Clackmannanshire and Stirling Health and Social Care Partnership

Integrated Performance Framework

June 2024

Contents

1. Introduction

Clackmannanshire and Stirling Health and Social Care Partnership vision is **enabling people in Clackmannanshire and Stirling to live full and positive lives within supportive communities by working together**. Our refreshed Strategic Commissioning Plan 2023-33 sets out the priorities and activities, but also our ambition to stay focussed on our communities and to continue improving the delivery of care, support and treatment.

Making sure we achieve this requires careful monitoring our activity and impact. This revised Integrated Performance Framework sets out how we will use available data and other information to create rich pictures and stories about what we do, how we do it and how it is experienced by people who rely on health and social care services in our area. This goes well beyond reporting and providing statistics. We have developed reporting styles that help convey key information and insights, while developing the system to create this information more efficiently and effectively.

We have attempted to minimise the use of technical language in this document. The use of acronyms are avoided (though provided in brackets or used to aid readability in the same paragraph) and a comprehensive glossary is appended. A summarised, 'easy read' version is also available containing the key messages.

This framework replaces the previous Performance Management Framework, by building upon it and using our learning post COVID-19. It is significantly different in that it sets out actions to improve how we manage performance and therefore we have an accompanying improvement plan. This includes developing an updated set of Key Performance Indicators that will evolve to reflect changes in operation and demand. This will require significant changes over time and will involve a range of stakeholders. We will continue to report on the current indicators until that work is completed.

Our approach to managing, accessing, and delivering performance information needs to be flexible, accurate and efficient. There are a range of audiences for whom the publication of data and performance information is required. This ranges from strategic insight based reporting via committees to the Integrated Joint Board (IJB); Senior Managers and others; to up to the minute reporting for operational management and demand management.

There is also a duty to make performance focussed information available to the general public, partner organisations and others. We also need to look at performance from different perspectives, such as by locality; by management portfolio; by sections of the community; by themes; service level.

Combining our performance information with contextual information, such as demographics (population information), and information about peoples lived experience, helps build richer and more insightful pictures of what we are achieving and what needs to be done to improve. This richer performance landscape provides a basis to better understand services, those who use them, change that may be required and how we might improve our service delivery.

This is a significant revision of the previous Framework, it reflects the need to efficiently and effectively drive service improvement, in particular,

- make best use of new technology and streamline reporting arrangements
- provide deeper insight into our service delivery
- underpin and drive service improvement
- introduce quality management self-assessment tools

2. What does Performance Management Include?

Almost everything we do as an organisation will touch on performance management as every part of our organisation is about delivering quality services and good outcomes for our supported people. Performance management is about demonstrating and evidencing this. Measures are usually numeric (metrics), allowing change to be measured easily; for them to be compared; and for change over time to be visualised.

These metrics are chosen to give the closest indication of what is happening in a service or function, but may only provide a part of the picture, i.e. an indication. A fuller picture is created by adding further metrics or other context such as information collected about peoples lived experience; wider population measures (demographics); and geographic information (where the function is delivered).

In an organisation as large as the Health and Social Care Partnership (HSCP), with a wide range of interconnected services, covering a large geographic area, there is a potential for the number of indicators to exceed what can be reasonably managed. We are identifying those key performance indicators (KPIs) which are most important for us to monitor. These relate to our key strategic objectives, priorities as well as indicators which are set nationally. Priority is given to these key performance indicators, but there is still a requirement for teams to be able to look at more detailed performance information relating to them and their client group. This detailed information sometimes becomes important to 'drill down' into, when for instance exploring what is happening with a key performance indicator (KPI).

Collecting and understanding all of these indicators is a major challenge in managing and handling data. This can lead to a risk where the 'data' is the focus of the performance management rather than the impacts in communities and on service users. The Health and Social Care Partnership (HSCP) has the added complexity of requiring to obtain data from multiple systems across several partner organisations, usually these are systems managing sensitive client information. Safely bringing this information together in order to be used for performance, but also for providing data returns (e.g. to Scottish Government) is a key part of this refreshed framework. Good data management is a cornerstone of good performance management.

Identifying the full set of Key Performance Indicators we will need to manage in Clackmannanshire and Stirling will be a key aspect of improving our performance approach. This Integrated Performance Framework sets out the broad requirements for these indicators, how we will use them and

manage them, using a refreshed approach to data management and improvement. How we identify these indicators will be a key part of the improvement planning for taking this framework forward.

Once indicators are identified and data obtained, it is necessary to analyse what the information is telling us. Generally, indicators are viewed over time and changes looked for. Most indicators will show some sort of variation, this can be seasonal (such as the number of people who are recorded as having a fall during the winter season or may seem completely random. It is important that these variations are not misinterpreted and to avoid this, some sort of method to allow for this variation should be built in. Comparison against targets for improvement or for minimum acceptable standards can also be used or benchmarking with other organisations. At operational level, anomalies in data are important for identifying quality issues for instance with individual cases.

Sometimes sophisticated statistical analysis is used to understand what is happening with an indicator if needed.

An important aspect of analysing an indicator is determining if it can provide assurance that not only is the performance well managed, but that the indicator shows that the service level is above acceptable levels or improving as intended. Often, as is the case in this framework, a Red- Amber – Green (RAG) traffic light approach is taken.

Further detail of criteria for these categorisations are provided later in this paper.

- Green means all is well and we could tell if it was not (i.e. performance data is available and can be compared to targets and trends identified), this is the evidence needed to provide assurance (i.e. certainty) that this indicator is well managed and performing as intended;
- Amber means that some risk is apparent but managers can be reassured (based on trust, opinion or professional expertise) that this will be remedied; and
- Red signals where there is an issue that needs to be remedied through some form of improvement action, this is usually referred to as escalation, as it will be escalated to a more senior group for consideration.

The final part of this performance picture is reporting. In some instances a simple report containing the KPIs is all that is required, at other times a well written report with case studies and context to set the indicators alongside is important.

3. Our Principles

Our principles are at the heart of our approach to performance.

1. Manage our performance information to improve outcomes for those who rely on our services.
2. Go beyond minimum statutory requirements (such as data returns) to ensure our performance system works for us, for instance the use of locality performance measures.
3. Maintain a safe environment to raise performance issues.
4. Our performance process and our measures are transparent and we will share these publicly.
5. Use objective criteria to interpret our performance measures based on trends, benchmarks and targets.
6. Where performance is compromised, a timely improvement plan will be prepared.
7. Understand our performance in terms of our service users and the communities they live in to gain deeper insight.

4. Governance and Oversight

There is a significant body of important legal (statutory) and national and local governance at the heart of performance management. This provides assurance that the Partnership is managed well and that we are doing the right things in the right way. This assurance is given not only to decision makers within our own Partnership but also our external partners; national bodies; such as the Scottish Government; and regulators, such as the Care Inspectorate and others. The legal duty to deliver Best Value underpins this, requiring that we can clearly demonstrate we are delivering the right services which gives the best value for the public funds we use and that we are making a positive impact in improving the lives of vulnerable people in Clackmannanshire and Stirling.

