



Scottish Borders
Health and Social Care
PARTNERSHIP

Quarterly Performance Report for the
Scottish Borders Integration Joint Board December 2022

SUMMARY OF PERFORMANCE:
Latest available Data at end October 2022

Structured Around the 3 Objectives in the Strategic Plan:

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

Objective 2: We will improve patient flow within and outwith hospital

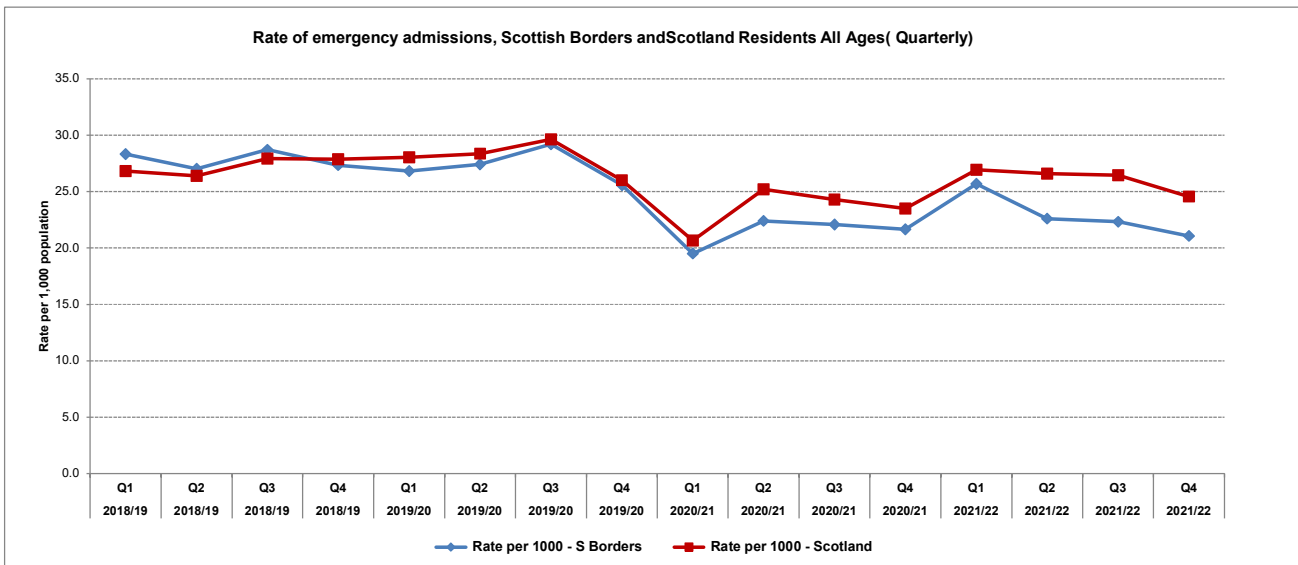
Objective 3: We will improve the capacity within the community for people who have been in receipt of health and social care services to manage their own conditions and support those who care for them

