Agenda Item 6 HWB/10/24

Report title: One Version of the Truth

Report to: Essex Health and Wellbeing Board

Report author: Peter Fairley, Director for Strategy, Policy and Integration

Date: March 2024

For: Decision

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County Divisions affected: All Essex

1 Purpose of Report

1.1 This report seeks the endorsement of an Essex level dashboard on key performances indicators, to be captured consistently across the three ICBs.

2 Recommendations

- 2.1 To endorse the development of the dashboard.
- 2.2 To provide feedback on any amendments or additions required for the next iteration of the dashboard
- 2.3To note the performance against the measures, consider what the performance data is telling us, and what actions we need to take as a result.

3 Background and Proposal

- 3.1 Each ICB produces performance information for monthly ICB meetings, however we do not have a collective dashboard that allows us to review the overall picture at an Essex level displaying the measures in a consistent format allowing for easy comparison.
- 3.2 To address this, colleagues from across the three ICSs and within ECC have developed a single dashboard consisting of a small suite of key performance indicators across health and care.
- 3.3 The aim of the dashboard is to
 - Support open dialogue on performance at an Essex level
 - Support identification and sharing of best practice across Essex
 - o Identify where the system is facing strains and challenges and support understanding of how Health and Wellbeing Board partners can help.

4 Proposed Metrics

4.1 The proposed measures for the dashboard will include:

I. Appointments at GP Practices

- o Appointments secured within the same day
- o Appointments secured within 2 weeks

II. Care Home Admissions

- Long term support needs of younger adults (18-64) met by admission to residential or nursing care
- Long term support needs of older adults (65 and over) met by admission to residential or nursing care

III. Hospital Discharges

- Proportion of older people (65 and over) who are still home 91 days after discharge from hospital into reablement services
- o Percentage of hospital discharges to usual place of residence

IV. Accident and Emergency

o Percentage of patients seen in A&E within 4 hours

V. Hospital Delays

 Beds occupied by people 7 days or more after no longer meeting the criteria to reside

5 List of appendices

• Draft Dashboard – **to follow**.