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|-------------|-----------------|
| Date        | 9 November 2021 |
| Agenda Item | 11              |

**Report to West Lothian Integration Joint Board/Strategic Planning Group/Audit Risk and Governance Committee (delete as appropriate)**

**Report Title: Baseline data for Primary Care Performance Indicators**

**Report By: Dr Elaine Duncan, Clinical Director, West Lothian HSCP**

| Summary of Report and Implications                           |  |
|--|--|
| <b>Purpose</b>   | This report: (tick any that apply).  |
|  | - seeks a decision <input checked="" type="checkbox"/> X   |
|  | - is to provide assurance <input type="checkbox"/> ..  |
|  | - is for information <input checked="" type="checkbox"/> X   |
|  | - is for discussion <input type="checkbox"/> r   |
|  | ...  |
| <b>Recommendations</b>                                       | <p>The Board is asked to:</p> <ol style="list-style-type: none"> <li>Note the contents of the report</li> <li>Confirm that the reporting format meets the Board's requirements</li> </ol>    |
| <b>Directions to NHS Lothian and/or West Lothian Council</b> | A direction(s) is not required.  |
| <b>Resource/ Finance/ Staffing</b>                           | None   |
| <b>Policy/Legal</b>  | -  |
| <b>Risk</b>  | The risk is captured in the risk register and will be monitored  |
| <b>Equality, Health Inequalities, Environmental and</b>      | The report has been assessed as having little or no relevance with regard to equality or the Public Sector Equality Duty. As a result, an equality impact assessment has not been conducted. |

|   |  |
|---|--|
| <b>Sustainability Issues</b>                | -  |
| <b>Strategic Planning and Commissioning</b> | All Strategic Plan Outcomes  |
| <b>Engagement</b>                           | GP Clusters, Primary Care Forum, West Lothian Practice Managers and LIST Data Analysts have been consulted and have participated in the development of these Indicators. |

## Terms of Report

### 1. Background

Many attempts have been made both around the UK and across healthcare systems in other developed nations to develop Key Performance Indicators (KPIs) for Primary Care, however the sheer breadth of activity that takes place in this sector makes it challenging to effectively capture performance across all aspects of the service. The use of a system of “Domains” is often adopted, as this helps to group key aspects of care and service delivery. In June 2021 a proposed set of 12 KPIs across 6 domains was presented to the Board for consideration.

A large number of proposed indicators were considered for each domain and discussed with GP Cluster Leads and Practice Quality Leads, as well as analysts from the LIST team; the final draft set of indicators represents a selection which takes into account the need for meaningful reporting combined with the use of currently available data sources.

The proposed KPIs were presented to Board in June 2021 and were approved; the indicators chosen are listed below:

**Table 1**

| DOMAIN                       | INDICATORS   |
|------------------------------|--|
| Stability and sustainability | 1 - % of practices not in special measures or being managed under Section 2c arrangements  |
|                              | 2 - % of practices with less than 1wte GP vacancy  |
| Access                       | 3 - % of practices with open, unrestricted lists   |
|                              | 4 - % of practices participating in the Extended Hours Enhanced Service                    |
| Safe                         | 5 - % of practices offering same-day assessment (phone/video or F2F) for urgent problems   |
|                              | 6 - % of practices carrying out annual medication reviews on 80% of patients on medication |

|                 |    |   |
|-----------------|----|---|
| Effective       | 7  | - % of practices with referral rates in line with NHS average   |
|                 | 8  | - % of practices with Lothian Joint Formulary adherence at or above Lothian average   |
| Patient centred | 9  | - % of practices which run a patient participation group and/or undertake review of patient suggestions and complaints at least annually. |
|                 | 10 | - % of practices where 90% of patients in a care home or on the palliative care register have a personalised Anticipatory Care Plan       |
| Quality         | 11 | - % of practices engaging in current cluster quality project.   |
|                 | 12 | - % of practices undertaking the current Quality SESP   |

Following approval, the first data collection was undertaken and work was carried out with the LIST team to develop a suitable reporting format. The results of the first data collection are shown in Appendix 1.

### Comments

The indicators are largely self-explanatory. Some small modifications had to be made to the original definitions to align them with existing data sources: indicator 6 had the time frame adjusted from 12 months to 15 months as this is what is routinely available, and indicator 8 will run on a rolling programme of BNF chapters as again, this is what is currently generated.

Data sources for each of the indicators are listed in Appendix 1. For those indicators that required practices to submit data, most but not all practices submitted a complete data set—where data capture is incomplete, this is noted on the graph. We would aim to work with practices to improve data completeness in subsequent data collection rounds.

