterly Committee Performance Exceptions Report

OPR bi-Annual May & October