

Meeting:	Grampian NHS Board
Meeting date:	12 th December 2024
Item Number:	9
Title:	How Are We Doing Board Performance Report (Q2 FY2024/25)
Responsible Executive/Non-Executive:	Alex Stephen, Director of Finance
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1 Purpose

This is presented to the Board for:

- **Assurance**

The Board is asked to:

- **Approve** the progress on Quarter 2 performance reporting (FY2024/25).
- **Review** the HAWD Board Performance Report (Q2 FY2024/25) and **evaluate** whether the performance data and insights enhances clarity and strengthens performance assurance.
- **Decide** if the "Key Organisational Enablers" section adds value and impact by effectively highlighting functions that support system-wide performance and align with the "Plan for the Future."
- **Recognise** ongoing performance risks and mitigate actions supporting Deliverable and KPI achievement, maintaining progress toward year-end goals.

This report relates to

- progress against NHS Grampian Strategy: Plan for the Future
- Board Annual Delivery Plan (ADP) 2024 - 2025

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

2 Report summary

2.1 Situation:

In Quarter 2 (Jul'24 to Sept'24) of performance reporting on the Annual Delivery Plan, a mixed picture of progress has emerged across 100 Deliverables and 38 Key Performance Indicators (KPIs). A total of 94 Deliverables missed their Q2 milestone targets, posing challenges to achieving FY2024/25 overall Deliverables as the financial year-end approaches. Similarly, 50% of KPIs (19 out of 38) are rated Red this quarter, with 55% showing a decline in performance and 40% improvement compared to the previous quarter.

The system continues to face interconnected challenges, including financial constraints, workforce pressures, and infrastructure and digital limitations. These issues are widely felt across teams and are impacting both short-term achievements and the longer-term trajectory toward NHS Grampian's 2027 Outcomes.

Efforts to align in-year performance with strategic goals are ongoing, but further work is needed to strengthen the connection between Deliverables, KPIs, and 2027 Outcomes. Doing so remains key to ensuring that the impact of our current efforts lead to measurable and meaningful progress.

To support this, the HAWD Board Performance Report format has been refined to strengthen strategic alignment by clearly linking in-year KPIs, Annual Delivery Plan Deliverables, and the 45 Outcomes in NHS Grampian's Plan for the Future. Tier 1, Tier 2 and Tier 3 sections now better illustrate these connections and the presentation of qualitative insights alongside quantitative data.

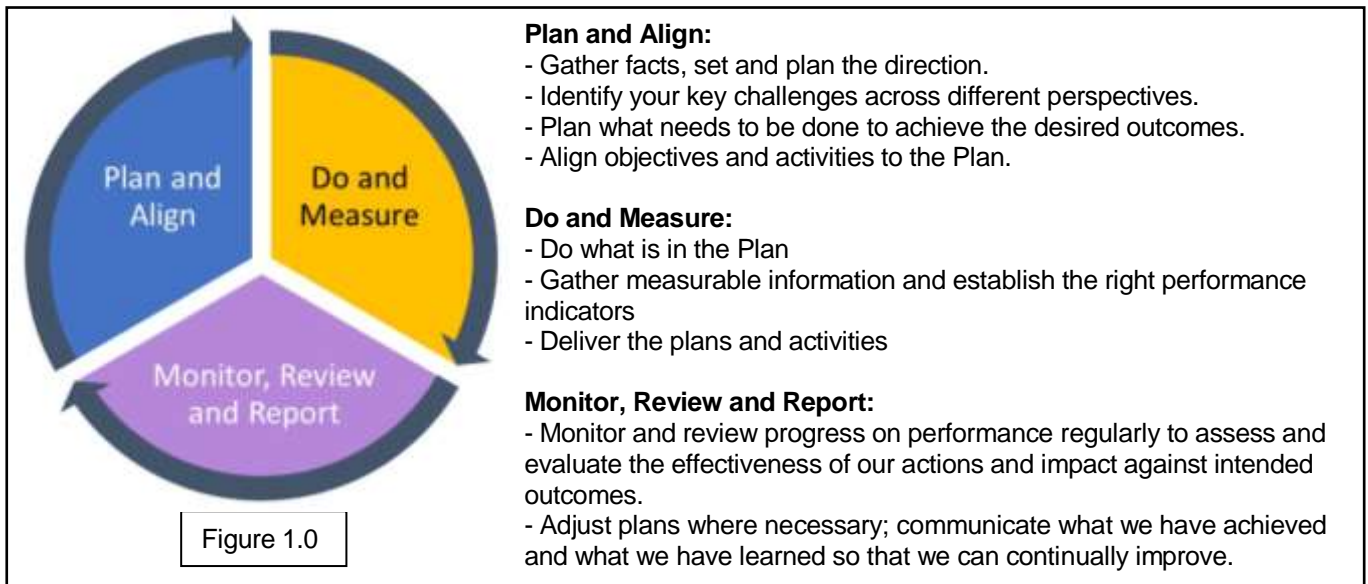
Spotlights have been revised as part of a transitional phase to enhance performance assurance reporting incorporating feedback from Board members and the Performance Assurance, Finance, and Infrastructure Committee (PAFIC).