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

Emergency Admissions, Scottish Borders residents All Ages

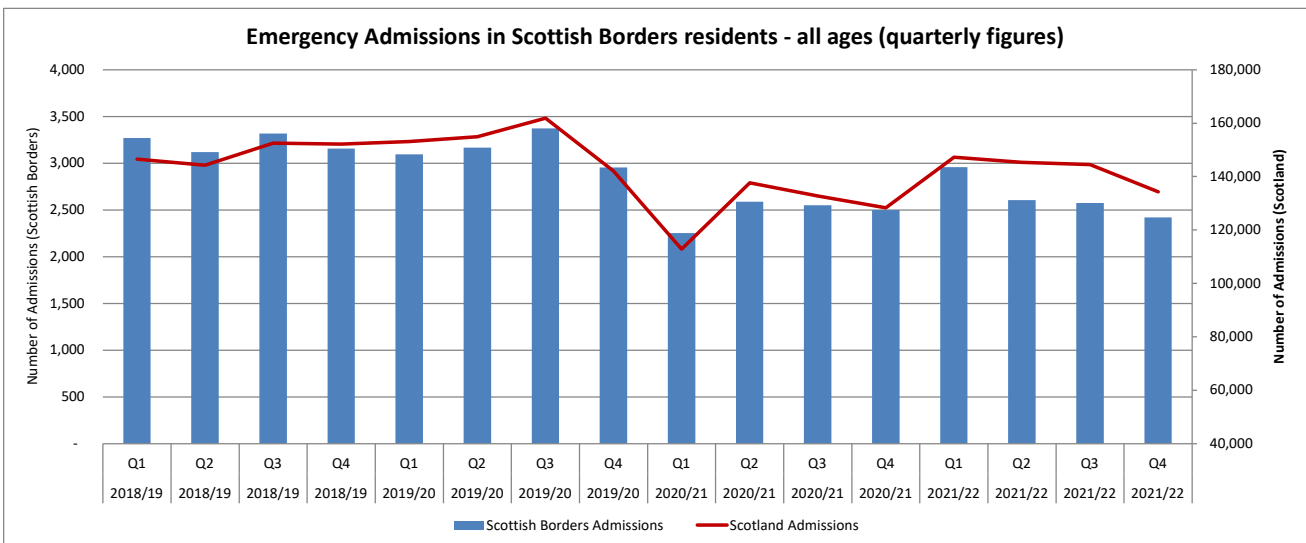
Source: MSG Integration Performance Indicators workbook (SMR01 data)

	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22
Scottish Borders - Rate of Emergency Admissions per 1,000 population All Ages	27.5	26.9	27.5	29.3	25.6	19.6	22.4	22.1	21.6	25.7	22.6	22.3	21.1
Scotland - Rate of Emergency Admissions per 1,000 population All Ages	28.1	28.2	28.5	29.8	26.1	20.6	24.6	24.3	23.5	26.9	26.6	26.4	24.6



Source: MSG Integration Performance Indicators workbook (SMR01 data)

	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22
Number Scottish Borders Emergency Admissions - All Ages	3,158	3,097	3,166	3,372	2,953	2,254	2,586	2,547	2,500	2,959	2,605	2,573	2,428
Number Scotland Emergency Admissions - All Ages	152,223	153,176	154,966	161,865	142,079	112,034	133,783	132,773	128,364	147,240	145,321	144,567	134,263



Please Note: where two areas are concerned it is not possible to show values as a control chart.

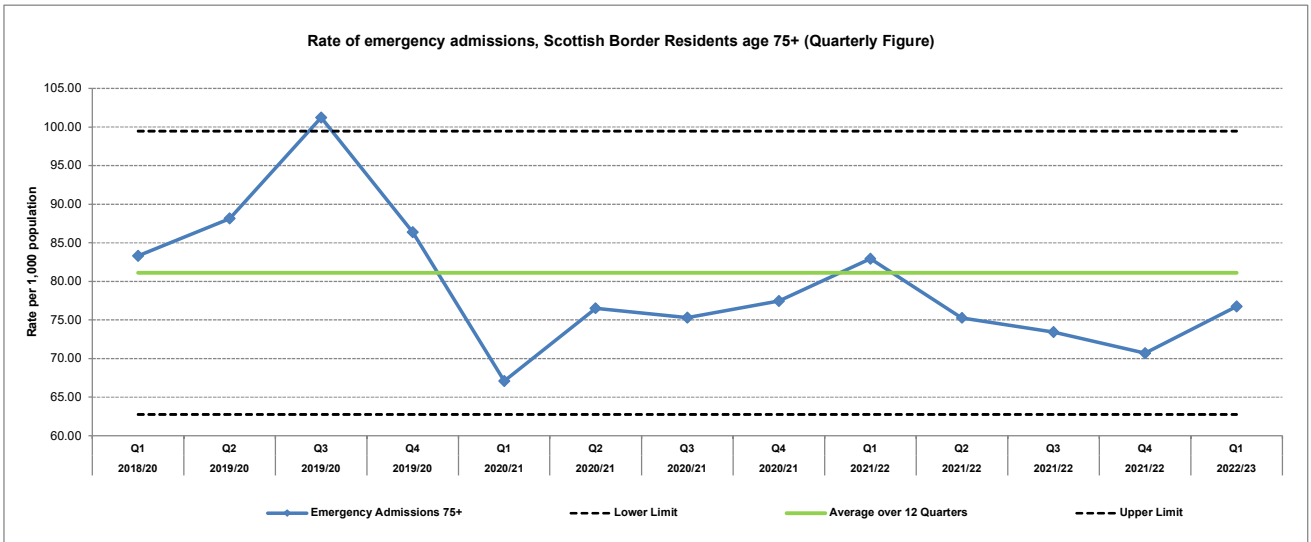
How are we performing?

