

Meeting:	NHS Grampian Open Board Meeting
Meeting date:	9 October 2025
Item Number:	8
Title:	Quarter 1 Board Performance Reporting 2025/26 via How Are We Doing Board Performance Report
Responsible Executive:	Alex Stephen, Director of Finance
Report Author:	Preston Gan, Head of Performance

1 Purpose and recommendations

This is presented to the Committee for:

- Assurance
- Decision
- Endorsement

Recommendation(s)

The Board is asked to:

- **Endorsement**
 - Endorse the 2025/26 Integrated Performance Assurance and Reporting Framework (IPARF), including the enhanced performance model (Appendix 2) as approved by the Performance Assurance, Finance and Infrastructure Committee (PAFIC) on the 3rd September 2025, as the basis for a more aligned and outcome-focused approach to delivery and performance.
- **Assurance**
 - Note the consolidated Quarter 1 performance story, in relation to long waits, cancer access, frailty admissions, delayed discharges and digital programmes.
 - Recognise the key risks in financial sustainability, urgent care, diagnostics and frailty prevention, where closer oversight is required.
 - Apply the assurance lens to Tier 2 detail in the HAWD report by testing whether outputs are enabling improvement, KPIs are evidencing measurable change in outcomes, and whether additional evidence is needed to confirm that outcomes are being realised.
- **Decision**
 - Approve the Quarter 1 How Are We Doing (HAWD) Board Performance Report as the formal output of the Integrated Performance Assurance and Reporting Framework.
 - Agree that future reports will continue to apply the enhanced performance model, with updates provided quarterly to maintain a clear line of sight from actions through to outcomes.

This report relates to:

- Q1 Performance Reporting 2025/26 via the How Are We Doing Board Performance Report

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

- Safe
- Effective
- Person Centred

This subject matter of this report is relevant to the mitigation of the following strategic risks (further information provided in the Risk section below)

- Inability to meet population demand for Planned Care
- Significant delays in the delivery of Unscheduled Care
- Inability to affectively maintain and invest in NHS Grampian's infrastructure
- Deviation from recognised service standards of practice and delivery
- Inability to achieve the aspirations set out in Plan for the Future due to financial resource constraints and inefficiencies
- Inability to reduce demand through citizen engagement
- Insufficient change and innovation to create a system which can meet demand and deliver on our strategic intent
- Deteriorating Workforce Engagement
- Worsening health in Grampian particularly in those who experience multiple disadvantages

2 Report summary

2.1 Situation

Quarter 1 of 2025/26 marks the first full reporting cycle under NHS Grampian's revised outcomes-focused performance framework. This represents a significant change in how performance is presented, moving beyond activity updates to demonstrate the relationship between outputs, deliverables, KPIs and outcomes.

Positive progress is evident in a number of areas, including reductions in long waits, achievement of cancer standards, improvements in delayed discharges, and strengthened frailty care. However, delivery remains variable in areas such as financial sustainability, urgent and emergency care, diagnostics, and prevention.

Due to the timing of new reporting requirements, this report has been delivered later than usual. An interim Operational Improvement Plan (OIP) update was submitted to the Board earlier in the year, and where validated data allows, performance extends beyond Quarter 1. However, the analysis presented here focuses primarily on Q1 to ensure robustness.

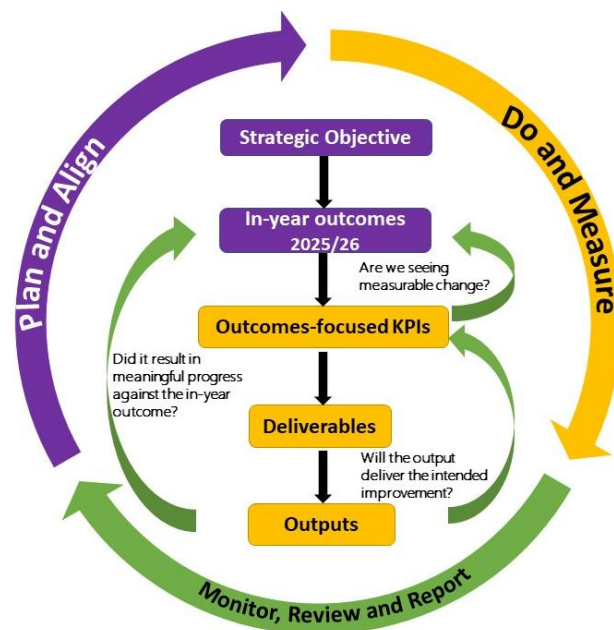
Overall, Q1 shows a system moving in the right direction but not yet at the pace or consistency required. The challenge for the remainder of 2025/26 is to accelerate delivery, close critical risks, and provide the Board with assurance that actions are translating into measurable improvement against agreed outcomes.