The HAWD Board Performance Report will introduce a new section titled "Key Organisational Enablers." This section highlights and raises the profile of critical functions within our system that support and enable the achievement of Deliverables and KPIs, driving our ambition to deliver the *Plan for the Future*. This addition provides a broader view of performance interdependencies beyond the Annual Delivery Plan. The first focus area selected for this section is Digital.

2.2 Enhancements in the HAWD Board Performance Report and practice of the Integrated Performance Assurance and Reporting Framework (IPARF)

The enhancements in the latest version of the HAWD Board Performance Report continue to provide a comprehensive assessment of our performance. It enables the Board to focus on progress against the Plan for the Future strategy, challenge assumptions, and seek assurance on performance delivery. Efforts are underway to embed the principles and practices of the Integrated Performance Assurance and Reporting Framework (IPARF), as shown in Figure 1.0 approved by PAFIC and endorsed by the Board. The IPARF supports the delivery of strategic objectives and integrates performance management into

organisational processes and decision-making. The HAWD Board Performance Report reflects these principles, reinforcing their adoption as a core part of performance assurance at the Board level.



This involves a set of Key Performance Indicators (KPIs) and Deliverables in the ADP to achieve our strategic outcomes. The report provides evidence of appropriate actions being taken and highlights areas needing new actions, using spotlight reports to give background and context to performance data.

Key Performance Indicator (KPI):

A KPI is a carefully selected metric, directly linked to our strategic objectives and indicative of overall performance. KPIs are chosen to provide actionable insights into the progress and success of specific goals and objectives, and help assess performance and drive decision-making.

An example KPI: Sickness absence rate for NHS Grampian to be 5% or below

Deliverables:

A key deliverable is an outcome of a task or project activities taking place. Typically outlined at the outset, key deliverables are quantifiable and linked to quarterly milestones for monitoring progress. Milestones serve as markers in time to track and measure progress.

An example Deliverable: Develop Quarterly Emissions and Energy use reduction plan.

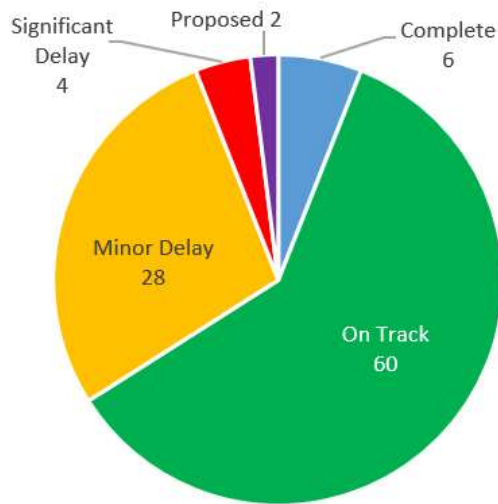
Performance on the progress of 100 deliverables for Quarter 2 was reported and assured by PAFIC on 27th November 2024. Full details are available upon request.

