

# Leeds Health & Wellbeing Board

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**Report of:** Chief Officer, Health Partnerships

**Report to:** Leeds Health & Wellbeing Board

**Date:** 24 July 2013

**Subject:** A Framework to Measure Progress

Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

## Summary of main issues

This report sets out a proposed Framework to measure progress for the Joint Health and Wellbeing Strategy (JHWS), enabling the Board to assess progress against the outcomes within the strategy, and providing assurance that delivery mechanisms are in place to make a difference to the health of the people of Leeds. It covers aspects of performance and delivery yet to be programmed into the Board's schedule, such as the format and frequency of reporting against the 22 indicators within the JHWS.

## Recommendations

The Health and Wellbeing Board is asked to:

- Discuss and agree the proposed Framework to measure progress
- Discuss and commit to the resource and partnership implications of this report, including an agreement on the proposed frequency of Performance and Delivery Reports.

## **1 Purpose of this report**

- 1.1 To set out a proposed Framework to measure progress for the Joint Health and Wellbeing Strategy (JHWS).
- 1.2 To enable Board members to discuss performance reporting in its broadest sense, shaping how our strategic direction is converted into action to improve service delivery and outcomes for children, young people, adults and communities.
- 1.3 To agree some key operational recommendations around the frequency of the Performance and Delivery Report.

## **2 Background information**

- 2.1 The Joint Health and Wellbeing Strategy (JHWS) sets a challenge for the Board to focus on five health and wellbeing outcomes for the city of Leeds, with corresponding priorities and indicators chosen to help concentrate the collective efforts of partners and inform the Board of progress. Given the high strategic importance of the JHWS, it is essential an effective and detailed mechanism is in place not simply to measure performance against the indicators, but more broadly to enable to Board and partners to make progress on delivering the strategy.
- 2.2 Whilst the Board has agreed that at each meeting in 2013/14 they will receive a report focussed on consecutive outcomes (cf. Outcome 1 report on today's agenda), other aspects of performance and delivery are yet to be programmed into the Board's schedule; for example:
  - Regular reporting against the 22 indicators
  - Details of on-going work on the four short to medium-term 'commitments'
  - The process for 'exception' reports to be raised
  - Monitoring of other related scorecards, for example the Children's Trust.

This paper sets out a proposal for the Framework to measure progress which will be used to provide coherence for future performance and delivery information given to the Board.

## **3 Main issues**

- 3.1 The framework presented in Appendix 1 is the proposed Health and Wellbeing Board Framework to measure progress, set out as a 'balanced scorecard' manner. It pulls together the strands of performance work for the Board that are already ongoing, and corrals them into an holistic system to present to the Board (and public) a coherent way of demonstrating how we are making a difference to the citizens of Leeds through the JHWS.
- 3.2 OBA methodology would suggest that to truly make the link between data and delivery, a 'balanced scorecard' approach is needed where decision makers regularly receive information on 1) the overall picture, 2) detailed data (lag and

lead indicators), 3) exceptions (sudden changes in data), and 4) resources committed to the key commitments. Given this, the Framework to measure progress is composed of four key sections:

**Overview:** A single A4 sheet scorecard of 22 x JHWS indicators, with current position, trend, breakdown between CCG area and Leeds deprived data, benchmarked against national figures.

**Outcome focus:** A narrative 'deep-dive' report on aspects of one outcome, locally produced by a 'priority lead'. This will contain extra data to give Board members a full picture, but emphasise narrative around actions and delivery rather than statistics, using the OBA questions 'How much did we do?', 'How well did we do it?' And 'What difference did it make?'

**Exceptions:** A space for reporting extra details on any significant deterioration in performance on one of the 22 indicators

**Commitments:** A section on our four commitments, using delivery templates filled in by services and including relevant other scorecards e.g. from the Children's Trust.