Health and social care integration introduced a statutory based new model of cross-sector working which determined that scrutiny of performance must be embedded in the local governance framework. External scrutiny is provided by the Care Inspectorate; the Health & Safety Executive (HSE) and; and the Mental Welfare Commission who inspect and support improvement of adult social work and social care.

Our approach to improving the quality of the services we deliver goes well beyond the statutory minimum requirements. However, it is crucial that we fulfil our duty to provide such assurance and that we can do this efficiently. In Clackmannanshire and Stirling the Integrated Joint Board is supported in carrying out its duties by The Audit & Risk Committee, the Finance & Performance Committee and the Strategic Planning Group. These committees will be provided with regular performance reports as set out in later in the paper.

4.1 Best Value, Governance & Risk

Clackmannanshire Council, Stirling Council and NHS Forth Valley (the partnership authorities) delegate budgets to the Integration Joint Board (IJB). The IJB decides how to use the budget to achieve the priorities of the Strategic Commissioning Plan and to progress towards the National Health and Wellbeing Outcomes set by the Scottish Government. Put in a more simple way, the Board identify our priorities and plan how we will deliver our services, improve outcomes for people and support people to live independent lives with the care and support they need.

The governance framework are the rules, policies and procedures that ensure the IJB is accountable, transparent and carried out with integrity. The IJB had legal responsibilities and obligations to its stakeholders, staff and residents of Clackmannanshire and Stirling.

The Partnership monitors performance to measure progress in delivering the priorities of the Strategic Plan with financial performance a key element of demonstrating Best Value.

We monitor Best Value through:
- The Performance Management Framework and Performance Reports
- Development and Approval of the Annual Revenue Budget
- Development of and reporting on the Transforming Care Programme
- Regular Financial Reports
- Regular Reporting on Strategic Improvement Plan
- Topic Specific Progress reporting e.g. Primary Care Improvement Plan
- Reporting on Strategic Plan Priorities to the IJB and topic specific reports.
- Best Value Statement

The IJB accounts contain an Annual Governance Statement which reports progress on the review and improvement of governance arrangements identifies any weaknesses apparent during the year and sets out a governance action plan for the coming year to continually improve governance arrangements.

Audit and Risk Committee and Finance and Performance Committee report to the IJB through committee chairs who are voting members of the IJB. The terms of reference of the committees are reviewed periodically.

Strategic Plan Priorities Delivery and Transforming Care

Better Outcomes for People & Best Value

Effective Utilisation of Resources & Financial Sustainability

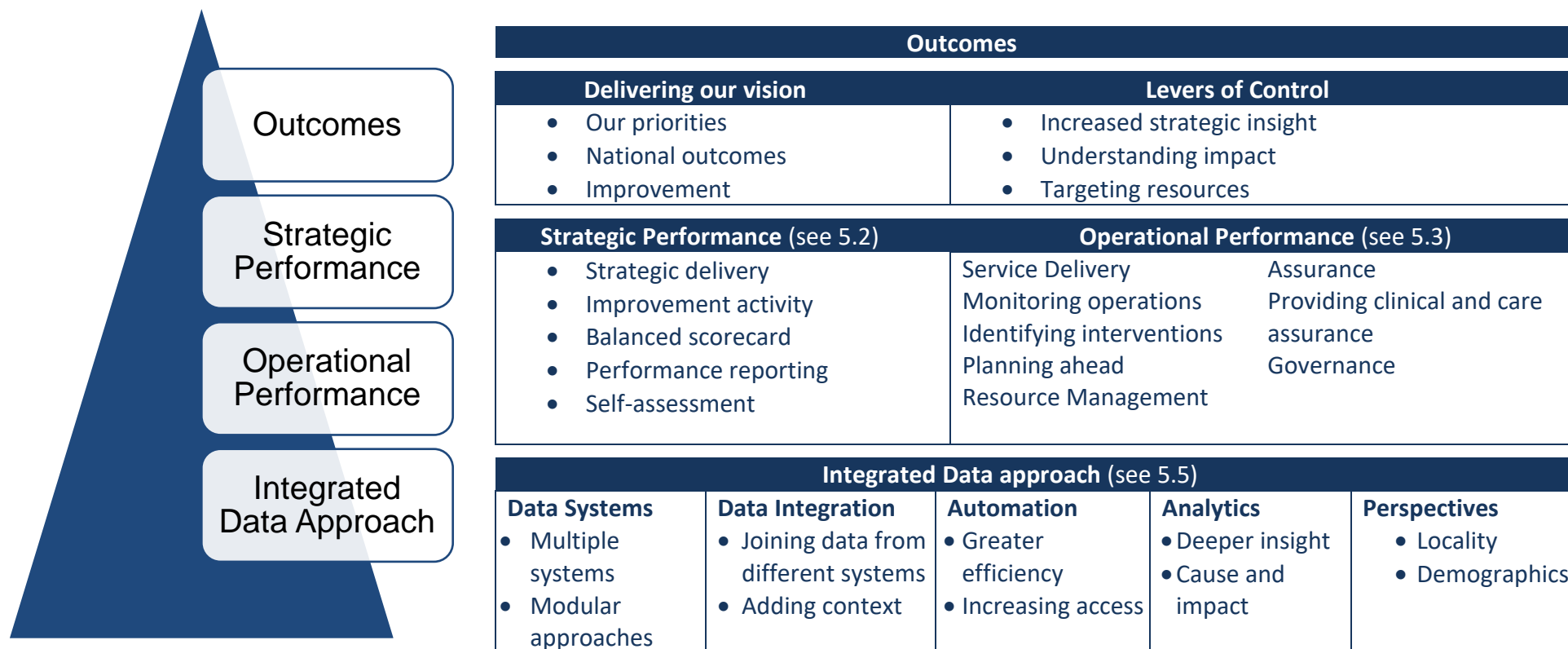Progress Against Key Performance Indicators

5. The Integrated Performance Framework

The Integration Scheme for Clackmannanshire and Stirling is currently under review. However, this Integrated Performance Framework will reflect the need for the IJB to continue to be responsible for monitoring and reporting in relation to the delivery of the integrated services on behalf of NHS Forth Valley, Clackmannanshire Council and Stirling Council. The framework (figure 1) is based on better integration of our data assets and builds on recent work improving information collection and management and the use of clinical and care governance quality assurance.

It is recognised that to create a high quality performance framework will require development of the measures we use and how we use them, in particular this will need wider involvement from a range of stakeholders to ensure we are capturing the right things. It would not be possible to put this in place immediately as it requires consideration and development. This is reflected in the sections below and in the accompanying Integrated Performance Framework Delivery Plan.