2.2 Background

The revised Integrated Performance Assurance and Reporting Framework (IPARF) and enhanced performance model have been introduced for 2025/26 to strengthen alignment between strategy and measurable outcomes. The shift is from activity-based reporting to outcomes-driven assurance, enabling clearer oversight of whether improvement actions are making a difference and answering the “so what” question.

This change comes at a critical point. NHS Grampian was escalated to Stage 4 of the Escalation and Support Framework in May 2025 due to concerns around financial sustainability, deterioration of the 2024/25 position, and leadership and governance. At the same time, the national context is evolving, with the Scottish Government moving from Annual Delivery Plans (ADPs) to an Operational Improvement Plans (OIP), alongside the emerging Service Renewal Framework and Population Health Framework.

In response, assurance now centres on two key components: the three Change Programmes (Planned Care, Value & Sustainability, Unscheduled Care) and the four critical areas of the OIP. This ensures performance is managed and assured through priorities reflecting both local and national focus.



2.3 Assessment

The Framework, Model (Appendix 2) and revised How Are We Doing (HAWD) Board Performance Report (Appendix 1) were presented at the August Board meeting and approved by PAFIC on 3rd September. The Board Seminar on 11th September provided further opportunity for review and comment. It was agreed that this approach would return to the October meeting for formal endorsement.

Are we progressing toward the outcomes?

Tier 1: System Overview (Change Programmes & OIP)

Quarter 1 performance provides an early indication that improvement activity is beginning to make a difference, though risks remain. Most KPIs are rated Green, but several are Amber or Red, and directional markers show half have declining in performance compared with baseline. This signals the need for the Board to look beyond headline RAG ratings and consider whether improvements are being sustained.

Deliverables are largely on track, though some face minor or significant delay. Outputs are still at an early stage, with only 2 of 50 complete, which is as expected for Q1, but requiring attention as the year progresses.

Across the OIP, most performance indicators are on target and deliverables forecast to complete on time, but minor delays are emerging in some areas. These may not yet affect outcomes but are important early warnings, highlighting the need to test whether current enablers are sufficient to sustain progress through 2025/26.

Tier 2: Change Programmes and OIP Critical Areas

Tier 2 of the HAWD report provides the full detail of performance across the Change Programmes and the four critical areas of the OIP. Using the Performance Model, it will show how outcomes are progressing and where alignment with KPIs, deliverables and outputs are being maintained or under pressure.

2.3.1 Quality / Patient Care

The HAWD Report supports improvements in patient outcomes by embedding clear measures of delivery across the Change Programmes and Operational Improvement Plan (OIP). These address key areas of access, flow, safety and patient and staff experience, with further assurance provided through spotlight reporting in the HAWD reporting structure. The Voice of our Citizens is also represented in the HAWD report.

2.3.2 Workforce

The model reduces unnecessary duplication of effort by simplifying reporting requirements and enhancing clarity. This allows teams to focus on delivering improvement and outcomes, rather than responding to overlapping or unclear reporting demands. Additionally, the Framework provides clear guidance to Programme Leads and operational teams, supporting the day to day delivery of both the Programmes and the OIP.

2.3.3 Financial

While not a financial Framework, the IPARF supports financial recovery and sustainability by aligning deliverables and outcomes to the OIP and Value & Sustainability (V&S) programme. This enables clearer monitoring of progress and impact across both financial and non-financial priorities.

