

# Changing Health & Social Care for You

Working with communities in the Scottish Borders for the best possible health and wellbeing



## Summary of Performance for Integration Joint Board: JANUARY 2018

This report provides an overview of quarterly performance under the 3 strategic objectives within the revised Strategic Plan, with **latest available data at the end of December 2018**. A number of annual measures that have been updated recently are included in the [Annual Performance Report 2017/18](#)

### KEY

+ve trend over 4 Qtrs /Scottish Borders compares well to previous period/to Scotland	-ve trend over 4 Qtrs /some concern from previous period or when compared to Scotland	Consistently worsening position over 6 Qtrs & worse than Scotland	Little change/little difference over time/to Scotland
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## How are we doing?

### Objective 1: We will improve health of the population and reduce the number of hospital admissions

Emergency Hospital Admissions (Borders residents, all ages) <b>27.1</b> admissions per 1,000 population (July to Sep 2018) <b>Little change over 4 Qtrs</b> Similar to Scotland	Emergency Hospital Admissions (Borders residents age 75+) <b>89.2</b> admissions per 1,000 population Age 75+ (July to Sep 2018) <b>-ve trend over 4 Qtrs</b> Lower than Scotland	Attendances at A&E <b>7,547</b> attendances (July - Sep 2018) <b>Little change over 4 Qtrs</b> Trend similar to Scotland	£ on emergency hospital stays <b>21.2%</b> of total health and care resource, for those Age 18+ was spent on emergency hospital stays (July - Sep 2018) <b>+ve trend over 4 Qtrs</b> Lower than Scotland
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### Main challenges:

The rate of emergency admissions has fluctuated over the last 4 quarters, but over the longer term is showing a downwards (positive) trend. The rate of emergency admissions for Scottish Borders (SB) residents aged 75+ has generally been decreasing over the longer term but there has been an increase over the last 4 quarters. Number of attendances at A&E remains around 7500 per quarter. In relation to spend on emergency hospital stays, Borders has consistently performed slightly better than Scotland and there is now a downward (positive) trend and we are back to one of the lowest levels since the beginning of 2016/17. As with other Health and Social Care Partnerships, we are expected to work to reduce the relative proportion of spend attributed to unscheduled stays in hospital,

### Our plans during 2019 to support this objective:

Develop Local Area Co-ordination; redesign day services; continue Community Link Worker pilot in Central and Berwickshire areas; expand the scope of the Matching Unit, the "hospital to home" project (which is working to support frail elderly patients in their own homes) and Neighbourhood Care to focus on keeping people out of hospital. *JULIE KIDD has suggested including something on increasing the range of support available including COPD pathways and a focus on respiratory disease.*

**Objective 2: We will improve the flow of patients into, through and out of hospital**

A&E waiting times (Target = 95%)  <b>94.4%</b> of people seen within 4 hours (Oct 2018)	No. of Occupied Bed Days* for emergency admissions (ages 75+)  <b>12,356</b> bed days for admissions of people aged 75+ (July - Sep 2018)	Rate of Occupied Bed Days* for Emergency admissions (ages 75+)  <b>1,032</b> bed days per 1000 population Age 75+ (July – Sep 2018)	Number of delayed discharges (“snapshot” taken 1 day each month)  <b>23</b> over 72 hours <b>15</b> over 2 weeks (Oct 2018)	Rate of bed days associated with delayed discharge  <b>175</b> bed days per 1,000 pop aged 75+ (July - Sep 2018)
+ve trend over 4 Qtrs (just below 95% target)	-ve trend over 4 Qtrs	-ve trend over 4 Qtrs	-ve trend over 4 Qtrs	+ve trend over 4 Qtrs
Higher than Scotland		Lower than Scotland (although see note*)		Higher than Scotland

\*Occupied Bed Days in general/acute hospital beds such as Borders General Hospital. This does not include bed days in the four Borders’ community hospitals.

**“Two minutes of your time” survey, conducted at BGH and Community Hospitals (July-Sep 2018)**

Satisfaction with care and treatment  <b>98.5%</b>	Staff understanding of what mattered  <b>98.6%</b>	Patients had info and support needed  <b>93.3%</b>
+ve trend over 4 Qtrs	+ve trend over 4 Qtrs	Little change over 4 Qtrs

**Main challenges:**

Improving trend in relation to A&E, with the 95% target exceeded in September. Borders is now considerably lower than Scotland (89.4%). Quarterly occupied bed day rates for emergency admissions in SB residents age 75+ have fluctuated over time but are lower than the Scottish averages (although see note above\*). Quarterly rate of bed days associated with delayed discharges now down to 175 in Q2 18/19, which is positive. % of patients satisfied with care, staff & information in BGH and Community hospitals remains high.

**Our plans during 2019 to support this objective:**

Continue to support a range of “Hospital to Home” and “Discharge to assess” models to reduce delays (for adults who are medically fit for discharge); develop “step-up” facilities to prevent hospital admissions and increase opportunities for short-term placements, as well as a range of longer term transformation programmes to shift resources and re-design services

**Objective 3: we will improve the capacity within the community for people who have been in receipt of health and social care services to manage their own conditions and support those who care for them**

Emergency readmissions within 28 days (all ages)  <b>11</b> per 100 discharges from hospital were re-admitted within 28 days (July - Sep 2018)	End of Life Care  <b>84.2%</b> of people’s last 6 months was spend at home or in a community setting ( July - Sep 2018 )	Carers offered support plans v complete  <b>176</b> Offered <b>55</b> Completed (July - Sep 2018)	Support for carers: change between baseline assessment and review. Improvements in self-assessment: <table border="1"> <tr><td>Health and well-being</td></tr> <tr><td>Managing the caring role</td></tr> <tr><td>Feeling valued</td></tr> <tr><td>Planning for the future</td></tr> <tr><td>Finance &amp; benefits</td></tr> </table> (July - Sep 2018)	Health and well-being	Managing the caring role	Feeling valued	Planning for the future	Finance & benefits
Health and well-being								
Managing the caring role								
Feeling valued								
Planning for the future								
Finance & benefits								
-ve trend over 4 Qtrs	-ve trend over 4 Qtr	Little change over 4 Qtrs	+ve impact					
Higher than Scotland	Similar to Scotland							

**Main challenges:**

Quarterly rate of emergency readmissions within 28 days of discharge for SB residents is now 11 and has increase from just under 10 during 2016/17. SB quarterly data has been provided in relation to end of life care- the national comparator is *annual* data. Latest available data for Carers shows an increase in completed assessments & Carer support plans

**Our plans during 2019 to support the objective:**

Further development of “What Matters” hubs; Support for Transitional Care as a model of service delivery for people 50+; redesign of care at home services to focus on re-ablement; increase provision of Extra Care Housing; roll out of Transforming Care after Treatment programme; ongoing commissioning of Borders Carers Centre to undertake assessments and care support plans.