Further definitions and performance assessment criteria are available on page 4 of the HAWD Board Performance Report to enhance navigation and clarity.

2.3 Assessment:

a) Deliverables and KPIs

The assessment below describes the breakdown of our ADP performance in Quarter 2 for KPIs and Deliverables. Performance of 100 Deliverables at Quarter 2 milestone:



6 deliverables are reported as Complete, indicating they have met their Quarter 2 milestone.

94 deliverables were not reported as Complete in Quarter 2 with:

- 60 deliverables (On Track)
- 28 deliverables (Minor Delay)
- 4 deliverables (Significant Delay)
- 2 deliverables (remained at Proposed stage since Quarter 1)

An extracted example of an overall 2024/25 Deliverable and its quarterly milestone targets in the ADP:

2024/25 Deliverables Our focus over this financial year is to achieve:	Q1 Milestone (Apr'24 to Jun'24)	Q2 Milestone (July'24 to Sept'24)	Q3 Milestone (Oct'24 to Dec'24)	Q4 Milestone (Jan'25 to Mar'25)	By 31 st Mar'25, have we achieved our overall 2024/25 Deliverable?
Develop a core dataset required to support the meaningful planning, evaluation and reporting of anchors activity.	Review of tools to support baselining in each of the anchors pillars.	Baselining for two of the three anchors pillars completed.	Baselining for all of the anchors pillars completed. Review of available tools for monitoring and evaluation.	Core dataset for monitoring and evaluation agreed by Anchors Strategic Group.	Yes/ No?

As highlighted above, there are quarterly milestone targets that support the progressive success of achieving the actual 2024/25 Deliverable. Failure to achieve quarterly milestones could lead to a backlog of actions, potentially threatening the achievement of the next quarter's targets unless immediate intervention is implemented to address the current performance situation. For Quarter 2, below shows our current breakdown of performance of 38 KPIs across People, Places and Pathways that are rated as Red that have performed outwith the standard/target by more than 5%.




Places	People*	Pathways	Total KPIs (38)
6	5	8	19 (50%)
3	2	0	5 (13%)
6	3	4	13 (34%)

*Actual Q2 figure not available for **KPI: Reduce time to hire in support of addressing workforce shortages**. This is due to issues with data and JobTrain is currently addressing

this and providing historical data to support re-reporting of this KPI.

