



SHROPSHIRE HEALTH AND WELLBEING BOARD

Report

Meeting Date	19 September 2024				
Title of report	Integrated Care Partnership (ICP) KPI and performance outcome monitoring update				
This report is for (You will have been advised which applies)	Discussion and agreement of recommendations		Approval of recommendations (With discussion by exception)	x	Information only (No recommendations)
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Which Joint Health & Wellbeing Strategy priorities does this report address? Please tick all that apply	Children & Young People	x	Joined up working		x
	Mental Health	x	Improving Population Health		x
	Healthy Weight & Physical Activity	x	Working with and building strong and vibrant communities		x
	Workforce	x	Reduce inequalities (see below)		x
What inequalities does this report address?					

Report content - Please expand content under these headings or attach your report ensuring the three headings are included.

1. Executive Summary

This report provides an overview of the approach to Population Health Management (PHM) across the Integrated Care System. This report then specifically provides an update of the KPI and Performance Monitoring element of the work programme and specifically those metrics that relate to the Integrated Care Strategy which build on the Health and Wellbeing Board and SHIPP Metrics.

2. Recommendations

- That the Board review and comment on the outcome metrics including in this report
- That the Board note the progress to date against the Integrated Care Strategy and Health and Wellbeing Board Strategy Outcomes and consider any additional or amended outcomes for consideration within the framework at the Board

3. Report

Background

Population Health Management (PHM) is a way of working to understand current health and care needs and predict what local people will need in the future. It helps shape evidence-based actions to address these needs. This is used to inform and define commissioning intentions and planning of future services/ required outcomes for strategic planning/commissioning. It can also support those on the frontline, our local communities and teams to understand and support actions to improve outcomes for example through local action planning and pathway redesign.

PHM uses historical and current data to understand what factors are driving poor outcomes in different population groups. The use of joined up data across local health and care partners and techniques like population segmentation and risk stratification can offer deeper insight into the holistic needs of different population groups and the drivers of health inequalities. Alongside the use of qualitative data sources and ad hoc research and evaluation as required.

At an Integrated Care System level, a Population Health Management Group has been established to oversee the work programme to deliver a population health management approach across the system. It is chaired by the Director of Public Health for Shropshire and membership is comprised of the strategic lead and analytical lead for each partner organisation to drive the work forward.

Specifically, the purpose of the PHM group is to:

- To establish a system approach to embedding and leading Population Health Management approaches across all programmes of work and to co-ordinate the delivery of key programmes of work across the system including the prevention and inequalities
- To use all data (qualitative and quantitative and information, evidence of best practice to develop intelligence and insight in a systematic way to better understand, plan, deliver and ultimately improve our populations health and care whilst making best use of all available resources. This includes specifically informing strategy development and linking back into strategic plans
- To lead the approach across the system to benefits realisation, evaluation and monitoring of outcomes and impact

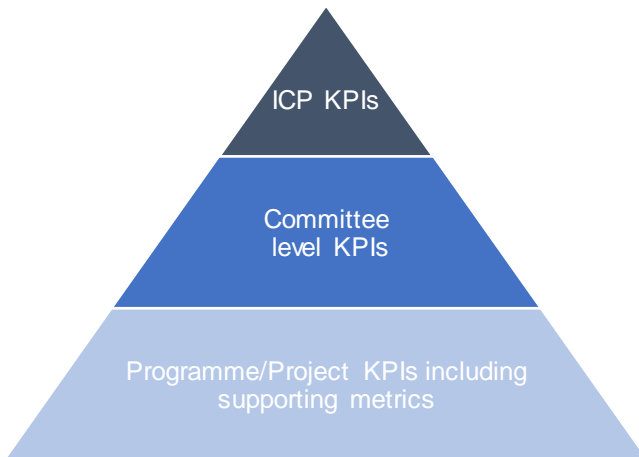
The PHM work programme is split into the following headings;

- Programme population health intelligence
- Health needs assessments
- Elective recovery
- KPI and performance outcome monitoring
- Modelling and forecasting
- Infrastructure

This report provides an update on the **KPI and performance outcome monitoring** element of the work programme and specifically the development of a framework for monitoring committee and Board level KPIs and outcomes.

