

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: September 2019

This report provides an overview of quarterly performance under the 3 Strategic Objectives within the Health & Social Care Partnership Strategic Plan, with **latest available data at the end of June 2019**. Annual performance is included in our latest [Annual Performance Report 2018/19](#)

KEY

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|--------------------------------------|-----------------------------------|---------------------------------------|
| • +ve trend over 4 reporting periods | • trend over 4 reporting periods | • -ve trend over 4 reporting periods |
| • compares well to Scotland average | • comparison to Scotland average | • compares poorly to Scotland average |
| • compares well against local target | • comparison against local target | • compares poorly to local target |

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)	Emergency Hospital Admissions (Borders residents age 75+)	Attendances at A&E	£ on emergency hospital stays
27.7 admissions per 1,000 population (Jan – Mar 2019)	89.8 admissions per 1,000 population Age 75+ (Jan - Mar 2019)	59.6 attendances per 1,000 population (Jan – Mar 2019)	19.3% of total health and care resource, for those Age 18+ was spent on emergency hospital stays (Jan – Mar 2019)
+ve trend over 4 periods Worse than Scotland (26.4 – Q2 2018/19) Close to target (27.5)	-ve trend over 4 periods Worse than Scotland (88.5 – Q2 2018/19) Close to target (90.0)	+ve trend over 4 periods Better than Scotland (69.9 – Q4 2018/19) Better than target (70)	+ve trend over 4 periods Better than Scotland (24.6% - 2017/18) Better than target (21.5%)

Main challenges:

The rate of emergency admissions over the long-term (3 year period) shows an improving trend, but performance on a quarterly basis can fluctuate. For the overall admission rate and specifically for the 75+ admission rate, we are close to target but worse than the Scotland average. The number of A&E attendances generally fluctuates between 7,000-8,000 attendances per quarter (equivalent to approx. 60-70 per 1,000 population per quarter). This is better than the Scotland average and follows a similar seasonal trend to Scotland. In relation to the percentage of the budget spent on emergency hospital stays, Borders has consistently performed better than Scotland and can also demonstrate a positive trend over the last 4 quarters. As with all Health and Social Care Partnerships, we are expected to minimise the proportion of spend attributed to unscheduled stays in hospital.

Objective 1: Our plans for 2019/20

We will develop local “Wellness Centres”, expanding the use of community hubs and drop-in centres to create ‘one-stop shops’ ideally covering both social care and a range of clinical needs. Through the development of single assessment and review, we will look to remove duplicate care assessments, develop more flexibility in regard to which professionals undertake assessments and increase Social Worker and Occupational Therapist involvement at daily ward rounds. We will introduce multi-disciplinary teams across the localities to triage individuals within the community to ensure that they can access services and receive appropriate Health & Social Care interventions ahead of any acute provision they may require

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

<p>A&E waiting times (Target = 95%)</p> <p>96.1% of people seen within 4 hours (Mar 2019)</p>	<p>Rate of Occupied Bed Days* for Emergency admissions (ages 75+)</p> <p>883 bed days per 1,000 population Age 75+ (Jan – Mar 2019)</p>	<p>Number of delayed discharges (“snapshot” taken 1 day each month)</p> <p>17 over 72 hours (Mar 2019)</p>	<p>Rate of bed days associated with delayed discharge</p> <p>171 bed days per 1,000 pop aged 75+ (Jan – Mar 2019)</p>	<p>“Two minutes of your time” survey – conducted at BGH and Community Hospitals</p> <p>96.5% Overall satisfaction rate (Jan – Mar 2019)</p>
<p>+ve trend over 4 periods Better than Scotland (89.8% - Dec 2018) Better than target (95%)</p>	<p>+ve trend over 4 periods Better than Scotland (1,072 Q2 2018/19) Better than target (min 10% better than Scottish average)</p>	<p>+ve trend over 4 periods Better than target (23)</p>	<p>+ve trend over 4 periods Better than Scotland (191 - 17/18 average) Better than target (180)</p>	<p>-ve trend over 4 periods Better than target (95%)</p>

*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.

Main challenges:

Over the long-term (3 years) there has been an improving trend in regard to A&E waiting times and Borders is now performing above target and is consistently better than the Scottish Average. Occupied bed day rates for emergency admissions (age 75+) has seasonal fluctuations but performance trend is positive – both long-term (over 3-years) and short-term (over 4 quarters) – and we perform better than the Scottish average (*although see note above**). Delayed discharge rates vary and are erratic in regard to ‘snapshot’ data, but performance is positive and a target to reduce delayed discharges by 30% in 2019/20 has been set by the Health & Social Care Partnership. The percentage of patients satisfied with care, staff & information in BGH and Community Hospitals remains high, although has declined slightly over the last 4 quarters.

Objective 2: Our plans for 2019/20

We will continue to work across the HSC Partnership and Public Health to initiate a number of events, campaigns and communications promoting personal responsibility and encouraging Borderers to be healthy in areas such as diet, exercise and mental health. We will introduce a new Discharge Hub to deliver a more consistent approach to managing people’s progress through Hospital, and we will improve out-of-hours provision across a number of services. We will look at ways to promote a career in care, make greater use of community pharmacies and engage with local communities regarding what services the HSC Partnership can and cannot provide. We will further develop community capacity and we will examine the bed-base mix across the care estate including the usage, role & function of Community Hospital beds.

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

<p>Emergency readmissions within 28 days (all ages)</p> <p>10.8 per 100 discharges from hospital were re-admitted within 28 days (Jan – Mar 2019)</p>	<p>End of Life Care</p> <p>86.4% of people’s last 6 months was spent at home or in a community setting (Jan – Mar 2019)</p>	<p>Carers support plans completed</p> <p>33% of carer support plans offered that have been taken up and completed in the last quarter (Jan – Mar 2019)</p>	<p>Support for carers: change between baseline assessment and review. Improvements in self-assessment:</p> <ul style="list-style-type: none"> Health and well-being Managing the caring role Feeling valued Planning for the future Finance & benefits <p>(July - Sep 2018)</p>
<p>-ve trend over 4 Qtrs Worse than Scotland (10.5 – Q3 2018/19) Worse than target (10.5)</p>	<p>+ve trend over 4 Qtrs Worse than Scotland (87.9% - 17/18) Worse than target (87.5%)</p>	<p>Little change over 4 Qtrs Worse than target (40%)</p>	<p>+ve impact No Scotland comparison No local target</p>

Main challenges:

The quarterly rate of emergency readmissions within 28 days of discharge (all ages) has increased from just under 10 per 100 during 2016/17. This is worse than the Scottish average and below target for this measure. Borders data in relation to end of life care shows relatively static performance but has been gradually improving over the longer term (3 years). However, end of life care figures for 2018/19 show Borders performed under target and worse than the Scotland average. The latest available data for Carers demonstrates positive outcomes as a result of completed Carer Support Plans.

Objective 3: Our plans for 2019/20

We will improve signposting and support for unpaid and paid carers and expand the reablement functions we offer. We will continue to utilise Technology Enabled Care (TEC) products across the partnership and promote the use of TEC with professionals and the public. We will follow up our June 2019 'TEC Fest' event with another event planned for December 2019. TEC can play an important role in supporting individuals with complex needs, so that they can better manage their conditions and lead healthy, active and independent lives for as long as possible and give everyone greater choice and control over their care.