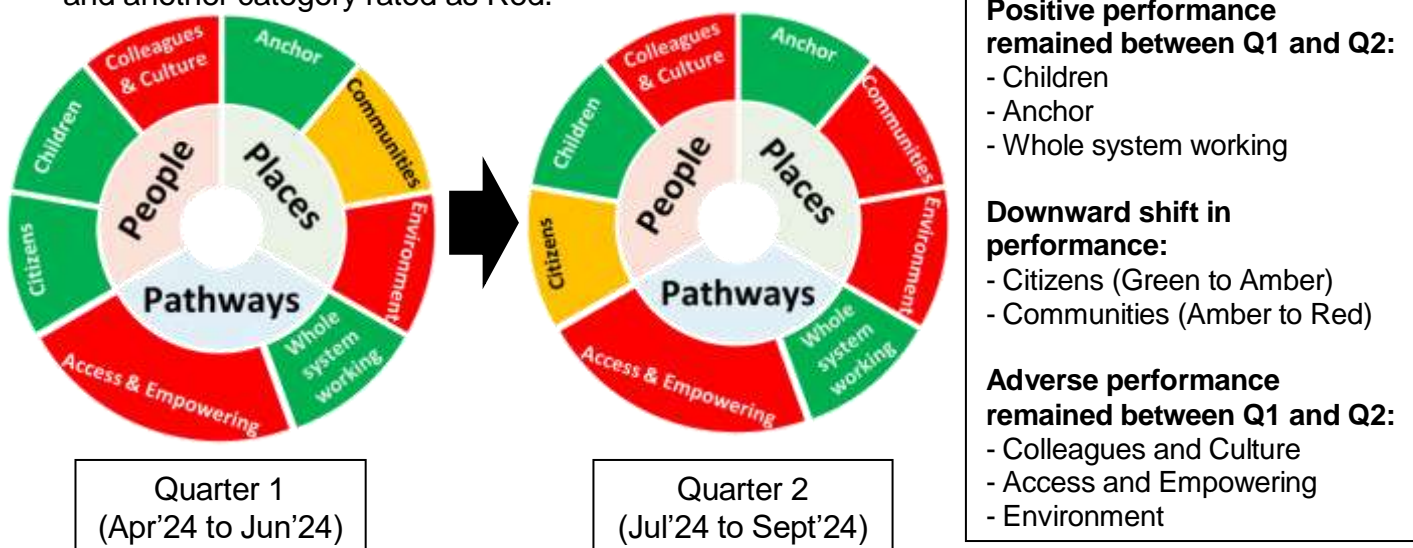
b) Circle Markers

From the circle marker assessment, we can see that 21 of the KPIs have shown a decline in performance, with 15 KPIs showing an improvement from the previous quarter and 2 KPIs showing no change between quarters. Analysis using the circle markers to monitor performance will be useful in capturing early warnings to ensure we make improvements or maintain improved performance in meeting our targets.

Marker	Direction of performance	Places	People	Pathways	Total KPIs (38)
	Declining	5	8	8	21 (55%)
	Improvement	6	5	4	15 (40%)
	No change	1	1	0	2 (5%)

c) Impact across 8 strategic intent categories

The performance of our KPIs have a knock-on impact across the 8 strategic intent categories on the performance wheel. For Quarter 2, we have one less intent category rated as Green and another category rated as Red.



The main KPI contributors below triggered a changed in status of the Performance Wheel:

Communities KPIs:

- 100% of hospital teams will have produced workforce plans to support safe and effective staffing (Dr Gray's) **(Green to Red)**
- 100% individuals are offered a date for an abortion procedure within 1 week of assessment **(Stayed Red)**

Citizens KPIs: (Green to Amber)

- To increase the total membership of the Public Involvement Network by 15% (6 members) by 31 March 2025 (from 38 to 44)
- To increase the total number of volunteers by 25% by 31 March 2025 (from 191 to 239)

d) Revised Spotlights

This iteration enhances performance assurance by providing a structured approach to publishing performance information. It ensures alignment with strategic goals, proactively addresses risks, and emphasises measurable actions and learning to drive improvement. With a focus on robust governance, transparency, and accountability, it supports effective decision-making, satisfies internal and external audit requirements, and reinforces sustained progress and strategic alignment. Note that 3 spotlights in the report (Colleagues and Culture) are in the old reporting format due to workforce capacity challenges.

e) Key Organisational Enablers Feature: Digital

This feature highlights NHS Grampian's digital transformation journey, aligning with the Annual Delivery Plan (ADP) and "Plan for the Future." Key achievements include expanding virtual consultations, implementing a digital pharmacy system, and re-provisioning GP IT services to improve patient access, efficiency, and safety. Digital solutions enable initiatives like the Urgent Care Hub and Hospital @ Home pathways, enhancing patient flow and accessibility. Despite financial constraints, plans focus on citizen engagement through the digital "front door" and building resilient infrastructure to support a patient-centred, sustainable healthcare system aligned with long-term goals.

f) Voice of our Colleagues:

This section introduces the Trickle App, launched for Doctors in Training (DiTs) in NHS Grampian, which provides a platform to voice workplace concerns and ideas. Currently there are 178 users signed up to the App. Key topics raised include wellbeing and rotas, reviewed bi-weekly by a Champions Group. Efforts are ongoing to increase participation among a transient workforce. Upcoming initiatives include awareness events, trainee forums, and addressing IT issues based on Trickle feedback.

g) Voice of our Citizens:

Within the How Are We Doing report, we recognise the Voice Of Our Citizens as an integral part of our organisation. In previous reports this has been represented via citizen stories submitted to Care Opinion. It is important to note that Care Opinion stories are representative of a small sample of our population who choose to provide feedback through this method, with work ongoing to make it easier for citizens to provide feedback through Care Opinion.