Figure 1: Outline of Integrated Performance Framework

Outcomes

Delivering our vision	Levers of Control
• Our priorities • National outcomes • Improvement	• Increased strategic insight • Understanding impact • Targeting resources

Strategic Performance (see 5.2)	Operational Performance (see 5.3)	
• Strategic delivery • Improvement activity • Balanced scorecard • Performance reporting • Self-assessment	Service Delivery Monitoring operations Identifying interventions Planning ahead Resource Management	Assurance Providing clinical and care assurance Governance

Integrated Data approach (see 5.5)

Data Systems	Data Integration	Automation	Analytics	Perspectives
• Multiple systems • Modular approaches	• Joining data from different systems • Adding context	• Greater efficiency • Increasing access	• Deeper insight • Cause and impact	• Locality • Demographics

5.1 Outcomes

Outcome Measures relate to our vision "Enabling people in Clackmannanshire and Stirling to live full and positive lives within supportive communities by working together and promoting wellbeing". These measures will gauge our progress in achieving this vision. This provides a check on whether our strategies are achieving the vision as intended.

These will be based initially on the National Health and Wellbeing Outcome Measures, which provide a framework for capturing the lived experience of people in receipt of care and support (appendix 1). To make best use of this approach, we will also develop ways to collect information more often than is available nationally with the aim of providing measures annually for these outcomes. The outcomes are shown in figure 2.

Not everything we do necessarily fits into our vision or the National Health and Wellbeing Outcome Measures, for instance important work under protective legislation. Therefore it will be important in developing our local outcome measures to ensure that critical service outcomes are included.
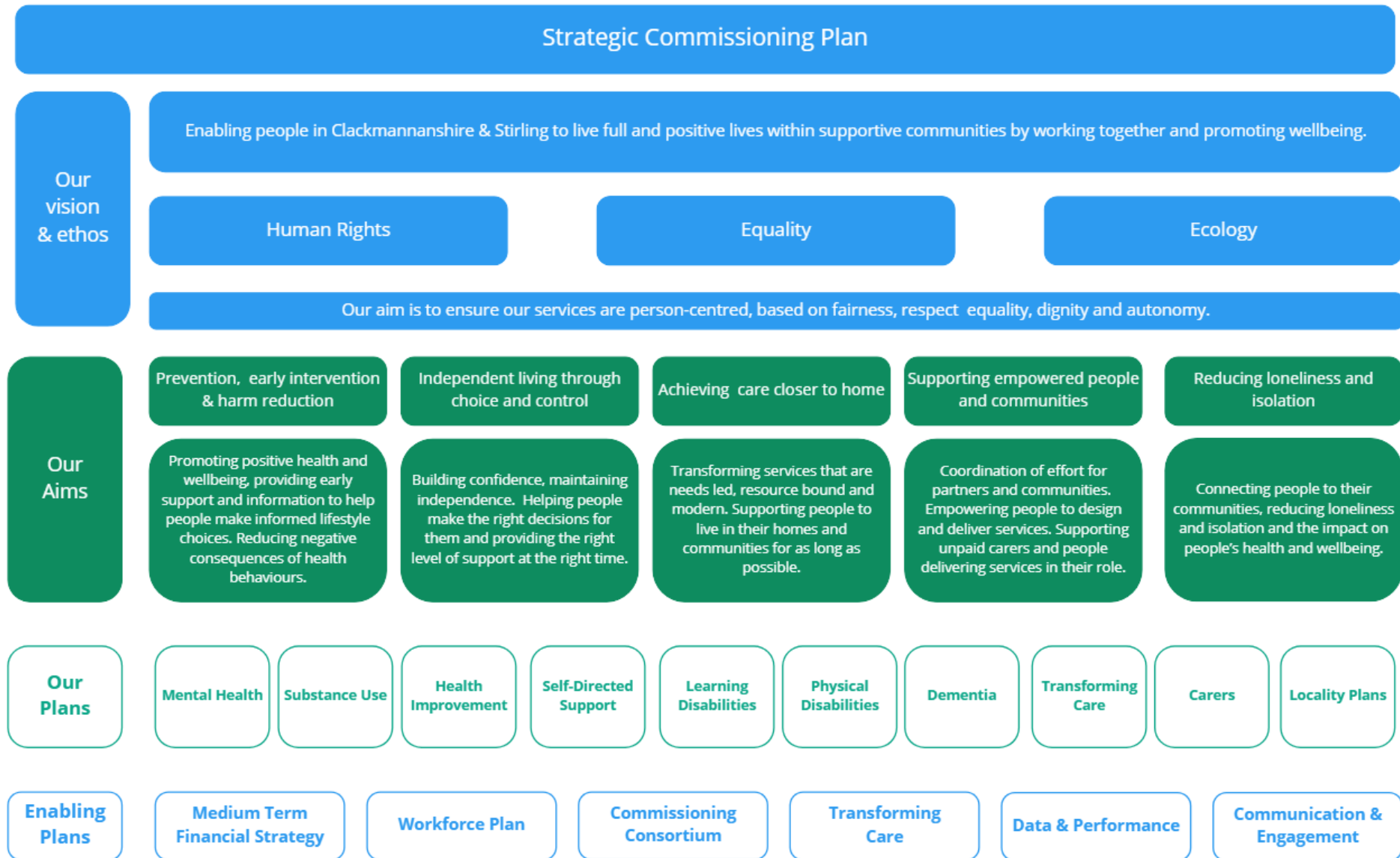
A key challenge in delivering these outcomes will be in reducing the need for services (prevention) or in reducing the duration of that need. Need is a combination of service delivered, those waiting for a service and unmet need (i.e. a requirement for a service which for whatever reason is not identified or requested). Simply measuring service activity levels will therefore not necessarily allow us to assure that we are achieving our objectives. We will therefore, where possible, develop and add measures for assessing the total need, including unmet need, and our success in addressing it.

We will look at the performance of the outcomes we seek alongside other strategic and operational performance information and in the context of demographics, place and other factors. This builds insight into, for instance, where services are needed, drivers (causes) of the issues we see, what works in improving service delivery, where resources are focussed, etc. This gives key information on the levers of control at our disposal. Levers of control are things we can do to effect better outcomes. These levers can include better alignment of resources, targeting of specific groups of people with new or existing services, providing protection to those who need it, changes to existing service delivery, better knowledge of what works in practice and the ability to plan for future events.

Figure 2: National Health and Wellbeing Outcomes and Our Strategic Themes

All themes and priorities are linked to the Health and Wellbeing Outcomes. Each theme will demonstrate improvement for people and communities, how we are embedding a human rights based approach, consideration for equalities and evidencing improvement across the services we deliver. **Health and Wellbeing Outcomes**	Prevention, early intervention & harm reduction	Independent living through choice	Care Closer to Home	Supporting empowered people & communities	Loneliness & isolation
1. People are able to look after and improve their own health and wellbeing and live in good health for longer.	✓	✓	✓	✓	✓
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.	✓	✓	✓	✓	✓
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.	✓	✓	✓	✓	
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	✓	✓	✓	✓	✓
5. Health and social care services contribute to reducing health inequalities.	✓	✓	✓	✓	✓
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact on their caring role on their own health and wellbeing.		✓	✓		
7. People who use health and social care services are safe from harm.	✓	✓	✓		
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. 9. Resources are used effectively and efficiently in the provision of health and social care services.	Enabling Activities				

5.2 Strategic Performance

Strategic Commissioning Plan

Our vision & ethos

Enabling people in Clackmannanshire & Stirling to live full and positive lives within supportive communities by working together and promoting wellbeing.