The rate of emergency admissions continues to see minor fluctuations between quarters. Emergency Admission rates significantly reduced in both Q4 19/20 and Q1 20/21. This is reflective of the impact of the Covid-19 pandemic and the National measures introduced to reduce the spread of the virus. This rose again in Q2, following a similar trend to that of the rest of Scotland. The gap between the rate of emergency admissions for the Scottish Borders and the national average has increased between Q1 and Q2 2021/22, with rate of emergency admissions remaining below the national average." There has been a dip subsequently in Q3 and Q4 2020/21 during the pandemic but emergency admissions have rose again in April - June 2021. Since that point there has been a reduction each quarter, both locally and nationally. It is worth noting that data for 22/23 is currently unavailable.

Emergency Admissions, Scottish Borders residents age 75+

Source: NSS Discovery data

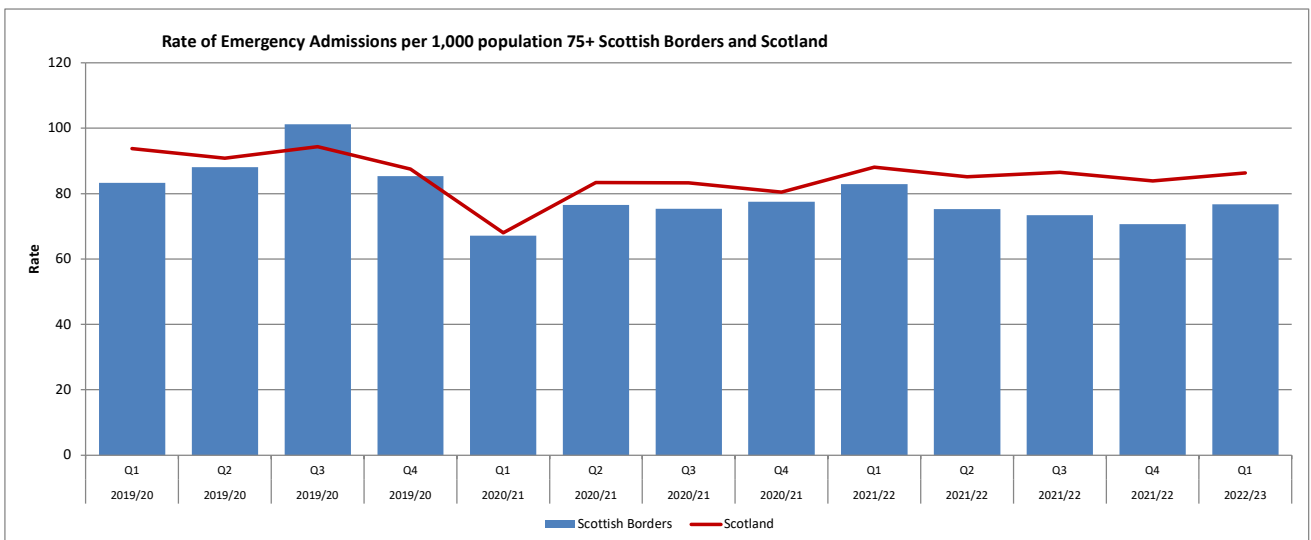
	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23
Number of Emergency Admissions, 75+	1,020	1,079	1,239	1,057	846	965	947	977	1,046	970	946	907	1,016
Rate of Emergency Admissions per 1,000 population 75+	83.3	88.2	101.2	86.4	67.1	76.5	75.3	77.5	82.9	75.3	73.4	70.7	76.8