These initial results provide a useful snapshot which will build over time to allow the position across different aspects of Primary Care to be monitored on an ongoing basis.

**Acknowledgements**

The participation of practice quality leads, practice managers and in particular the LIST team in bringing this project to fruition despite the ongoing pressures of the pandemic is gratefully acknowledged.

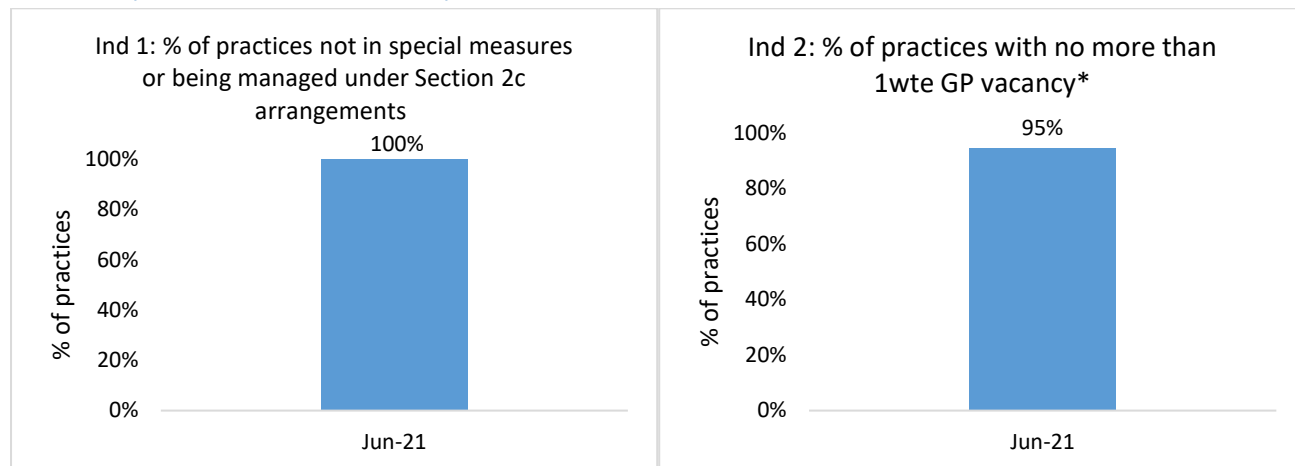
|                   |  |
|-------------------|--|
| <b>Appendices</b> | 1. Baseline data collection for West Lothian KPIs  |
|                   |  |
| <b>Contact</b>    | <p>Dr Elaine Duncan<br/> Clinical Director<br/> Elaine.M.Duncan@nhslothian.scot.nhs.uk</p> <p>01506 281009</p> |



