NHS Board 30 August 2023



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SUBJECT: INTEGRATED PERFORMANCE & QUALITY REPORT (IPQR)

1. PURPOSE			
This paper is coming to	the NHS Board		
For approval	For Assurance	For Noting	
2. ROUTE TO T	HE NHS BOARD		
This paper has been:			
Prepared	Reviewed	Endorsed	

by the IPQR Editorial Board.

DIIDDACE

3. **SUMMARY OF KEY ISSUES**

The attached Integrated Performance & Quality Report will be the main corporate reporting tool for the NHS Lanarkshire Board, and this is the first of the monthly reports that will be prepared and circulated to all Board Members.

Reporting on key performance metrics, in a consistent and meaningful way, is one of the key facets of any high performing organisation. The development of this IPQR is in line with the aspirations of the Board in relation to Active Governance.

In the past a suite of different reports, covering different metrics and timescales, some with targets, some with trajectories, and some containing a mixture of both, or neither have sought to provide assurance to the Board and the Governance Committees. Different reports were presented to the Board than those presented to the Governance Committees, and it was difficult to derive assurance across a suite of agreed high level Board indicators. There was also a high degree of duplication.

In Spring 2023, it was decided to review how other Boards were addressing this and it was concluded that NHS Lanarkshire needed to replicate processes already well embedded in other Boards, many of which took the form of an Integrated Performance & Quality Report.

In June 2023, Non-Executive Board Members were able to review a first draft template of the NHS Lanarkshire IPQR, drawn up by the Board Secretary as a proof of concept, and welcomed its development.

An Editorial Board was established to take this on to a more robust platform and this was led by the Director of Planning, Property and Performance, Colin Lauder. Co-ordination of the production of the report was passed to the Director of Communications. The Editorial Board has met weekly since the beginning of July and has endorsed this first live version of the IPQR. This has been a heavily manually derived process, and this is likely to be the case for several more months. This will continue to pose a challenge in compiling report until we reach a business as usual production model.

The most up to date data available at the point of publishing the document has been the guiding principle for the Editorial Board, and validated data has been used where this is available. However, there are significant time lags in waiting for data to be nationally validated and it was agreed at the Non-Executive briefing in June 2023, and endorsed by the Chief Executive, that management (unvalidated) data could be used as long as this was clearly marked and acknowledged in the report. This is in keeping with the approach adopted by a number of other NHS Boards.

The Editorial Board are continuing to refine the publication process to ensure that the report is available as early as possible, and synchronised with the Governance Committee cycle. This may mean that in the case of the remaining Committee dates in 2023, the dates of meetings may not lend themselves to a smooth assurance pathway, but the calendar for 2024 is being reviewed to ensure that Committees can provide that assurance to the Board, as timeously as possible.

Further work is ongoing to streamline the process of gathering information to update the documents, so that this is as automated as possible, and regarded as business as usual. Once this process has been streamlined, and agreed, a separate map of the pathways to Governance Committees will be published to synchronise reports to the Board for the purposes of assurance.

The IPQR will replace the 4 separate performance reports previously provided to the Board and PPRC from the Acute Division, and North, and South Health & Social Care Partnerships, and the quarterly Corporate Performance report which provided an overview of the whole system.

Governance Committees will be encouraged to review their own specific section of the report, but these can be supplemented by other local reports as determined by the Committees themselves. The absence of any topic in the IPQR does not preclude the Governance Committee from examining any aspect of the work of the Board in line with their terms of reference.

A summary of the Corporate Risks has been included in this report. Risks are aligned to Strategic Priorities and linked to relevant indicators throughout the report. Risk level has been incorporated into the Assessment section. Bespoke Risk Reports are, and will continue to be, provided to Governance Committees as a separate agenda item.

The intention is to minimise turbulence at the beginning of this process and not allow for significant changes to be made to the contents list of the attached IPQR for at least the first 6

months. This will allow for processes to be refined, automated wherever possible, and embedded as business as usual. A full review will be undertaken in the early part of 2024 with the intention of making recommendations for changes to be incorporated from 1 April 2024.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	ADP	Government policy	
Government directive	Statutory requirement	AHF/local policy	
Urgent operational issue	Other		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	
People are able to live well at home or in the community; (Person Centred)	
Everyone has a positive experience of healthcare; (Person Centred)	
Staff feel supported and engaged; (Effective)	
Healthcare is safe for every person, every time; (Safe)	
Best use is made of available resources. (Effective)	

6. MEASURES FOR IMPROVEMENT

The IPQR contains quality measures.

7. FINANCIAL IMPLICATIONS

Financial reporting is covered in the specific section of the IPQR.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

A mapping of key Corporate Risks to measures within the IPQR is provided via a Risk Summary and in the Indicator Table.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership		Effective partnerships		Governance accountability	and	
Use of resources		Performance		Equality		\neg
Use of fesources	ш		ш	Equanty		ш
		management				

Sustainability						
10. EQUA		TY AND DIVERSITY /	' FAIRER	SCOTLAND	DUTY IMP	ACT
Has an E&D /	/FSI	O Impact Assessment has be	een comple	ted?		
Yes						
11. CONS	SUL	TATION AND ENGAGE	EMENT			
Corporate Mar	nage	of the IPQR has been subsement Team, Non-Executiven forward by an Editorial l	e Board M	embers at a briefi	ing session he	
12. ACTIO	ONS	S FOR THE NHS BOAR	D			
The NHS Boa	rd a	re asked to:				
Approve		Gain Assuranc	e	Note		
	1.	Note the development of data available (June and Jul		QR containing th	e most up to	date
	2.	Note that this document Committees scheduled to r		-	oming Govern	iance
	3.	Note the use of management data to ensure that the report is as up t date as possible;				
	4. Note that in the coming months the process of gathering the data and narrative will continue to be reliant on manual processes;					and
	5.	5. Note that the Editorial Board is continuing to meet weekly to streamline production processes to ensure that this is regarded in the coming months as a business as usual feature of the work of the Corporate Directors;				
	6.	Note the intention to revie	w the conte	ents list in early 20)24.	
13. FURT	HE	R INFORMATION				
For further inf	orm	ation about any aspect of th	nis paper, pl	ease contact;		
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