Health and Social Care Integration

Guidance for Health and Social Care Integration Partnership Performance Reports
1 What is this Guidance about?

1.1 Integration of health and social care is one of Scotland’s major programmes of reform. *The Public Bodies (Joint Working) (Scotland) Act 2014* ("the 2014 Act") established the legislative framework for the integration of health and social care services in Scotland under either an Integration Joint Board or Lead Agency model. These new bodies have real power to drive change and manage approximately £8 billion of resources jointly that NHS boards and Councils previously managed separately.

1.2 Section 42 of the 2014 Act requires that Performance Reports be prepared by the “Integration Authority”. This term broadly means the person or body which is responsible for the planning and direction of integrated health and social care services. Section 42 of the 2014 Act covers both the Integration Joint Board and Lead Agency model. However, ‘Health and Social Care Partnership’ (or in this context, simply ‘Partnership’) is in more common usage, and is the terminology used throughout this document to refer to the body with responsibility for preparing Performance Reports.

1.3 To ensure that performance is open and accountable, the 2014 Act obliges Partnerships to publish an annual performance report setting out an assessment of performance in planning and carrying out the integration functions for which they are responsible.

1.4 The required content of the performance reports is set out in *The Public Bodies (Joint Working)(Content of Performance Reports)(Scotland) Regulations 2014*. This guidance should be read in conjunction with these regulations, and lays out the minimum expectations on the content of these reports, with particular reference to the reporting of the Core Integration Indicators to support assessment of performance in relation to the National Health and Wellbeing Outcomes.

2 Who is this Guidance for?

2.1 This guidance, is primarily intended for those within Partnerships who will be responsible for the production of Partnerships’ Performance reports. It will be of particular interest to:

- Integration Joint Board Chief Officers
- Planning Performance Leads
- Strategic Commissioning Leads
- Locality Managers/Leads
- Finance Officers (‘Section 95 Officer)
- Communication and Engagement Officers

It will also likely be of interest to all members of Integration Joint Boards, and may also be of interest to a wider range of staff working in Health and Social care, members of the public and other interested commentators.
2.2 By virtue of section 53 of the 2014 Act, a Partnership is required to have regard to this guidance when preparing a performance report.

3 What other Guidance is relevant?

3.1 This guidance should be read alongside the Scottish Government’s guidance on:
- National Health and Wellbeing Outcomes
- Core Suite of Integration Indicators
- Clinical and Care Governance Framework
- Strategic Commissioning Plans
- Financial Assurance
- Localities

4 Legislative Context and Reporting Arrangements

4.1 The 2014 Act obliges all Partnerships to publish a Performance Report covering performance over the reporting year no later than four months after the end of that reporting year. Reporting years begin on 1 April annually. For example, an Performance Report covering the period April 2016 to March 2017 is required to be published no later than the end of July 2017.

4.2 All Partnerships were to be fully operational, by 1 April 2016, and the first year for which Partnerships must report is 2016/17. In practice, many have been operational ahead of 1 April 2016. Where this is the case, a Partnership may wish to consider publishing a report covering the period of establishment until the 1 April 2016, or to include an assessment of performance during this period in their 2016/17 Performance Report. However, this is a decision for the Partnership, and is out with the scope of the legislation.

4.3 Performance Reports are produced for the consideration of the Partnerships themselves, and it is primarily their responsibility to act upon the information and recommendations within them. The 2014 Act requires that copies of each report are provided to certain other parties, depending on the integration model that has been put in place, and that it should be also be published. It is expected that publication will usually involve making the report available to the general public online, and that Partnerships will take due consideration to ensure that these are as accessible as possible.

4.4 Performance reports will be of interest to the Health Board and Local Authorities in measuring the success of the arrangements that they have put in place for integrated health and social care, and in particular in determining whether a review of their integration scheme is required. The Scottish Government’s interest in these reports lies in how it can inform evidence at a
national, strategic level on the effectiveness of health and social integration policy and how to drive and support improvement.

Layout of Reports

4.5 It is for Partnerships to decide the layout of their own Performance reports. The Scottish Government does not intend to restrict how this reporting should take place, nor provide a standardised template for the report which Partnerships must use, other than for a brief annex to reports to ensure that National Indicator data is presented consistently, and which will be covered later in this guidance.

4.6 However, as part of the Scottish Government’s on-going engagement with Partnerships, support will be offered for the development of reports as necessary, such as providing optional model templates, workshops, sharing of best practice, etc.