# West Lothian – Primary Care Indicators Summary Report

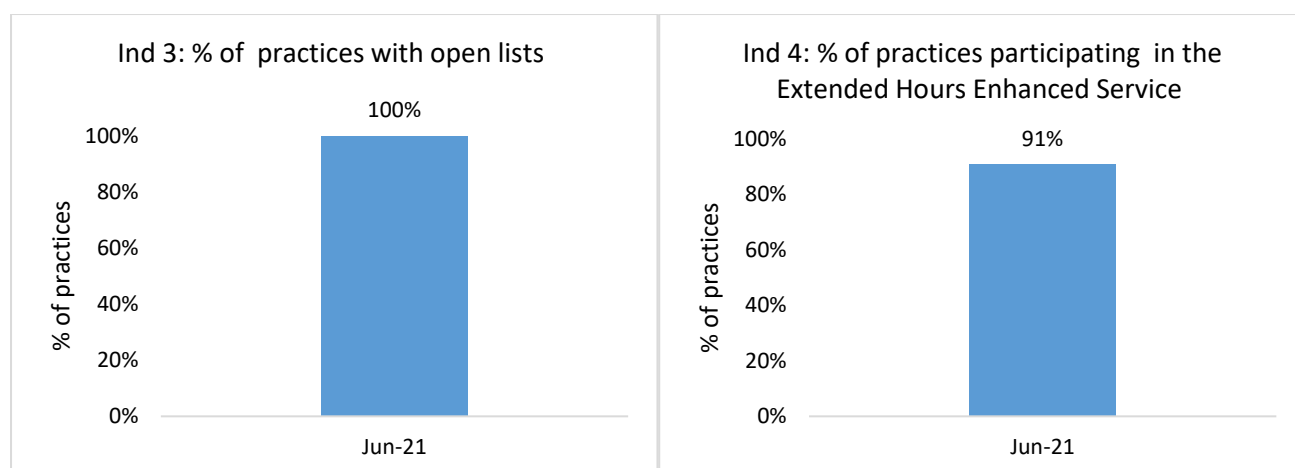
June 2021

## Stability and Sustainability

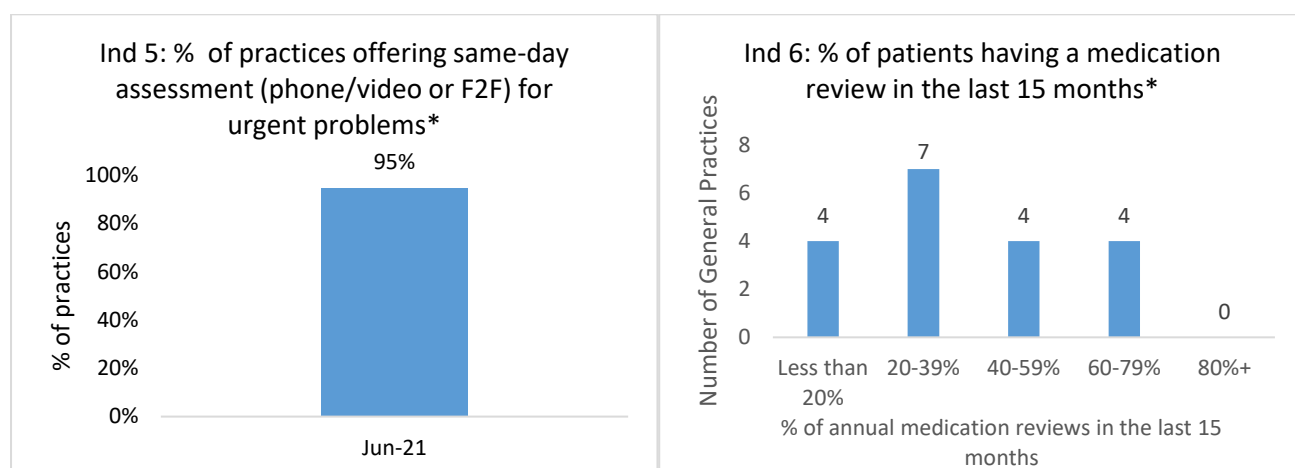


\* of 19 practices who responded

## Access



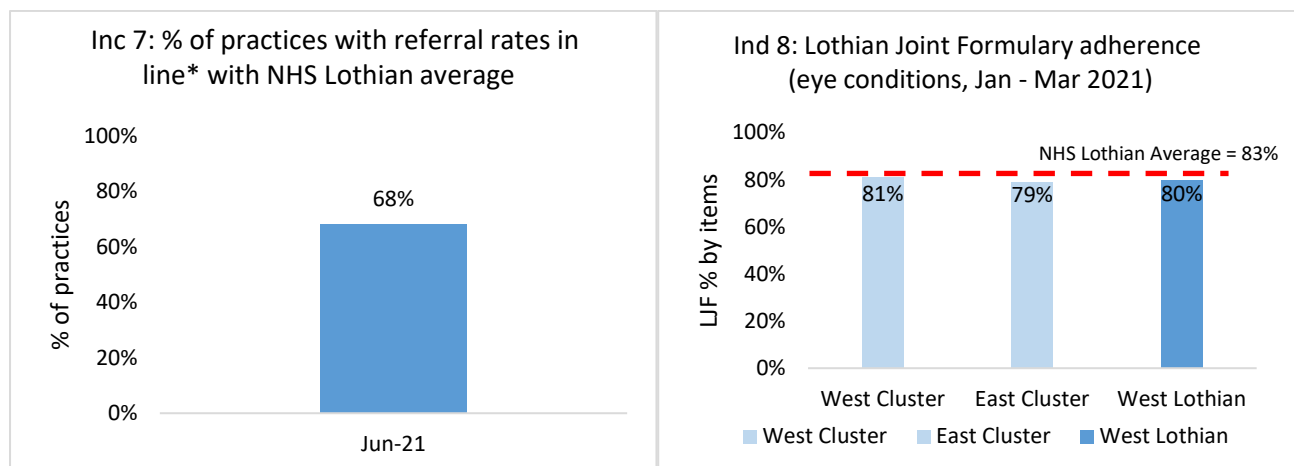
## Safe



\* of 19 practices who responded

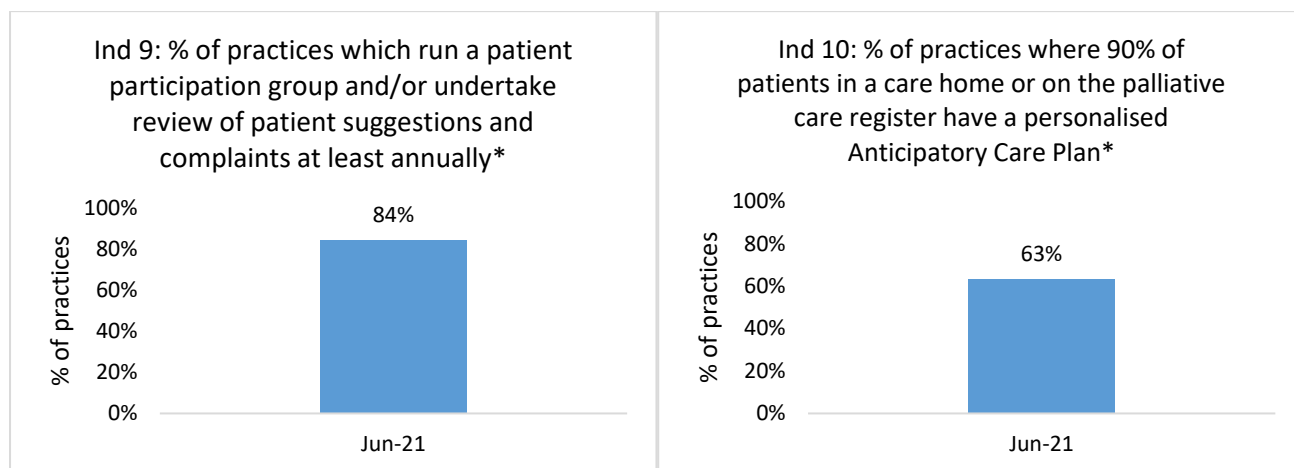
\* of 19 practices who responded

## Effective



\* Practices with referral rates less than or equal to 15% over the Lothian average

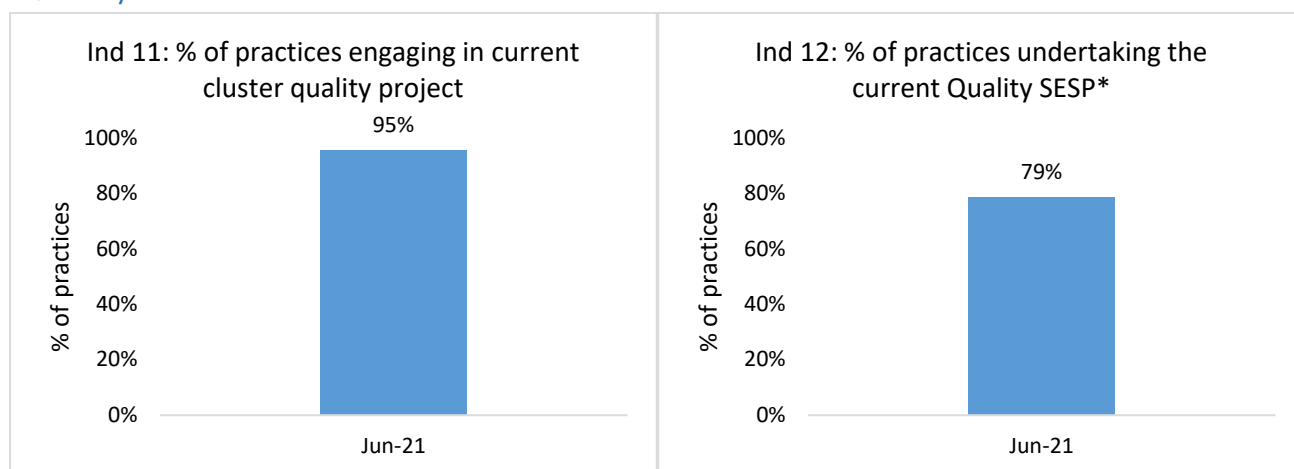
## Patient centred



\* of 19 practices who responded

\* of 19 practices who responded

## Quality



\* of 14 practices who responded

| <b>Ind</b> | <b>Sources</b>  |
|------------|---|
| 1          | ISD, PHS  |
| 2          | Practice Survey   |
| 3          | PSD, PHS  |
| 4          | Primary Care Contractor Organisation (PCCO), NHS Lothian          |
| 5          | Practice Survey   |
| 6          | Practice Survey   |
| 7          | Primary Care Indicator Dashboard, PHS                             |
| 8          | Medicine Management Team, NHS Lothian                             |
| 9          | Practice Survey   |
| 10         | Practice Survey   |
| 11         | Lothian Joint Formulary Cluster Adherence Report – Eye Conditions |
| 12         | Primary Care Contractor Organisation (PCCO), NHS Lothian          |