Human Rights	Equality	Ecology

Our aim is to ensure our services are person-centred, based on fairness, respect equality, dignity and autonomy.

Our Aims

Prevention, early intervention & harm reduction	Independent living through choice and control	Achieving care closer to home	Supporting empowered people and communities	Reducing loneliness and isolation
Promoting positive health and wellbeing, providing early support and information to help people make informed lifestyle choices. Reducing negative consequences of health behaviours.	Building confidence, maintaining independence. Helping people make the right decisions for them and providing the right level of support at the right time.	Transforming services that are needs led, resource bound and modern. Supporting people to live in their homes and communities for as long as possible.	Coordination of effort for partners and communities. Empowering people to design and deliver services. Supporting unpaid carers and people delivering services in their role.	Connecting people to their communities, reducing loneliness and isolation and the impact on people's health and wellbeing.

Our Plans

Mental Health	Substance Use	Health Improvement	Self-Directed Support	Learning Disabilities	Physical Disabilities	Dementia	Transforming Care	Carers	Locality Plans

Enabling Plans

Medium Term Financial Strategy	Workforce Plan	Commissioning Consortium	Transforming Care	Data & Performance	Communication & Engagement

The Strategic Commissioning Plan 2023-2033 sets out a new direction and strategic themes. The revised Integrated Performance Framework aligns our performance management to the new Strategic Commissioning Plan.

To achieve our vision we continue to update and develop a range of strategies and plans. These allow us to consider what is needed to achieve our vision, the activity required, the resources needed and how we will know if we are on track. Delivery of our vision is therefore dependent on our strategies being effective.

Our Strategic Performance will be measured in an Annual Performance Report through:

- The Strategic objectives under each of our five strategic themes outlined in the Strategic Commissioning Plan 2023-2033. These will be measured as Red-Amber-Green (RAG) status for each objective.
- Key Performance Measures collated from each of the Strategic Action Plans supporting our Strategies. These will map to our five strategic themes.
- Progress against key activity required to deliver the strategies, maintained in an activity monitor and Red-Amber-Green (RAG) coded.
- These performance measures will also be used as a basis for reviewing strategies, e.g. Carers Strategy when they are refreshed.
- Tracking delivery of activity within strategies and plans is covered further in paper.

5.3 Operational Performance

We deliver a wide range of complex services often at a high volume to all parts of Clackmannanshire and Stirling including a significant area of rural locations. Performance monitoring is vital to ensure these services support people to meet their outcomes and to ensure we are achieving our aspiration to continually improve. Operational performance will be measured through a set of key performance indicators which will be in our balanced scorecard. Operational Performance will be managed through:

Key Performance Indicators (KPI's)
Monitoring service delivery is undertaken through Key Performance Indicators (KPI's). Due to the range of services, there will be a considerable number of these, organised across sets of indicators based on portfolios, operational expedience and legislative functions. These indicators will be maintained and updated as required. Generally, managing and reporting on these areas of performance will be the responsibility of services and teams, making use of self-service information. However, escalation of key areas where performance is lower will be part of this process. Key performance indicators will also include management measures such as workforce capacity and development and financial information as well as outcomes measures. Under development are outcome measures focussed on the impact of care, support and treatment for individuals.

Day to day management within teams and portfolios
This is strongly reliant on access to individual records held on a number of systems held on across the three constituent organisation and efficient access to current information on performance. We will develop a self-service approach to this, this will be improved through the integrated data approach described below. Information will be available through a range of data exploration dashboards (e.g. Microsoft Power BI) and automated reporting.

Clinical and Care Governance arrangements
Clinical and Care Governance is an important function closely allied to performance. There is a separate framework – The Health and Social Care Partnership (HSCP) Clinical and Care Governance Framework, which defines approaches and reporting.

Some of the improvements to data management proposed in the framework will assist in delivering that framework more efficiently also. The Clinical and Care Governance Group is a key part of the Health and Social Care Partnership (HSCP) Clinical and Care Governance Framework, will be the vehicle for providing operational assurance and these are being rolled out across all operational settings.

This approach includes close inspection of Key Performance Indicators (KPIs) on a weekly basis, including current trends and outliers and improvement interventions are identified as required. Clinical and Care Governance Group are focussed on giving assurance that clinical and care practices are effective. As part of this there is close regular examination of operational performance data, which is the reason these are a key part of the performance framework.

Management of services we have commissioned

Commissioned services via the third and independent sectors is a significant and important part of our service delivery. Therefore it is important to have access to performance information about these services. The usage of a Commissioning Consortia approach has made the use of local intelligence data and performance vital to the decision making process. A set of Key Performance Indicators will be developed to allow inclusion of this key delivery in our suite of performance monitoring.

The Health and Social Care Partnership (HSCP) carries out quality assurance and contract monitoring of care services for adults and older people. Commissioned services funding to third sector providers are subject to monitoring in line with Clackmannanshire Council's and Stirling Council's Monitoring and Evaluation Framework whilst our third and independent contracted providers are subject to contract monitoring via our contractual terms and conditions. Our contract monitoring ensures organisations have good governance and control systems, ensures that there is a mechanism in place to measure how well organisations are meeting their agreed objectives and provides the Partnership with a framework to demonstrate that public money is being spent efficiently and effectively.

5.4 Stakeholders and Performance

A critical test of how we are performing is the experience of supported people, key stakeholders and partners. The Partnership has invested in participation and engagement to facilitate conversations with these key groups. Ensuring we capture key information and build this into our performance arrangements as KPIs is an important aspect of this framework.

This approach to capturing stakeholder views is well embedded and will be further developed with a key perception indicators for use across the Health and Social Care Partnership (HSCP) services, in line with the National Health and Social Care Standards (appendix 1). This is likely to involve the use of Citizen's Space and Locality Planning Networks. The setting up of these engagement approaches are in the early stages and so this will be an improvement activity.

Information about protected characteristics (equalities) is a key measure of how well we are reaching people of all groups. KPIs relating to the experience of people with protected characteristics will be included in this set of indicators. This data will be subject to all proper data protection considerations.

5.5 Integrated Data Approach

The revision of our Integrated Performance Framework relies upon an integrated approach to managing, using and understanding our data. This is because driving performance is most efficiently achieved based on a sound understanding of the systems and processes involved. Analysing our data alongside listening to our supported people and other stakeholders provides the best way to do that and provides advantage in planning change, deploying preventative approaches, evidencing our functions under legislation and driving process and cost efficiency.

Due to the nature of the Partnership the data we require to report performance and analyse is held across systems in NHS Forth Valley, Clackmannanshire Council and Stirling Council, national datasets and a collection of smaller datasets across a range of wider partners.

The complexity of multiple organisations is furthered by the fact that each organisation works with multiple systems. This leads to challenges in pulling information together and making the reporting processes as efficient as possible.

As part of wider, mainly national, performance management we are required to provide a number of statutory performance data returns. It is intended through use of greater automation to improve the efficiency of this where we can. While these returns are important, with some exceptions they are not always a critical part of how we manage performance of our own services as such and are therefore a data provision function rather than performance management.