5 Content of Reports

Assessing Performance in Relation to the National Health and Wellbeing Outcomes

5.1 The Performance Report Regulations require Partnerships to assess their performance in relation to the National Health and Wellbeing Outcomes. These outcomes are set out in the Public Bodies (Joint Working) (National Health and Wellbeing Outcomes) (Scotland) Regulations 2014 and provide a strategic framework for the planning and delivery of health and social care services. They focus on the experiences and quality of services for people using those services, carers and their families, and more information can be found in the National Health and Wellbeing Outcomes Guidance.

5.2 Performance must be assessed in the context of the arrangements set out in a Partnerships’ strategic plan and financial statement, in the context of key indicators for these outcomes and, where applicable, in the context of how significant decisions made by the Partnership over the course of the reporting year have contributed towards progress towards the outcomes.

5.3 To support this, a set of core integration indicators have been developed in consultation with a wide range of stakeholders across all sectors, and with significant input from COSLA, and have been agreed by the Ministerial Strategic Group for Health and Community Care. Partnerships should report against these core indicators in their Performance Reports. In line with the Performance Report Regulations, data should be included for both the year which the report covers, and the 5 preceding years, or for all previous reporting years if this is less than 5 years.

5.4 Separate guidance is available summarising the rationale behind each of the indicators, their definition and data sources. Although many of these indicators use data which is already available from a variety of sources, Information Services Division (ISD) will provide each Partnership with their data for all the
indicators in a single spread sheet in order to facilitate consistency and clarity around the core indicators.

5.5 As with the rest of the Performance Report, Partnerships are expected to report these indicators in a way that best suits their own local needs and that of the public in terms of understanding what they say about local progress towards the national outcomes, with support provided as necessary by ISD and the Scottish Government.

5.6 Partnerships should set out the indicators’ data in a standardised template as an annex to their main report. This template can be found in Annex A and simply lays out the data in a standard way to facilitate understanding of data between Partnerships. Partnerships should use the main body of the report to set out the context in which these data should be interpreted, and what they say about local performance in a way which best suits their own requirements. [DN – we are exploring whether an alternative approach to publishing this data in a nationally consistent way may be possible, and if this is adopted then this requirement may be removed]

5.7 The core integration indicators provide an indication of progress towards the outcomes that can be compared across Partnerships and described at Scotland level and over the longer term. In addition, Partnerships will need to collect and understand a wide range of data and feedback to help understand the system at local level, and report on these within their Performance reports.

5.8 As well as covering performance at Partnership level, where appropriate, they may also wish to consider reporting on the performance for each locality in the Partnership, and how performance in localities contributes towards the performance of the Partnership as a whole. To facilitate this, locality data will be provided by ISD along with Partnership data where possible. More information on localities is covered later in this document.

5.9 Again, a wide range of support is available from both ISD and the Scottish Government, but ultimately it is for Partnerships to decide what these local measures should be and how they should be presented and interpreted.

Financial Performance and Best Value

5.10 The Performance Reporting Regulations require Partnerships to include information on their financial performance, for the reporting year and by comparison with the 5 preceding years, or with all previous reporting years if this is less than 5 years.

5.11 This must include not only the total amount spent by the Partnership in the course of the year, but also the total amount and proportion of spend in the reporting year broken down by the various services to which the money was allocated. It should also identify whether there has been an under or overspend against the planned spending for the year and, if this is the case, an assessment as to why this occurred.
5.12 The report must also set out the amount paid to, or set aside for use by, each locality. Information on the proportion of money spent on particular services, and on any underspends or overspends within the Partnership, must be provided both for the reporting year and the 5 preceding years, or for all years for which the information is available if this is less than 5 years.

5.13 The report must also assess whether the best value has been achieved in terms of the planning and delivery of services. This should include, where applicable, identification of whether there were opportunities for further efficiencies which could have been made in order to deliver the same outcomes at a reduced cost. For more information, Partnerships are referred to the Scottish Government’s statutory Best Value Guidance for Local Authorities.

5.14 The Scottish Government has also issued Finance Guidance for Health and Social Care Integration and Integration Financial Assurance which Partnerships will wish to consider when preparing this section of the report.