Emergency Admissions comparison, Scottish Borders and Scotland residents age 75+

Source: NSS Discovery data

	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23
Rate of Emergency Admissions Scottish Borders	83.3	88.1	101.2	85.3	67.1	76.5	75.3	77.5	82.9	75.3	73.4	70.7	76.8
Rate of Emergency Admissions 75+ Scotland	93.7	90.8	94.4	87.5	68.0	83.4	83.3	80.5	88.0	85.2	86.5	83.9	86.3



Please Note: where two areas are concerned it is not possible to show values as a control chart.

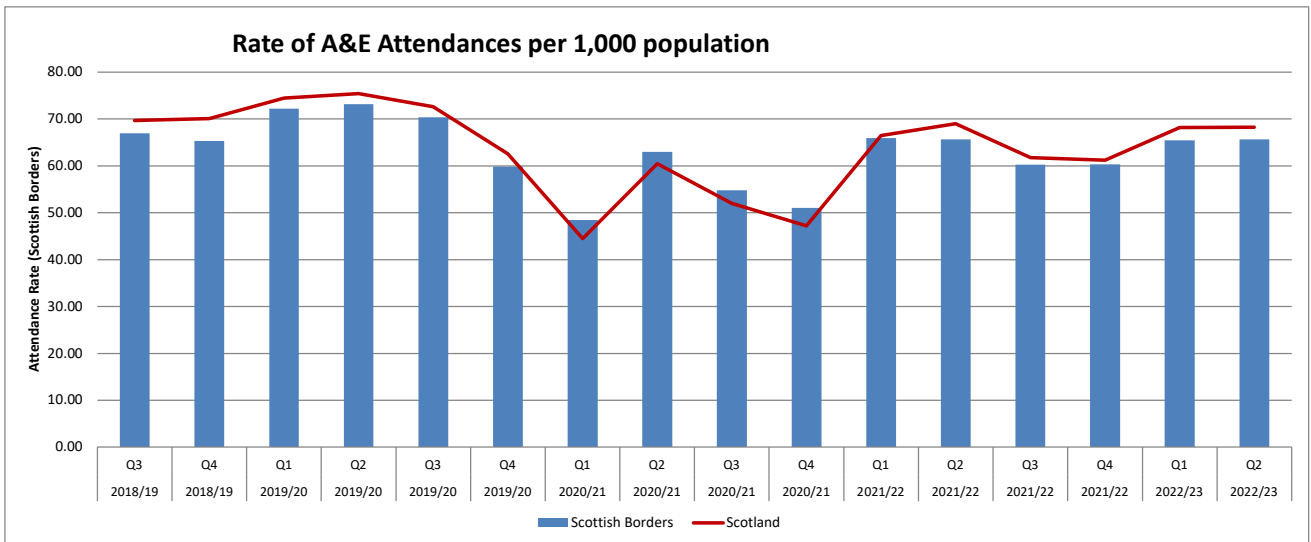
How are we performing?

In line with the rate of emergency admissions for all ages, the rate of emergency admissions for people over the age of 75 in the Scottish Borders remains below the national average. The rate of 75+ emergency admissions was showing a negative trend over the last 3 years until Q4 2019/20. The graph shows Emergency Admission rates, for the 75+ age group, have dramatically decreased in Q4 2019/20 and Q1 2020/21. This change comes following the highest reported rate of admissions for this age group in the last 3 years - pushing the Borders rate ahead of the Scottish average. Again the onset of the Covid-19 pandemic during Q4 2019/20, and its ongoing effects, would explain the sudden decrease in Emergency Admissions over the Q4 19/20 and Q1 20/21. Q2 20/21 to Q1 21/22 saw this rate increase slightly, although the next 3 quarters reduced. The Borders' rates have remained below the average over 12 quarters, of the 13 reported and the gap has widened for Q2 - Q4 2021/22.