- 3.3 Much of this work draws on ongoing work in health performance management across the system, and the aim of the collaborative production of the Framework to measure progress has been to corral this together into a robust structure in which both the 'big picture' of health outcomes in Leeds and the details of delivery on the ground can be presented. Given the strategic importance of the Health and Wellbeing Board, it is important to invest sufficient resource and thought into making the link between *strategy* and *delivery* very obvious, and to bringing before the board the right level of information to enable productive discussion.
- 3.4 It is recommended that this framework generates a Performance and Delivery Report that is submitted to the Board at every meeting.
- 3.5 The material for the first section (Overview) will be collated onto a single sheet 'scorecard' from existing data sources within the partnership. This is attached as Appendix 2 to this report. The Board should be advised that much of the data behind the 22 indicators are collected less frequently than its bi-monthly meetings, and in many cases the 22 indicators are only updated annually; the expectation of the Board should be that this scorecard will always contain the most up-to-date data available, but some items will sometimes remained unchanged between boards and even over fairly long periods. Of course if the Board requires additional or more frequent data it can choose to commission it.
- 3.6 The material for the second section (Outcome Focus) will be produced each time by the priority leads (cf. Outcome 1 report on today's agenda). The material for the third section (Exceptions) will be generated as and when performance issues arise. The material for the fourth section is also being collected on an ongoing basis, and draws from a number of existing sources.

3.7 From time to time Board members may also wish to discuss one of the indicators in more detail, either because of circumstances known to them or because the data shows an apparent deterioration. Therefore the following two mechanisms are proposed:

**1) Exception raised by significant deterioration in one of the 22 indicators**

New data received by performance report author shows significant deterioration in performance

↳ 'Priority lead' is contacted and informed of the intention to add a red flag to the indicator.

↳ 'Priority lead' either: a) submits a verbal update to the immediate board meeting; or b) prepares additional information/report to a subsequent meeting.

**2) Exception raised by a member of the board**

Member of the board raises a concern around any significant performance issue relating to the JHWS to the chair of the Board in writing

↳ 'Priority lead' is contacted and asked to provide assurance to the Board on the issue

↳ 'Priority lead' either: a) submits a verbal update to the immediate board meeting; or b) prepares additional information/report to a subsequent meeting.

**4 Health and Wellbeing Board Governance**

**4.1 Consultation and Engagement**

4.1.1 The JHWS was the subject of rigorous consultation and engagement process, and as such the mechanisms to monitor performance against the strategy roll out of work already achieved to bring partners together around shared objectives. This Framework to measure progress has been drawn up through consultative work between officers from Adult Social Care, Childrens Services, the three CCGs and Public Health.

**4.2 Equality and Diversity / Cohesion and Integration**

4.2.1 There are no specific Equality and Diversity / Cohesion and Integration implications of this report.

**4.3 Resources and value for money**

4.3.1 Regular repeating will enable to Board to style how the city makes the “best use of collective services” and spends the Leeds Pound wisely.

4.3.2 Board members are advised that regular production of this Performance and Delivery Report will rely on resources supplied from a number of organisations,

and commitment is sought to supply necessary officer time and data as and when required.

#### **4.4 Legal Implications, Access to Information and Call In**

4.4.1 There are no direct legal implications of this report. There is no confidential information of implications regarding access to information. It is subject to call-in.

#### **4.5 Risk Management**

4.5.1 There are a number of risks identified on the basis of this report:

- Failure to appropriately and fully monitor the performance of the 22 indicators chosen in the JHWS, together with their related delivery strategies, would mean the Board was unable to effectively know whether it is meeting its statutory duty to 'advance the health and wellbeing of the people in its area'.
- Failure to provide the appropriate challenge to commissioners and providers in the city through a lack of understanding of performance issues would undermine the ability of the board to deliver the JHWS.
- Lack of clarity around the arrangements for the frequency of performance reporting, exception mechanisms and resources required for data production would hamper the Board's efforts to promote effective partnership working and integration.

### **5 Conclusions**

5.1 The Framework to measure progress, implemented well, could act as an effective enabler for the JHWS strategy, using established data sources and OBA methodology to communicate to partners and public that the commitment to deliver improve health and wellbeing for the population of Leeds is being given appropriate attention.

### **6 Recommendations**

6.1 The Health and Wellbeing Board is asked to:

- Discuss and agree the proposed Framework to measure progress;
- Discuss and commit to the resource and partnership implications of this report, including an agreement on the proposed frequency of Performance and Delivery Reports.