5.6 Monitoring Activity for Performance

Improvement requires we undertake and monitor a range of activities. Increasingly this is required by the Scottish Government (e.g. NHS Annual Delivery Plan, Alcohol & Drug Partnership Annual Report). However, it is important intelligence to understand the roll out of activities relating to change which should in turn be reflected as improved performance.

We have a range of activity monitors, including:
- Strategic Plan Delivery Plan
- Annual Delivery Plan
- Individual Strategy Delivery Plans (e.g. Carers Strategy)
- Winter Programme
- Transformational Programmes

Activities will be coded for current status and this will be used as the basis for higher level performance measures. These codes are explained in the section 'Performance in Practice' below.

5.7 Locality Performance

We are committed to delivering many of our services locally and there is variation across communities between Localities and within them. We will seek wherever possible to break performance metrics down to Localities to provide Locality Performance reporting and greater insight into the whole Clackmannanshire and Stirling picture. This allows us to understand performance as close to the locations of the people and communities we serve as possible. This enables more targeted approaches and increased intelligence led locality planning.

5.8 Self-Assessment for learning and improvement

We require assurance that we are creating the right conditions to drive a high performing, improving environment. This goes beyond reporting on performance and implies a culture which is capable of proactively driving high performance. Quality management frameworks are a useful tool for organisations to reflect on how they create the right conditions to drive excellence; to provide assurance that they are on track to do this; and to identify gaps which require improvement. Usually, these tools are developed around the concept of self-awareness. The duty of Best Value is heavily reliant on quality management approaches and demonstrating self-awareness.

The Scottish Improvement Service have adapted their Public Sector Improvement Framework (PSIF) for use to allow Integrated Joint Boards (IJBs) and Health and Social Care Partnerships (HSCPs) to assess their performance at partnership or service level against the expectations of the Public Bodies (Joint Working)(Scotland) Act (the legal instrument which created the integrated approach to Health and Social Care). These are externally facilitated giving additional assurance regarding the findings.

Use of the Public Sector Improvement Framework (PSIF) is helpful because -
* It allows the Integrated Joint Board (IJB) and Health and Social Care Partnership (HSCP) to assess their own performance against the expectations of the Public Bodies (Joint Working) (Scotland) Act
* It is mapped to frameworks used by Audit, Inspection and Regulatory Bodies
* It focusses on continuous improvement and performance
* It demonstrates organisational self-awareness
* It can if required provide external recognition

We will therefore undertake to use the PSIF Health and Social Care Self-assessment as part of our performance improvement approach.

We will initially undertake assessment at Health and Social Care Partnership (HSCP) level and Integrated Joint Board (IJB) level (two separate assessment products) with a view to moving towards portfolio assessments in time.

6. Performance in Practice

In putting our performance framework into practical use, there is a need to manage the detail of all of the different indicators, identify reporting arrangements and decide how we will identify areas of performance that require further attention or improvement.

6.1 Finance and Performance Group

The Finance and Performance Group is key to the delivery of the Integrated Performance Framework. The Finance and Performance Group will comprise members of the Chief Finance Officer as the Chair, Heads of Service; Locality Managers; Service Managers and Performance Managers and others as required will be set up to oversee all practical aspects of the alignment of performance and finance across the HSCP. This includes this Integrated Performance Framework. It will recognise the need for continual improvement with regard to performance and finance within the HSCP. Terms of Reference will be developed for the Group which will include all aspects of performance delivery in the HSCP; development of all strategic plans, service plans and transformation programmes; advising on systems to deliver performance information; and overseeing performance across the HSCP. It is intended that the Group would meet bi-monthly.

6.2 Balanced Scorecard

It is helpful when managing larger numbers of performance measures to arrange them into broad management themes. This helps to develop a higher level of all of the detail contained in the individual measures and is useful in creating themed conversations about broader areas of management.

A balanced scorecard is an established way to group performance measures to focus on an organisation as a system of interconnected parts. Such an approach reduces the risk that gaps in measures arise and helps focus performance discussions on wider management systems and approaches rather than solely on the detail of one particular indicator. Our scorecard comprises four areas of interest, or sections, (table 1), each broken down in a series of important sub-sections for measurement. Individual metrics sit within these areas.

Table 1: Structure of the Balanced Scorecard

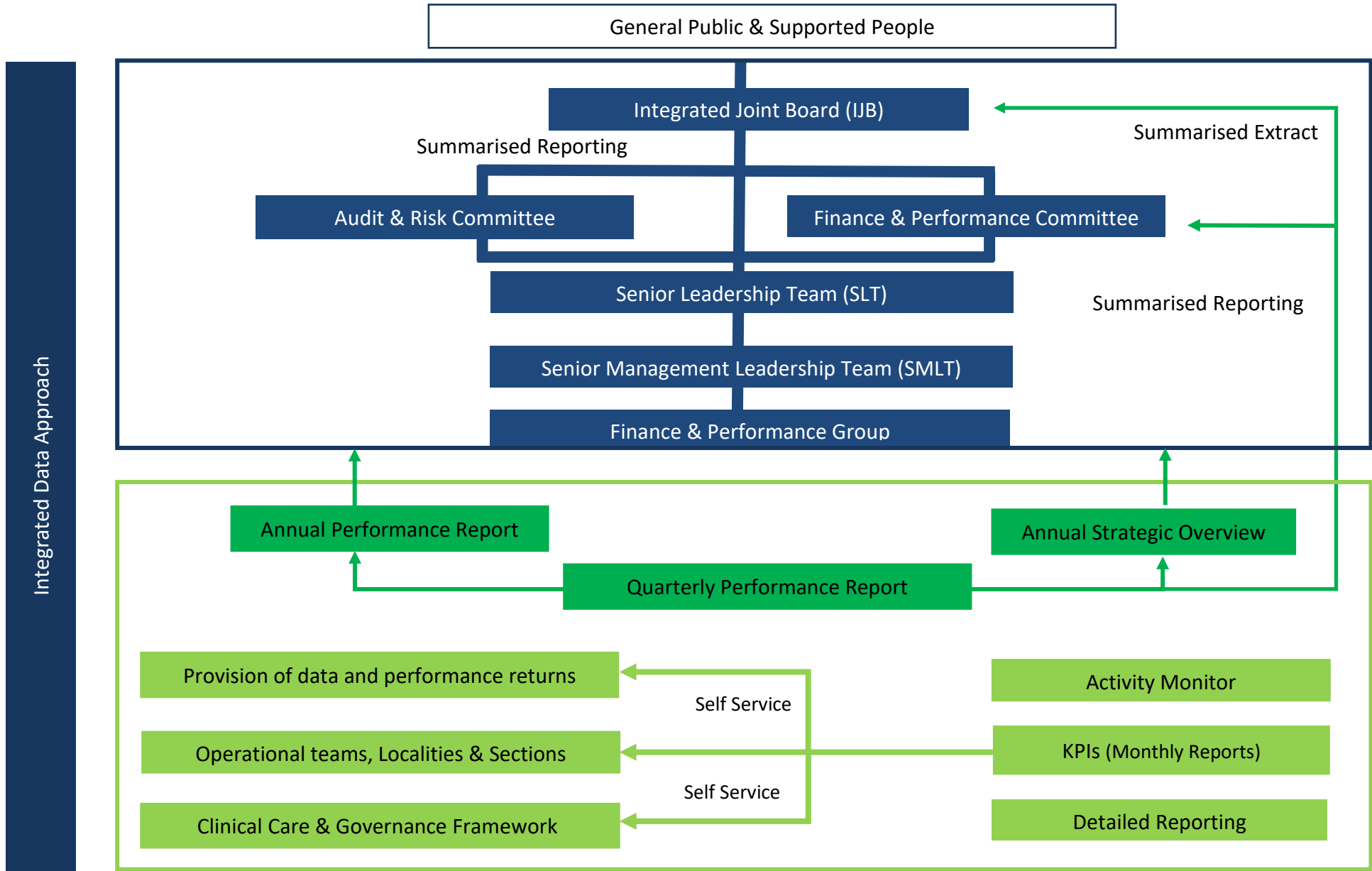| Section	Sub-sections	Types of measure
Outcomes	National Outcomes	National Health and Wellbeing Outcome Indicators
	Local Outcomes	Local indicators reported more frequently as proxies for national term outcomes, legislative and policy drivers
Delivery	Strategic measures	Indicators within the HSCP strategies (e.g. Carers Strategy)
	Service Measures	Key Performance Indicators at service level
	Activity Measures	Progress against key activities
	Third and Independent Sector measures	Measures of external provision
Management Indicators	Finance	Key financial indicators
	Workforce	Key workforce indicators
Stakeholders	Supported People engagement	Range of engagement activity including Commissioning Consortia, Locality Planning Networks, Citizen Space, community engagement meetings, HSCP funded Third Sector engagement officer.
	Staff engagement	
	Carer engagement	
	Locality and independent sector engagement	
	Public engagement	
	Complaints and enquiries	