Rate of A&E Attendances per 1,000 population

Source: MSG Integration Performance Indicators workbook (data from NHS Borders Trakcare system)

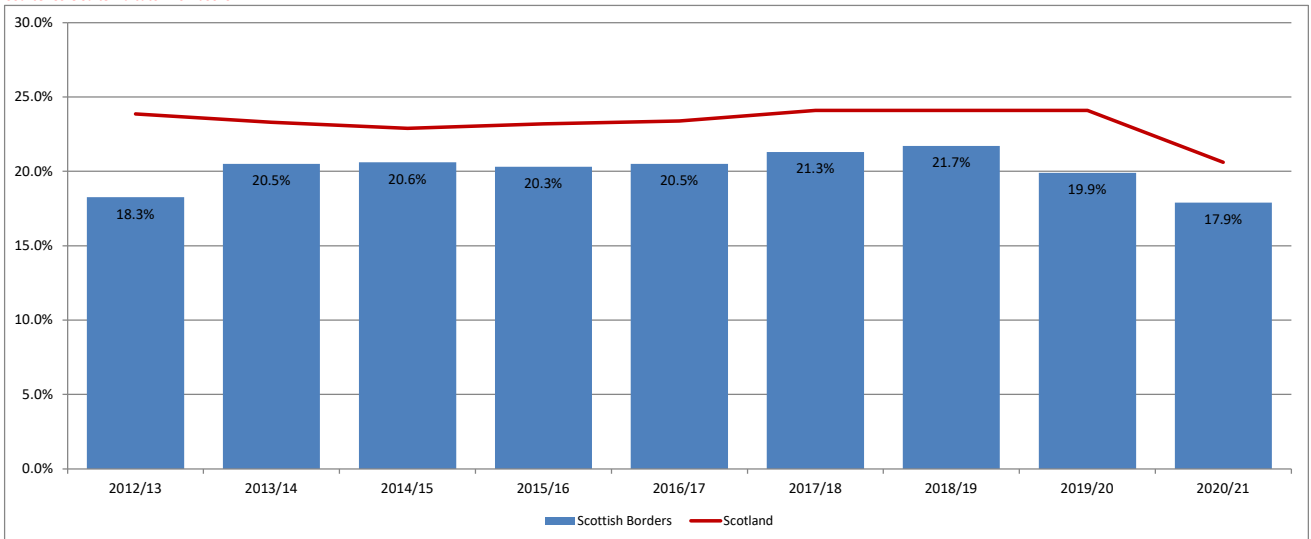
	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23
Rate of Attendances, Scottish Borders	73.3	70.5	60.0	48.5	63.0	54.7	51.0	65.9	65.6	60.2	60.4	65.5	65.7
Rate of Attendances, Scotland	75.7	72.9	62.9	44.6	60.5	52.3	47.3	66.4	69.0	61.7	61.2	68.2	68.3



Please Note: where two areas are concerned it is not possible to show values as a control chart.

Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency: persons aged 18+

Source: Care Suite Indicator workbooks



Please Note: where two areas are concerned it is not possible to show values as a control chart.

How are we performing?

The onset of the COVID-19 pandemic (Q4 19/20 onwards) saw the rate of A&E attendances drastically reduce, with Q1 20/21 showing the lowest rate over the last 3 years. However, Q2 20/21 (Jul-Sept 20) saw this rise to almost 'normal' levels at 62.4 admissions per 1,000 of the population. After 2 quarters decreasing, rates rose again from Q1 2021/22. This behaviour mirrors that of the overall Scottish rate although it should be noted that in both Q1 of 20/21 to Q1 of 2021/22 saw the Borders rate being greater than Scotland's.

