

Date of Meeting	29 October 2019
Report Title	Performance Dashboard
Report Number	HSCP.19.057
Lead Officer	Sandra Ross, Chief Officer
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Consultation Checklist Completed	Yes
Directions Required	No
Appendices	N/A

1. Purpose of the Report

1.1. The purpose of this report is to present the latest draft of the Performance Dashboard that is linked to the current IJB Strategic Plan.

2. Recommendations

- **2.1.** It is recommended that the Audit and Performance Systems Committee:
 - a) Review the draft Performance Dashboard.
 - b) Provide verbal feedback and comment to the Lead Strategy and Performance Manager to inform further development of the Dashboard.
 - c) Instruct the Lead Strategy and Performance Manager on the format and frequency of the committee's future performance reporting requirements and how this might align to performance information reported to the Clinical and Care Governance Committee.







3. Summary of Key Information

- **3.1.** The IJB approved the Strategic Plan for 2019 to 2022 at its meeting in March 2019. The plan contains five Strategic Aims and a suite of performance measures was provided for each.
- 3.2. In order to facilitate collation of the performance data, a master spreadsheet was created which captures the source, the frequency of reporting, whether trend or benchmarking data is available and where this is currently reported to. This spreadsheet enables us to track what information is available and where the gaps are. It also provides assurance as to the quality and accuracy of the data. The spreadsheet can be made available for the committee to view should this be required.
- **3.3.** The Chief Officer of Aberdeen City Health and Social Care Partnership has responsibility for the delivery of the Strategic Plan and uses these performance measures as part of her ongoing performance review meetings with the Chief Executives of Aberdeen City Council and NHS Grampian.
- **3.4.** Initially these measures were depicted in excel spreadsheet format showing current data and data covering previous periods in order that progress could be demonstrated, and areas of concern identified. There is a lot of data and the spreadsheet was busy and difficult to read.
- 3.5. In conjunction with colleagues from NHS Grampian Health Intelligence, a Performance Dashboard has been compiled using the Tableau software which provides a much more visual and easier to read version of the same data.
- 3.6. A demonstration of the Dashboard will be provided at the October meeting of the Audit and Performance Systems Committee and the November meeting of the Clinical and Care Governance Committee with the opportunity for committee members to make comment both on the visual appeal of this and of the content.
- **3.7.** Following feedback, further development of the Dashboard will take place and subsequent versions will be presented to future meetings of both committees as part of the iterative development process.
- **3.8.** It should be noted that data is not yet available for all of the performance measures and these are indicated in grey on the Performance Dashboard. Work is ongoing to address this. It is also our intention to add data from our







commissioned services to our performance dashboard and discussions are ongoing as to the mechanisms for achieving this. It is difficult to put a timescale on when the missing information will be available but regular updates will be provided to the committee on progress.

- **3.9.** In addition, some of the data that is available is only reported on an annual or bi-annual basis, so committee members will not necessarily be able to track performance between meetings. The annual version of the Dashboard will be used to inform the 2019/20 Annual Report.
- 3.10. The original intention had been to share consideration of performance against the five Strategic Aims between the two committees however it is proposed that both committees may wish to re-consider that approach in light of the information now presented. There is the possibility that each member of the IJB and both Committees could have direct access to Tableau and to the reports relevant to them. The Lead Strategy and Performance Manager would be grateful for instruction as to how the committees would wish to receive performance information in future.
- **3.11.** In addition to the Chief Officer having a Performance Dashboard, work is ongoing to develop Dashboards for each member of the Leadership Team depicting progress against their objectives. These will be used at the quarterly performance meetings with the Chief Officer.
- 4. Implications for Audit and Performance Systems
- **4.1.** Equalities this report has no direct implications in relation to equalities.
- **4.2.** Fairer Scotland Duty this report has no direct implications in relation to the Fairer Scotland Duty.
- **4.3.** Financial there are no direct financial implications arising from the recommendations of this report.
- **4.4.** Workforce there are no direct workforce implications arising from the recommendations of this report.
- **4.5.** Legal there are no direct legal implications arising from the recommendations in this report.
- **4.6.** Other none.







- 5. Links to ACHSCP Strategic Plan
- **5.1.** The Performance Dashboard demonstrates progress made against the five Strategic Aims within the Strategic Plan.
- 6. Management of Risk
- 6.1. Identified risks(s)

If we do not monitor and report on our performance there is a risk that the services we are delivering are not of the best quality and that we miss opportunities to improve.

6.2. Link to risks on strategic or operational risk register:

This report links to strategic risk 5. - There is a risk that the IJB, and the services that it directs and has operational oversight of, fail to meet both performance standards/outcomes as set by regulatory bodies and those locally determined performance standards as set by the board itself. This may result in harm or risk of harm to people.

6.3. How might the content of this report impact or mitigate these risks:

The report gives assurance on the areas where we are performing well and highlights areas where performance could be improved allowing remedial activity to be employed where required.