6.3 Performance Reporting

Performance reporting is the most visible part of an organisations performance arrangements. This is the mechanism by which we present performance information, explain context and submit performance information for scrutiny. This scrutiny includes internal management structures, our boards and committees, partner organisations, service users and the general public. We have well defined legal duties to provide performance reports for such scrutiny, particularly through the Annual Performance Reporting arrangements.

Table 2 shows the main reporting products and the cycles involved. This will involve discussion and development. The key pathways in the performance framework are shown in figure 3.

Table 2. Performance Management Reporting and cycles

Frequency	Format	Tool	Reported To
Three Yearly	Self-Assessment (IJB) and Health and Social Care Partnership (HSCP)	Public Sector Improvement Framework Health (PSIF) HSCP) Self-Assessment approach)	IJB; SLT (to be trialled)
Annually	Annual Performance Report	Public (Statutory Duty) Written report highlighting performance across the year, including achievements and feedback from clients.	Scottish Government; IJB; Strategic Planning Group, Finance & Performance Committee; NHS Forth Valley Board; Clackmannanshire Council; Stirling Council
	Annual Strategic & Operational Overview	Report on the balanced scorecard and key context information with assessment of whether the strategies will deliver and progress against the vision.	SLT; SMLT
	Chief Social Work Officers Annual Report	Annual assurance report by the chief social work officer	IJB; SLT; SMLT; Clackmannanshire Council & Stirling Council
Quarterly	Quarterly Key Performance Report	Narrated report highlighting actions for monthly key performance measure exceptions	IJB; SMLT; Strategic Planning Group; Performance & Finance Committee
	Adult & Older Adult Social Work and Social Care Quality and Performance Report	Narrated report highlighting actions for monthly key performance measure exceptions	IJB; Clackmannanshire Council; Stirling Council
	Clinical & Care Governance	Narrated report highlighting actions for monthly key performance measure exceptions	SLT; SMLT
	Locality Reports	Narrated report highlighting actions for monthly key performance measure exceptions	IJB; SLT; SMLT; Strategic Planning Group; Finance and Performance Group
Monthly	Monthly Key Performance Measures Report	Fully automated report without narrative, indicating exceptions etc.	Senior Managers (SLT; SMLT or ELT)
	Clinical and Care Governance	Self service via automated reports with run charts, exceptions with manual data exploration	Finance and Performance Group
Weekly	Operational reports and access to records	Self-service dashboard reporting and direct access to systems	Heads of Service; Individual Managers & Teams
Daily	Operational reports and access to records	Self-service dashboard reporting and direct access to systems	Heads of Service; Individual Managers & Teams

Figure 3: Performance Reporting Pathways

Integrated Data Approach

General Public & Supported People

Integrated Joint Board (IJB)

Summarised Reporting

Summarised Extract

Audit & Risk Committee

Finance & Performance Committee

Senior Leadership Team (SLT)

Summarised Reporting

Senior Management Leadership Team (SMLT)

Finance & Performance Group

Annual Performance Report

Annual Strategic Overview

Quarterly Performance Report

Provision of data and performance returns

Self Service

Activity Monitor

Operational teams, Localities & Sections

Self Service

KPIs (Monthly Reports)

Clinical Care & Governance Framework

Detailed Reporting

6.4 Interpreting Performance Indicators

Key to looking at performance measures is how these will be interpreted in a practical way. Normal random variation along with seasonal variation means that measures will go up and down on a monthly basis without cause for particular concern. While a lot of variation in a specific services may indicate a lack of process control, generally this type of change is best managed within operational teams. The Finance and Performance Group is also well placed to explore short term variation and take corrective action if required, providing a rigorous approach to managing and assuring this type of change. However, even at a more strategic level, we must be sure that performance of indicators has been properly interpreted and that we are not simply reacting to short term variation or random variation.

Assurance will be required for indicators that they are showing progress as intended such as improving, being on target and properly performance managed to allow change to be detected and interpreted. These are presented in Table 3 below.

Table 3: Risks to Performance

	Criteria	Risks to performance
1	Performance is being managed	• Information is reported appropriate to indicator • Targets are in place • Appropriate granularity is available, notably o Split by locality o Split by key demographics o Split by protected characteristic's such as ethnicity and others
2	Improvement is occurring	• Long term (1 year plus) improvement trend is seen and/or • Improvement trend indicating an indicator will be back on target by a specified date
3	Nothing unexpected is happening with the indicator	• Any short term changes (up to 3 months) are within expected variation for this indicator, including normal variation, seasonal variation or there are no unusual events anticipated • The cause of changes can be identified including improvement activity we have undertaken, changes in policies or other changes in society

We will use a simple Red – Amber – Green (RAG) status to summarise how performance indicators are being managed. These categories are defined in Table 4.

