

# 1. 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: NOVEMBER 2020

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 mid October 2020**. Annual performance is included in our latest [Annual Performance Report \(2019/20\)](#)

KEY		
• +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) <b>25.5</b> admissions per 1,000 population (Q4 – 2019/20)	Emergency Hospital Admissions (Borders residents age 75+) <b>67.1</b> admissions per 1,000 population Age 75+ (Q1 – 2020/21)	Attendances at A&E (all ages) <b>48.0</b> attendances per 1,000 population (Q1 – 2020/21)	£ on emergency hospital stays <b>11.8%</b> of total health and care resource, for those Age 18+ was spent on emergency hospital stays (Q1 – 2020/21)	The % of older people who receive a package of less than 10 hours of domiciliary care <b>67%</b> (Oct 2020)	The % of older people receiving long-term care whose care needs have decreased (from their initial assessment/latest review). <b>30%</b> (Oct 2020)
+ve trend over 4 periods Worse than Scotland (25.1 – Q4 2019/20) Better than target (27.5)	+ve trend over 4 periods Better than Scotland ( 87.5– Q4 2019/20) Better than target (90.0)	+ve trend over 4 periods Worse than Scotland (44.0 – Q1 2020/21) Better than target (70.0)	+ve trend over 4 periods Better than Scotland (23.4% - 2019/20) Better than target (21.5%)	+ve trend over 4 periods Worse than target (80%)	+ve trend over 4 periods Better than target (>20%)

### Summary:

The data for emergency admissions (all ages) is up to the end of March 2020 and will include the very beginning of the impact of Covid-19. The (age 75+) local data is up to June 2020 and shows a much larger Covid-impact. Both indicators show that latest performance is better than our pre-Covid target (as may be expected), but that the ‘performance improvement’

## APPENDIX 1: IJB QUARTERLY PERFORMANCE REPORT NOVEMBER 2020

Nationally for the all ages outstrips the Borders improvement. The data for A&E attendances is to end June 2020; historically in the Borders, we have averaged between 7,000-8,000 A&E attendances per quarter (which is equivalent to approx. 60-70 per 1,000 population per quarter) – the June 2020 result of 48.0 shows a large Covid-impact on A&E attendances, but once again National ‘performance’ has outstripped this local result. In relation to the percentage of the budget spent on emergency hospital stays, the quarterly data to June 2020 (11.8%) shows a huge reduction (last quarter’s figure was 18.5%). The inference being that next quarter’s figures for emergency admissions will reflect this and be much lower than those shown above. The latest data (Oct 2020) for the percentage of Older people receiving a package of homecare of less than 10 hours is 67%, which is below our locally set target of 80%. The indicator measuring the percentage of older people whose long-term care needs have decreased (Oct 2020) shows that 25% of those cases looked at can demonstrate a reduction. These are two of the new indicators agreed at August 2020 IJB. Once this monthly data builds up the trend information will be shown in more detail.

### **Objective 1: Our plans for 2020/21**

Our Strategic Implementation Plan (SIP) includes the development of our Localities (e.g.) building on ‘What Matters’ and Community Assistance Hubs to improve and facilitate early intervention, shared client cohorts, agile responses, close coordination of effort, all reducing admissions and avoiding or slowing progression to higher levels of care and health needs. Work continues to be progressed to improve patient flow, including; Frailty Front Door (admission avoidance), quicker discharge processes, trusted assessor models, new Intermediate Care and Reablement Services.

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

<p>A&amp;E waiting times (Target = 95%)</p> <p><b>88.5%</b> of people seen within 4 hours (Jun 2020)</p>	<p>Rate of Occupied Bed Days* for Emergency admissions (ages 75+)</p> <p><b>513</b> bed days per 1,000 population Age 75+ (Q1 – 2020/21)</p>	<p>Number of delayed discharges (“snapshot” taken 1 day each month)</p> <p><b>22</b> over 72 hours (Sept 2020)</p>	<p>Rate of bed days associated with delayed discharge</p> <p><b>118</b> bed days per 1,000 pop aged 75+ (Q1 – 2020/21)</p>	<p>“Two minutes of your time” survey – conducted at BGH and Community Hospitals</p> <p><b>95.5%</b> Overall satisfaction rate (Q4 - 2019/20)</p>	<p>The proportion of acute patients discharged to a <u>permanent</u> residential care bed without any opportunity for short-term recovery.</p> <p><b>50.0%</b> (Oct 2020)</p>
<p>+ve trend over 4 periods Worse than Scotland (95.4% - Jun 2020) Worse than target (95%)</p>	<p>+ve trend over 4 periods Better than Scotland (1,185 – Q4 2019/20) 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 (198 – 19/20 average) Better than target (180)</p>	<p>-ve trend over 4 periods Better than target (95%)</p>	<p>-ve trend over 4 periods Worse than target (0%)</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.