The percentage of health and social care resource spent on unscheduled hospital stays has seen an overall slight decrease over the past 3 years.

Both these indicators are impacted by the effects of the COVID-19 pandemic. The rate of emergency attendances in the Scottish Borders is slightly below the Scottish Borders rate.

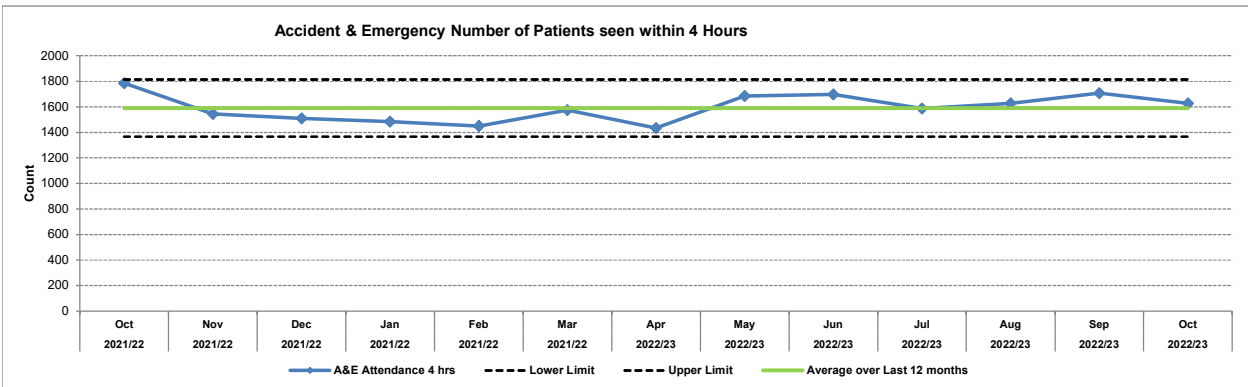
NB: December 2019, the denominator for this indicator now includes dental and ophthalmic costs. As a result, the % of spend has slightly decreased. The Table and Chart above have been updated to reflect the altered % as a result of this change.

Objective 2: We will improve patient flow within and out with hospital

Accident and Emergency attendances seen within 4 hours- Scottish Borders

Source: NHS Borders Trakcare system

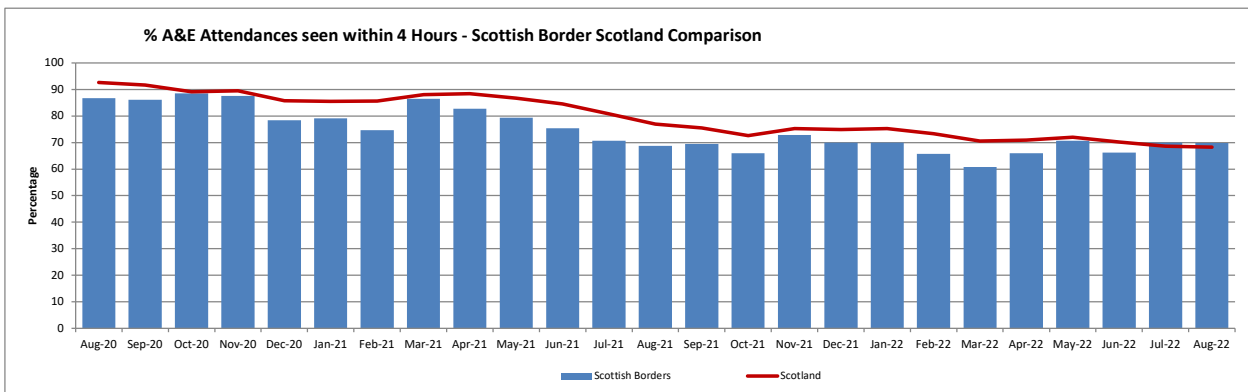
	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22
Number of A&E Attendances seen within 4 hours	1785	1543	1509	1484	1451	1574	1434	1686	1698	1586	1628	1708	1626