Table 4. RAG Status definition for Performance Indicators

RAG	Definition	Action
Green	No obvious risks to performance management are evident based on criteria in table 3	None
Amber	Risks to performance management are evident but appropriately mitigated. This may include Red status indicators where appropriate mitigation has been put in place (it does not return to green until it has been shown to improve at least short term performance)	Performance Improvement Plan followed by continued vigilance
Red	Risks to performance management are present and not mitigated sufficiently to give assurance that the issues will be resolved	Immediate new Performance Improvement Plan or amend an existing one

The method of mitigating a risk for performance measures will be through a Performance Improvement Plan (Table 5) which will be triggered on an indicator turning amber or red. A plan will therefore be in place for any indicator with a RAG status anything but Green. These plans will be regularly reviewed and particularly where improvement does not occur as intended. Only once all risks to performance are removed can an indicator return to green status. For example, if an indicator requires to improve performance, there will need to be evidence of the performance beginning to improve, which will mean the short term trend improving, this could naturally take several months. This means simply having a Performance Improvement Plan is not enough to return to Green status, although it can reduce risks from Red to Amber status

Table 5. Content of Performance Improvement Plan

	CONTENTS
1	Details of the indicator
2	Reason the indicator is flagged as amber or red
3	Is this a new risk for this indicator? If not explain
4	What is proposed to mitigate risks?
5	Who will be responsible for risk mitigation?
6	When will the risk be removed and the indicator return to green status?
7	When the Improvement Plan will be reviewed

NATIONAL PERFORMANCE DRIVERS

National Health and Social Care Standards

The Health and Social Care Standards (the Standards) set out what should be expected when using health, social care, or social work services in Scotland. They seek to provide better outcomes for everyone; to ensure that individuals are treated with respect and dignity, and that the basic human rights we are all entitled to are upheld.

The objectives of the Standards are to drive improvement, promote flexibility and encourage innovation in how people are cared for and supported. All services and support organisations, whether registered or not, should use the Standards as a guideline for how to achieve high quality care

The Standards are based on five headline outcomes:
1. I experience high quality care and support that is right for me.
2. I am fully involved in all decisions about my care and support.
3. I have confidence in the people who support and care for me.
4. I have confidence in the organisation providing my care and support.
5. I experience a high-quality environment if the organisation provides the premises.

The Standards are underpinned by five principles: dignity and respect, compassion, be included, responsive care, and support and wellbeing. The principles themselves are not standards or outcomes but rather reflect the way that everyone should expect to be treated.

National Health and Wellbeing Outcomes

The national health and wellbeing outcomes provide a strategic framework for the planning and delivery of health and social care services and apply across all integrated health and social care services. They also form the basis of how the Scottish Government will monitor performance in relation to health and social care through the associated core suite of indicators/measures.

National Health and Wellbeing Outcomes

1	People are able to look after and improve their own health and wellbeing and live in good health for longer.
2	People, including those with disabilities, long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home in a homely setting in the community.
3	People who use health and social care services have positive experiences of those services, and have their dignity respected.
4	Health and social care services are centred on helping to maintain or improve the quality of life of service users
5	Health and social care services contribute to reducing health inequalities
6	People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and well-being.
7	People who use health and social care services are safe from harm.
8	People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged with the work they do.
9	Resources are used effectively in the provision of health and social care services, without waste.

This suite of outcomes, together, focus on improving the experiences and quality of services for people using those services, carers, and their families. These outcomes focus on improving how services are provided, as well as the difference that integrated health and social care services should make, for individuals.

Core National Indicators for Health and Social Care

1	% of adults able to look after their health very well or quite well
2	% of adults supported at home who agree they are supported to live as independently as possible
3	% of adults supported at home who agree they had a say in how their help, care or support was provided
4	% of adults supported at home who agree their health and social care services seemed to be well coordinated
5	% of adults receiving any care or support who rate it as excellent or good
6	% of people with positive experience of care at their GP practice
7	% of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life
8	% of carers who feel supported to continue in their caring role
9	% of adults supported at home who agree they felt safe

11	Premature mortality rate per 100,000 persons by calendar year
12	Emergency admission rate
13	Emergency bed day rate
14	Readmission to hospital within 28 days
15	Proportion of last 6 months of life spent at home or in a community setting
16	Falls rate per 1,000 population aged 65+
17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections
18	% of adults with intensive care needs receiving care at home
19	Number of days people aged 75+ spend in hospital when they are ready to be discharged per 1,000 population
20	% of health and care resource spent on hospital stays where the patient was admitted in an emergency.

Ministerial Steering Group (MSG) Indicators

6	Balance of care: Percentage of population in community or institutional settings
1a	Number of Emergency Admissions
2a	Number of unscheduled hospital bed days
3a	A & E Attendances
4	Delayed Discharge Bed Days
5a	Percentage of last six months of life by setting

Term	Description
Activity Monitor	In the current context, a dataset of all important activities across our Strategies and Programmes
Annual Delivery Plan	A data return for the Scottish Government containing information on activity to be carried out across the coming year.
Annual Performance Report	A report outlining performance for the previous year, this is a statutory report and guidance exists regarding how it is composed.
Assurance	Where good quality evidence is used to provide a degree of certainty that what is being reported to be the case, is in fact the case.
Balanced Scorecard	A well-established way to track and manage performance across a range of important management areas of an organisation. It effectively produces a set of performance measures from the organisations strategy including the outcomes it seeks, the views of stakeholders and resource considerations such as workforce and finance.
Benchmarking	Comparing performance indicators to other similarly collected indicators, for instance comparing Fife to other regions of Scotland.
Best Value	A legal obligation on public bodies that they can demonstrate the best performance possible for the money they spend. In practice this often involves a trade-off between the funding available and the performance and range of services available.
Clinical & Care Assurance	The use of evidence, often including patient or client records, to provide a level of certainty that standards of practice are adequate and usually better.
Commissioned Service	A service obtained from an external organisation or service.
cross-sector	Work which spans the boundaries of quite different activities, examples of sectors include the public sector more generally but also health, education etc.
Culture	All of the behaviours, attitudes and views of the people in an organisation.
Dashboard	A way of displaying a range of performance information in one place. Usually now this means a digital system and allows the information to be explored further through a user interface.
Data	A broad range of information gathered into one place. This can include patient records; official statistics; financial information or text written by people making comments.
Data Assets	All of the available information, data, records, data systems, data and statistical tools, reports or similar.
Data Returns	All of the data and other information which we are required to provide to external bodies such as the Scottish Government, much of this has a statutory basis.
Demographics	Information about populations of people, the groups within the population and where they are located.
Drivers (causes)	The causes of what is being seen in performance data. Often the drivers are causes which might not be immediately obvious.
Escalation	A process where a risk or poor performance can be taken to a more senior group or body in order for decisions to be made and actions planned to remedy the situation.