**Reporting on Localities**

5.15 The 2014 Act requires a Partnership’s strategic plan to specify two or more localities within its area. A locality is a smaller area within the borders of an Partnership the purpose of which is to provide an organisational mechanism for local leadership of service planning, to be fed upwards into the Partnership’s strategic commissioning plan. More information on Localities can be found in the relevant guidance document.

5.16 The Performance Report Regulations require that each performance report includes a description of the arrangements made in relation to consulting and involving localities, an assessment of how these arrangements have contributed to the provision of services and the proportion of the Partnership’s total budget that was spent in relation to each locality.

5.17 In line with the Performance Report Regulations, a comparison of the proportion of spend should be included for both the year which the report covers, and the 5 preceding years, or for all previous reporting years, if this is less than 5 years.

**Inspection of Services**

5.18 The Performance Reporting Regulations require the performance report to include details of any inspections carried out relating to the functions delegated to the Partnership, by any of the following scrutiny bodies, including joint inspections, in the course of the year:

- Healthcare Improvement Scotland
- Social Care and Social Work Improvement Scotland (The Care Inspectorate)
- Audit Scotland
- Accounts Commission
5.19 This must include any recommendation which the body has made alongside the actions taken by the Partnership to implement the recommendation.

*Integration Joint Monitoring Committee Recommendations*

5.20 For Partnerships who have adopted a lead agency model, should the Integration Joint Monitoring Committee have made any recommendations in the course of the year as to how integration functions should be carried out, then the Performance report must include a list of these, and how the Partnership is responding to each recommendation.

*Review of Strategic Plan*

5.21 Should the Partnership decide to review its Strategic Plan during the reporting year, the Performance report must include a statement as to why the review was carried out, whether this resulted in any changes to the plan, and if changes were made, a description of what these were.

6  Summary

1.1 These Performance reports are key to ensuring Partnerships and their local communities are clear on how health and social care integration is performing, and therefore it is the intention of this guidance to give as much flexibility as possible in the content and format of the reports whilst ensuring that the minimum requirements are met, as set out in the regulations.

1.2 Partnerships are expected and encouraged to include additional relevant information beyond the minimum set out here in order to build as full and accurate an assessment as possible as to how the integration of health and social care is delivering for people and communities, and be presented in a way that is clear for non-experts. The Scottish Government will continue to offer a wide range of support for Partnerships in order to develop an Performance Report which best suits their own local needs.
## Standard Template Annex for National Indicator Data for Partnership Performance Reports

### Annex A

<table>
<thead>
<tr>
<th>National Indicators 1 to 10</th>
<th>2011/12</th>
<th>2012/13</th>
<th>2013/14</th>
<th>2014/15</th>
<th>2015/16</th>
<th>2016/17</th>
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<tbody>
<tr>
<td>NI - 1 Percentage of adults able to look after their health very well or quite well</td>
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<td>NI - 2 Percentage of adults supported at home who agreed that they are supported to live as independently as possible</td>
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<td>NI - 3 Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided</td>
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<td>NI - 4 Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated</td>
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<td>NI - 5 Total % of adults receiving any care or support who rated it as excellent or good</td>
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<td>NI - 6 Percentage of people with positive experience of the care provided by their GP practice</td>
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<td>NI - 7 Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life</td>
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<td>NI - 8 Total combined % carers who feel supported to continue in their caring role</td>
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<td>NI - 9 Percentage of adults supported at home who agreed they felt safe</td>
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<td>NI - 10 Percentage of staff who say they would recommend their workplace as a good place to work</td>
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<td>NI - 11 Premature mortality rate per 100,000 persons</td>
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<td>NI - 12 Emergency admission rate (per 100,000 population)</td>
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<td>NI - 13 Emergency bed day rate (per 100,000 population)</td>
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<td>NI - 14 Readmission to hospital within 28 days (per 1,000 population)</td>
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<td>NI - 15 Proportion of last 6 months of life spent at home or in a community setting</td>
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<td>NI - 16 Falls rate per 1,000 population aged 65+</td>
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<td>NI - 17 Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections</td>
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<td>NI - 18 Percentage of adults with intensive care needs receiving care at home</td>
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<td>NI - 19 Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)</td>
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<td>NI - 20 Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency</td>
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<td>NI - 21 Percentage of people admitted to hospital from home during the year, who are discharged to a care home</td>
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<td>NI - 22 Percentage of people who are discharged from hospital within 72 hours of being ready</td>
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<td>NI - 23 Expenditure on end of life care, cost in last 6 months per death</td>
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