% A&E Attendances seen within 4 Hours - Scottish Borders and Scotland Comparison

Source: MSG Integration Performance Indicators workbook (A&E2 data) / ISD Scotland ED Activity and Waiting Times publication

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22
% A&E Attendances seen within 4 hour Scottish Borders	66.0	72.9	70.0	70.0	65.7	60.7	64.0	60.9	56.7	69.9	69.8	69.9	69.8
% A&E Attendances seen within 4 hour Scotland	72.6	75.2	74.9	75.2	73.4	70.6	71.0	72.0	70.1	68.5	68.2	68.5	68.2



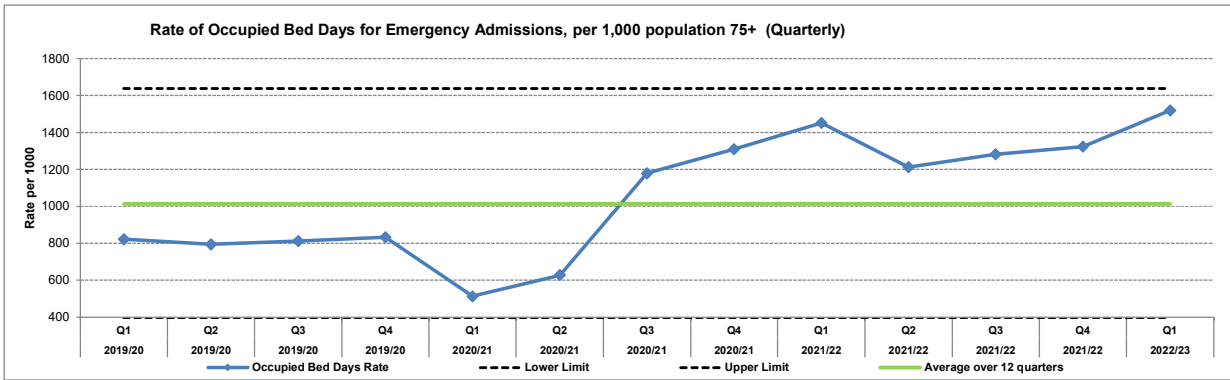
How are we performing?

Historically, NHS Borders consistently performed better than the Scottish comparator for A&E waiting times. Borders had fallen below the Scottish Average in all months reported since June 2020. The gap widened significantly since the onset of the COVID-19 pandemic in March 2020. The Scottish average is declining and the Borders position has mirrored this over the calendar year 2022.