Term	Description
Finance and Performance Group	Supports an integrated approach to finance and performance, consists of Chief Finance Officer, members of management, finance and performance leads.
Clackmannanshire and Stirling Health and Social Care Partnership	One of 31 Health and Social Care Partnerships in Scotland, designed to improve care and support for service users and their families by managing a range of care services previously managed by NHS Boards and Local Councils.
Geographic Information	Any information which can be attached to a location, such as addresses, postcodes, localities, regions etc.
Governance	The way in which organisations ensure things are done according to their policies and frameworks. This can include written procedures about how things should be done and rules about who can make decisions and how.
Granularity	The information which goes to make up a result reported as a performance indicator. In effect it means the ability to breakdown a result into component parts such as location, demographic, time of day/year etc.
IJB	See Integrated Joint Board
Impact	The measured change achieved as a result of doing something.
Improvement Plan	Any plan where the intention is to improve something requiring improvement. These are not restricted to where performance is poor and relate equally to efforts to achieve service excellence.
Indicator	A measure of some kind which can give a good overview of how a function is performing. It does not necessarily cover everything within that function and may not be perfect but is as close as possible to something that allows the performance to be measured over time and compared.
Insight	Anything which leads to better understanding of a situation. Often this involves bringing several strands of information together and putting these into context.
Integrated Data	Where different data is joined together to make it more useful. In practice this is a trade-off between benefits of integrating data and consideration of the complexity of systems and data protection issues such as personal privacy.
Integrated Joint Board (IJB)	The Integrated Joint Board (IJB) is responsible for the strategic planning and operationalisation of the functions delegated to it and for ensuring the delivery of those functions.
Integrated Services	Where service functions link together in such a way to seem as if part of the same service or system. This can often bring greater efficiency and be easier for service users to navigate.
Interventions	In performance management this is where actions are planned to change a performance level, usually to bring it back on target or plan against a risk that has emerged.
Key Activity	An activity which has some priority for monitoring.
Key measures	A metric used to measure how a function is performing, key measures are those deemed to have some level of importance and may be used as Key Performance Indicators or similar.
Key Performance Indicator	One of a set of indicators considered to be the highest priority for monitoring an organisation, part of it or a function.
KPI	See Key Performance Indicator

Term	Description
Levers of Control	These are things which managers can do which will effect change. These may be different things at different times. It comes from the idea that a lever is pulled and something happens.
Lived experience	Information captured from people with direct first-hand experience of something, for instance hearing directly from a service user.
Locality	One of three defined areas of Clackmannanshire and Stirling allowing more localised services to be provided (Clackmannanshire, Rural Stirling & Urban Stirling).
Locality Performance	The performance arrangements to allow us to monitor performance in each of our three Localities, to be set up as part of this framework.
Measures	Any numeric measurement of a function, such as waiting times, numbers of users or anything measurable. While these include Key Performance Measures, they may also be measures not used for performance purposes normally, but which might be looked at in order to understand what is happening to another key measure or they may be an input to a calculation for another measure.
Ministerial Steering Group (MSG)	
Modular approaches	Breaking large systems or functions down into manageable portions or modules.
National Health and Wellbeing Outcome	A set of Scottish Government performance indicators used to monitor health and social care.
Outcome	In performance this is the impact resulting from the work being done in an organisation or part of one. Outcomes do not necessarily directly match the work done. For instance an outcome may be a population with is healthier in some way, but this may be achieved though focus on something non-health sector related (such as quality of housing).
Performance	How well a function is being delivered? Usually measured in some way over time and analysed in a variety of ways including against targets and other organisations delivering similar functions.
Portfolio	One of the highest level organisational structures in Health and Social Care, these are managed by a Head of Service and spans a number of high level services and functions.
Priorities	The things that an organisation identifies it must accomplish even if at the expense of delivering other lower priority activity.
Process Control	The ability to manage a process or function to ensure that consistent, high quality results are produced in an efficient, cost effective way.
Processes	A set of actions which are carried out to achieve something. These actions can be carried out one after the other or more normally, various decisions within the process will change the required actions e.g. when assessing someone for care or treatment, the actions taken next will depend on the assessment.
PSIF	See Public Sector Improvement Framework

Term	Description
Public Sector Improvement Framework	A Quality Management Framework managed by the Scottish Improvement Service which has versions relevant to the HSCP (abbreviated to PSIF).
Quality	Used to define the standard a function is required to operate at or to evidence how the function is doing in relation to these standards.
Quality Management	The way in which everything in an organisation or parts of it are managed to ensure that objectives are achieved efficiently and to a high level (often described as 'excellent'). There are many quality management frameworks which assist in this from whole organisation management to individual functions.
RAG	The red-amber-green traffic light colour coding system for indicators, with red suggesting some action is needed to improve it, amber that there is a risk arising and green is where no issues are apparent.
Run chart	Data displayed in chart form over time, allowing changes over time to be observed and analysed in various ways.
Seasonal Variation	A general term describing variation in results caused by the different seasons, most notably due to the impact of weather and its implications for health and travel, but also can include holiday periods. Weekday, weekend and time of day variations could be viewed as a shorter term version of this.
Self-assessment	A process where an organisation evaluates itself, usually using tools which aid in making sure the results are objective and not accidentally biased.
Self-awareness	The ability of an organisation and the people in it to look at what they do, how they do it and what they achieve in an informed, honest and unbiased way across everything the organisation does.
Senior Leadership Team	The top leadership team of the HSCP comprising Heads of Service and chaired by the Director of the HSCP.
Senior Management & Leadership Team	A senior management team including the Senior Leadership Team and all Service Managers
SLT	See Senior Leadership Team
SMLT	See Senior Management & Leadership Tea
Statistical Analysis	Using mathematical methods to explore and understand data in a way which minimises problems arising from random variation or other factors.
Statutory	Having some form of legal regulation
Strategic Commissioning Plan 2023-2033	A document defining the long term and often broad ranging objectives of an organisation and the outline of the approach it will take to achieve these. In large organisations (such as the HSCP) more detailed supplementary planning will often be required to deliver the strategic plan.
Strategic Planning Group	An advisory group to the Integrated Joint Board. Remit includes the development of the Strategic Commissioning Plan and, identifying and raising issues that may impact its delivery. Members represent professional sector, Localities, people with lived and living experience, carers, third sector and independent sector. This group is open to members of the public.

Term	Description
Supported person	Anyone accessing services and supports either within the HSCP or community. Sometimes this will be expanded to include Service Users and their families where this is appropriate.
Systems	Groups of related functions which are dependent on each other. For instance providing care involves many interlinked functions to deliver, including training of carers, providing the care, paying carers, managing rotas etc. The HSCP itself is a very large system of linked functions.
Targets	A level or standard which has been set and the expectation is that a performance indicator will achieve this. These can be maximum or minimum levels or a band between two values.
Transformation Programmes	Any programme designed to change how we do something in a significant way.
Trend	The change seen in a result over time
Triggers	A set of conditions which are used to start an action. An example may be performance dropping below a target, which would trigger improvement action to occur.
Variation	All measurements are subject to a range of random factors which will influence them over relatively short periods. This can include influences of the weather, seasons, unpredictable events or genuinely random variation. Mathematical (statistics) methods are used to look at the influence of variation on performance measures as required.
Wellbeing	A general term relating to people living the most healthy, happy, comfortable lives possible for them. It can also be used more specifically, such as in mental wellbeing.
Winter Programme	A programme of activity to prepare for winter pressure on services and to manage pressures throughout the winter.
Workforce	The employees of an organisation
Workforce Capacity	The ability of the employees of an organisation to do work, the capacity includes factors such as number of people, the number trained for the job, absence levels and focus on priorities.