KPIs and Monitoring including the Intergrated Care Partnership Outcomes

A pyramid approach has been taken to monitor performance and impact of the Population Health Management programme. Multiple dashboards monitor programme delivery through key performance indicators and outcome measures. Key KPIs from programme dashboards will feed up to committee level and to the Integrated Care Partnership. The below infographics demonstrate this.

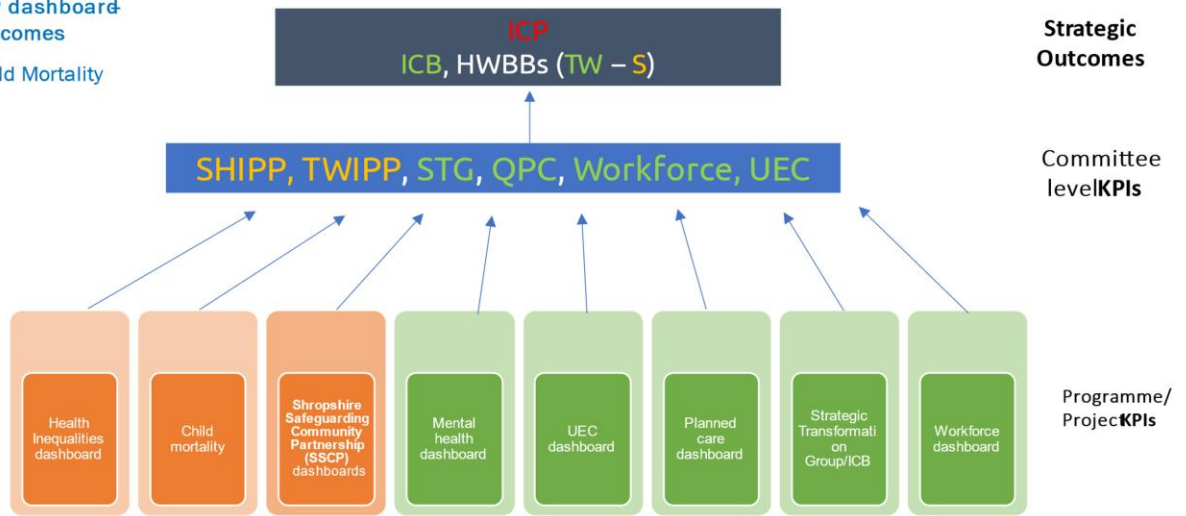




KPI and Performance Outcome Monitoring

Priorities:

- Health Inequalities
- ICP dashboard outcomes
- Child Mortality



To determine a list of KPIs for reporting to the ICP Board, a long list of KPIs were collated from the:

- Shropshire Health and Wellbeing Board KPIs
- Telford and Wrekin Health and Wellbeing board KPIs
- ShIPP KPIs
- TWIPP KPIs
- Integrated strategy (owned by the Integrated Care Partnership)

The list of metrics would be taken to each Board and Committee for consideration in draft before the final version would be signed off by the Integrated Care Partnership

The Population Health Management Planning Group considered and agreed a short list of key performance indicators to report to the ICP board, as shown below.

ICP Planning group met in June 2024. Agreed a short list of high-level metrics from a long list collated from both HWBBs, SHIPP, TWIPP and the Integrated strategy metrics