Other feedback routes are available (including compliments, complaints and patient surveys), and the Voice Of Our Citizens feature in this How Are We Doing report focusses on complaints received in the first six months of 2024/25. Information on monthly activity and trends, together with performance in meeting closure timescales provides context to the volume of complaints received. Analysis of themes provides a focus for areas for development; with sample complaints illustrating improvement actions taken by services.

In order to retain the breadth of coverage, we will alternate between Care Opinion and complaints in the Voice of our Citizens feature each quarter.

h) Appendix: Waiting Time Standards

Following feedback at the recent Board meetings, we have reached out to the services for comment on their performance relative to other mainland Boards and the overall Scotland position, against the national waiting times targets/access standards.

2.3.1 Quality/ Patient Care

The HAWD report includes information on the multiple elements required to achieve high quality, patient focused care, including workforce, finance, patient feedback and service key performance indicators.

2.3.2 Workforce

The HAWD Report includes performance elements relating to workforce through the agreed strategic objective: “Colleagues are enabled to thrive, and be safe and well through work”

2.3.3 Financial

Current financial performance is covered as a Spotlight in Quarter 2 of the HAWD Board Performance Report.

2.3.4 Risk Assessment/Management

a) The ongoing pressures to balance a challenging financial environment and significant operational demands while ensuring safe service delivery may have contributed to the performance challenges in meeting our Quarter 2 milestones and targets. According to Page 13 of the HAWD Report, workforce capacity has emerged as a major challenge, affecting a significant number of deliverables due to recruitment, retention, and training constraints. Financial pressures, particularly around non-recurrent and insufficient funding, continue to hinder progress. While there has been some reduction in risks related to policy and system factors, new challenges, including digital infrastructure and retention issues, have surfaced. This evolving risk profile underscores the need for targeted action to maintain momentum on key priorities amid ongoing workforce and financial pressures.

b) With four months remaining in the financial year and current trends observed in Quarters 1 and 2, there is a concern that unmet quarterly milestones of our Deliverables could result in a backlog of actions. This may affect the ability to achieve targets in Quarter 3 (Oct’24 to Dec’24) and Quarter 4 (Jan’25 to Mar’25), which will ultimately lead to not achieving the overall 2024/25 Deliverables, which may have wider implications for our services, organisation and outcomes (reputational, political) unless timely and effective interventions are introduced to address the current performance challenges.

c) The development of the ADP for FY2024/25 has highlighted that, despite efforts to align in-year performance with long-term outcomes, the actual impact or difference being made remains unclear. This highlights the need to ensure that strategic planning and performance of our strategy needs to be in tandem and developed in the early stages, utilising the application

of SMART principles and longer term perspective in measuring the trajectory of its impact through annual performance data.

d) We need to assess the sustainability of our targets, including the number of deliverables and KPIs, focusing on those most critical to success and adds the most value. We should also reconsider our collective ambition to re-prioritise long-term goals in light of current challenges.

e) There is a risk that the 21 KPIs with declining performance in Quarter 2 may continue to underperform or deteriorate in Quarter 3, affecting overall progress in achieving our targets by 31st March 2025. To mitigate this, early interventions must be implemented to enable performance adjustments and improvements in Quarter 3. Equally, there is a need to ensure positive performance reported in Quarter 2 are sustained to the next quarter and beyond.

2.3.5 Equality and Diversity, including health inequalities

Equality and diversity factors are being considered as part of development of the Board's Delivery Plan, which will then be reflected in the metrics used to report on performance in the HAWD report.

2.3.6 Other impacts

All are outlined above and in attached report.

3. Recommendation

The Board is asked to:

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4. List of appendices

The following appendix is included with this report:

- Appendix 1 - How Are We Doing Board Performance Report (Q2 FY2024/25)