2.3.4 Risk Assessment / Management

The Framework strengthens visibility and scrutiny of key risks through targeted spotlighting, performance conversations across multi assurance layers, and escalation mechanisms built into the HAWD reporting cycle.

2.3.5 Equality and Diversity, including health inequalities

The Framework embeds equality and diversity by aligning outcomes, deliverables, and outputs to reduce variation in access and experience. Programmes include targeted actions to address health inequalities and promote person-centred care. Spotlight templates also prompt reflection on how principles such as “Putting People First” and equity considerations will support progress toward outcomes.

2.3.6 Other impacts

The Framework and model will support a more performance-aware culture across the organisation by improving transparency, reducing burden, and making assurance processes more meaningful and accessible at all levels.

2.3.7 Communication, involvement, engagement and consultation

- Programme Leads, System Leaders and Executive Leads for the Change Programmes are jointly involved in the design, development and agreement of Outcomes, KPIs, Deliverables and Outputs of the three Change Programmes and the OIP.
- Executive Leads, Chairs/Vice Chairs and Committee Members of the Board and Assurance Committees were involved in the consultation, review and agreement on the NHS Grampian Integrated Performance Assurance and Reporting Framework and Performance Model, repurposed How Are We Doing Board Performance Report.
- Involvement of System Leaders, Executive Leads, Chief Officers on providing updates to the three Change Programmes and the OIP.

- OIP, IPARF and repurposed HAWD Report Template presented and agreed at Chief Executive Team (CET) Strategic Performance Review Meeting on 29th July 2025.
- IPARF, Performance Model and HAWD template presented to Board on 14th August 2025
- OIP, IPARF and repurposed HAWD Report Template approved by PAFIC on 3rd September 2025
- IPARF, Performance Model and the Spotlight Template presented and consulted at Board Seminar on 11th September 2025.
- OIP, IPARF, Q1 HAWD Report presented at CET Performance Review Meeting 16th September 2025

2.3.8 Route to the Meeting

- OIP, IPARF and repurposed HAWD Report Template presented and agreed at Chief Executive Team (CET) Strategic Performance Review Meeting on 29th July 2025.
- IPARF, Performance Model and HAWD template presented to Board on 14th August 2025
- OIP, IPARF and repurposed HAWD Report Template approved by PAFIC on 3rd September 2025
- IPARF, Performance Model and the Spotlight Template presented and consulted at Board Seminar on 11th September 2025.
- OIP, IPARF, Q1 HAWD Report presented at CET Performance Review Meeting 16th September

2.4 Recommendations

The Board is asked to:

- **Endorsement**
 - Endorse the 2025/26 Integrated Performance Assurance and Reporting Framework (IPARF), including the enhanced performance model (Appendix 2) as approved by the Performance Assurance, Finance and Infrastructure Committee (PAFIC) on the 3rd September 2025, as the basis for a more aligned and outcome-focused approach to delivery and performance.
- **Assurance**
 - Note the consolidated Quarter 1 performance story, in relation to long waits, cancer access, frailty admissions, delayed discharges and digital programmes.
 - Recognise the key risks in financial sustainability, urgent care, diagnostics and frailty prevention, where closer oversight is required.
 - Apply the assurance lens to Tier 2 detail in the HAWD report by testing whether outputs are enabling improvement, KPIs are evidencing measurable change in outcomes, and whether additional evidence is needed to confirm that outcomes are genuinely being realised.
- **Decision**
 - Approve the Quarter 1 How Are We Doing (HAWD) Board Performance Report as the formal output of the Integrated Performance Assurance and Reporting Framework.
 - Agree that future reports will continue to apply the enhanced performance model, with updates provided quarterly to maintain a clear line of sight from actions through to outcomes.

3 Appendix/List of appendices

The following appendix/appendices are included with this report:

- Appendix 1: Q1 2025/26 HAWD Board Performance Report
- Appendix 2: NHS Grampian Integrated Performance Assurance and Reporting Framework