KPI	Where from?	Metric	
1	Increase healthy life expectancy in all people	Shropshire HWB strategy/ TW HW strategy/ Integrated Strategy	Healthy life expectancy at birth (male and female)
2	Improve life expectancy at birth and 65+ years	TW HWB Strategy	Life expectancy at birth and 65+ years (male and female)
3	Narrow the gaps in life expectancy and healthy life expectancy.	TW HWB Strategy/Integrated Strategy	Inequality in LE and HLE
4	Increase healthy life expectancy for those with Severe Mental Illness (SMI)	Shropshire HWB strategy/SHIPP/ Integrated Strategy/ TW HW Strategy	Premature mortality in adults with severe mental illness (SMI) and Excess under 75 mortality rate in adults with severe mental illness (SMI)
5	16-17s not in education, employment or training	Shropshire HWB strategy/SHIPP/ Integrated Strategy	16-17s not in education, employment or training
6	Excess under 75 mortality rate in adults with Severe Mental Illness (SMI)	Shropshire HWB strategy	Excess under 75 mortality for people with SMI
7	Improve infant and maternal health outcomes	TWC HW Strategy - Integrated neighbourhood health and care	Smoking status at the Time of Delivery
8	Improve infant and maternal health outcomes	SHIPP	Infant mortality rate
9	Diabetes treatment outcomes	Integrated Strategy	Treatment outcomes - diabetes care processes
10	Reduce preventable mortality	TWC HW Strategy - Protect, prevent and detect early	Under 75 mortality rate from cardiovascular diseases considered preventable
11	Reduce preventable mortality	TWC HW Strategy - Protect, prevent and detect early	Under 75 mortality rate from cancer considered preventable
12	Reduce preventable mortality	TWC HW Strategy - Protect, prevent and detect early	Under 75 mortality rate from causes considered preventable
13	E04b – Under 75 mortality rate from Cardiovascular diseases seen as preventable (2019 definition, 1 year range)	SHIPP	Under 75 mortality rate from Cardiovascular diseases seen as preventable (1 year range)
14	Reduce impact of ACEs on our communities	Integrated Strategy	Report at Place. Overarching position ICP level.
15	Increase the number of residents describing their community as a healthy, safe and positive place to live	Integrated Strategy	Number of residents describing their community as a healthy, safe and positive place to live
16	Increase the % of residents who report that they are able to access services they need, when they need them	Integrated Strategy	Tbc
17	Reduce carbon footprint generated through travel by patients to our services	Integrated Strategy	Carbon footprint of patients travelling to services
18	Early diagnosis and treatment for cancer	SHIPP	% cancers diagnosed at stage 1 and 2

The expectation is to produce a first draft of the outcomes framework by October 2024 for the Integrated Care Partnership to review. However, the framework and the KPIs/Outcome metrics will be an ongoing development with senior leaders and members. Targets, tolerance and benchmarks will be set and clarified over the coming months with where possible, regular updates. This will be developed into a dashboard and published on the Intergrated Care System website. This will be the main source of performance information enabling greater insight, transparency and scrutiny of the ICS performance and delivery of its outcomes as set in the Integrated Care Strategy.

Next Steps

To move the work forward our next steps involve:

- Seeking endorsement of metrics from Shropshire Health and Wellbeing Board and Telford and Wrekin Health and Wellbeing Board
- Seeking endorsement of metrics from SHIPP and TWIPP
- Ensuring metrics still align with Integrated strategy and JFP
- The Dashboard build – commence September 2024
- A draft of the metrics to be shared with the Integrated Care Partnership for review comment and amendments
- For programmes of work to be continuously reviewed and amended in the pyramid
- Each metric to be mapped to a programme of work at the bottom of the pyramid.
- If there are exceptions or areas of need, a deep dive will follow and a report will be presented to the ICP board.
- Final first version of the framework to be published

Risk assessment and opportunities appraisal

None

(NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)		
Financial implications (Any financial implications of note)	None	
Climate Change Appraisal as applicable	None	
Where else has the paper been presented?	System Partnership Boards	ShIPP 19 September (as August cancelled)
	Voluntary Sector	
	Other	
List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)		
Cabinet Member (Portfolio Holder) Portfolio holders can be found here or your organisational lead e.g., Exec lead or Non-Exec/Clinical Lead Cllr Cecilia Motley		
Appendices Appendix A. ICP KPI's and Dashboard update – presentation		