**Summary:**

Despite the volume of A&E attendance decreasing significantly as a result of Covid, the latest A&E Waiting Time performance (June 2020) remains well below our 95% target and well below the Scotland average (95.4%). The data for emergency admission occupied bed days (age 75+) shows a huge reduction on the previous quarter (513 bed days compared to 833 last quarter). The National data is lagging behind (only up to Q4 2019/20), however generally our performance is always better than the Scotland average (*although see note above\**). Delayed discharge rates vary in regard to ‘snapshot’ data, but performance has declined over the last 4 periods (from 16 in June 2020 to 22 as of Sept 2020). The figure for the same period last year (Sept 2019) was 20, therefore one conclusion could be that delayed discharge performance changed very little, despite the significant DD reductions seen in the early months of the pandemic. The rate of Bed Days Associated with Delayed Discharge has reduced significantly (to 118 Q1 June 2020, from a figure the previous Quarter of 200). However, based on the ‘snapshot’ data this positive result *may* well see a reversal once Q2 2020/21 data is available. The percentage of patients satisfied with care, staff & information in BGH and Community Hospitals remains high and also remains above our local target. But please note that the Patient Survey remains suspended due to Covid-restrictions.

**Objective 2: Our plans for 2019/20**

As part of our Strategic Implementation Plan (SIP), 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 remain safe and to be healthy in areas including diet, exercise and mental health. 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. We will review our contracted and commissioned services and support our workforce to ensure that we have flexible staff with the skills, training and equipment required to deal with the impacts of Covid and any future pandemics.

**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><b>11.5</b> per 100 discharges from hospital were re-admitted within 28 days (Q3 – 2019/20)</p>	<p>End of Life Care</p> <p><b>89.8%</b> of people’s last 6 months was spent at home or in a community setting (Q1 – 2020/21)</p>	<p>Carers support plans completed</p> <p><b>66%</b> of carer support plans offered that have been taken up and completed in the last quarter (Q2 – 2020/21)</p>	<p>Support for carers: change between baseline assessment and review. Improvements in self-assessment:</p> <ul style="list-style-type: none"> <li>Health and well-being</li> <li>Managing the caring role</li> <li>Feeling valued</li> <li>Planning for the future</li> <li>Finance &amp; benefits</li> </ul> <p>(Q2 – 2020/21)</p>	<p>The proportion of people who require long-term care after a period of short-term reablement/rehabilitation</p> <p><b>25%</b></p> <p>(Oct 2020)</p>	<p>The proportion of older people who receive a period of domiciliary care before entering residential care.</p> <p><b>75%</b></p> <p>(Oct 2020)</p>
<p>-ve trend over 4 Qtrs Worse than Scotland (10.4 – Q3 2019/20) Worse than target (10.5)</p>	<p>+ve trend over 4 Qtrs Better than Scotland (88.7% - 2019/20) Better than target (87.5%)</p>	<p>-ve trend over 4 Qtrs Better than target (40%)</p>	<p>+ve impact No Scotland comparison No local target</p>	<p>+ve trend over 4 periods On target (25%)</p>	<p>Flat trend over 4 periods Worse than target (&gt;80%)</p>

**Summary:**

The quarterly rate of emergency readmissions within 28 days of discharge (all ages) peaked at 11.5% in Q3 2019/20 – the highest readmission rate in the last 3 years and increasing from a low of 10.0% in 2016/17. However, this data is now very out of date and updated comparator information has been requested from Public Health Scotland. Borders data in relation to end of life care has improved significantly this quarter (89.8% compared to 87.2% last quarter). The latest available data for Carers continues to demonstrate generally positive outcomes as a result of completed Carer Support Plans. The indicators covering reablement/rehabilitation and homecare are two of the new indicators agreed by IJB at the August 2020 meeting.

**Objective 3: Our plans for 2019/20**

As part of our Strategic Implementation Plan (SIP), we will continue to support Carer services – the partnership has always recognised the essential work of carers, and even more so through the Pandemic. It is a precarious resource that requires support. We will continue trialling and implementing technology to improve health and care provision, workforce enablement, administration and processes. We will implement Joint Capital Development and Planning, including a Primary Care Capital Strategy, new Intermediate Care provision and an overarching Joint Capital Plan for the Border’s Public Sector.