Occupied Bed Days for emergency admissions, Scottish Borders Residents age 75+

Source: NSS Discovery data

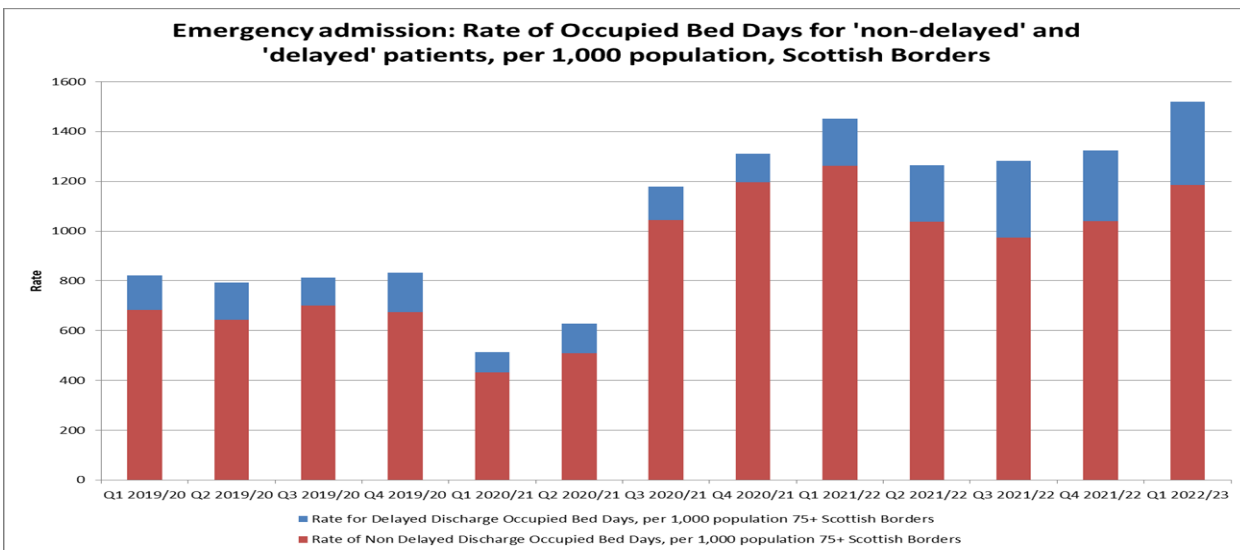
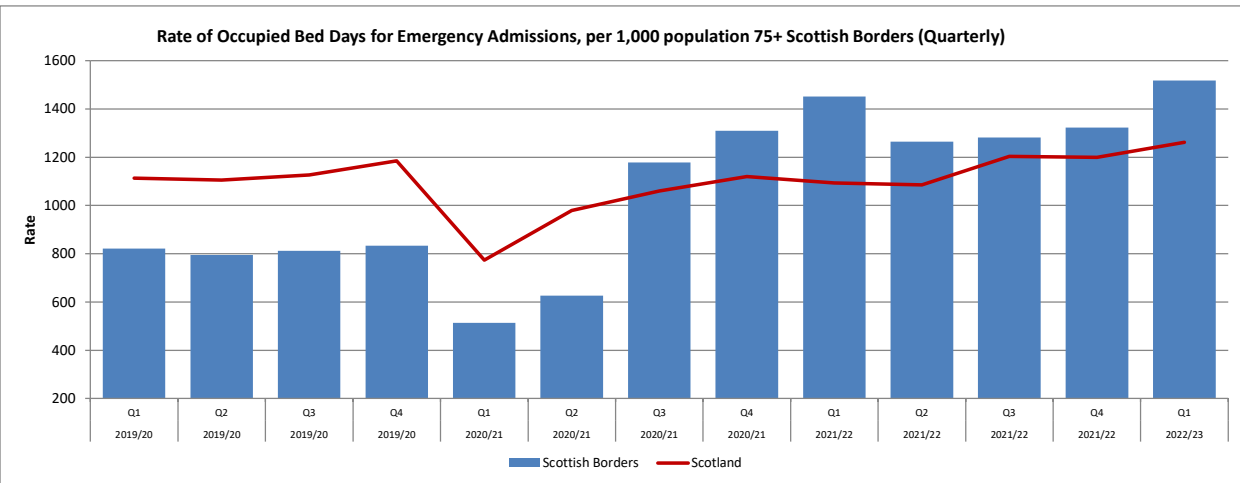
	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23
Number of Occupied Bed Days for emergency Admissions, 75+	822	794	812	833	513	627	1179	1310	1452	1212	1282	1323	1519
Rate of Occupied Bed Days for Emergency Admissions, per 1,000 population 75+	10056	9719	9933	10505	6471	7903	14861	16521	18378	15625	16465	16829	20109



Occupied Bed Days for emergency admissions, Scottish Borders and Scotland Residents age 75+

Source: NSS Discovery data

	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23
Rate of Occupied Bed Days for Emergency Admissions, per 1,000 population 75+ Scottish Borders	822	794	812	833	513	627	1179	1310	1452	1265	1282	1323	1519
Rate of Occupied Bed Days for Emergency Admissions, per 1,000 population 75+ Scotland	1114	1105	1127	1185	774	979	1060	1119	1093	1085	1203	1200	1262



Please Note: where two areas are concerned it is not possible to show values as a control chart.

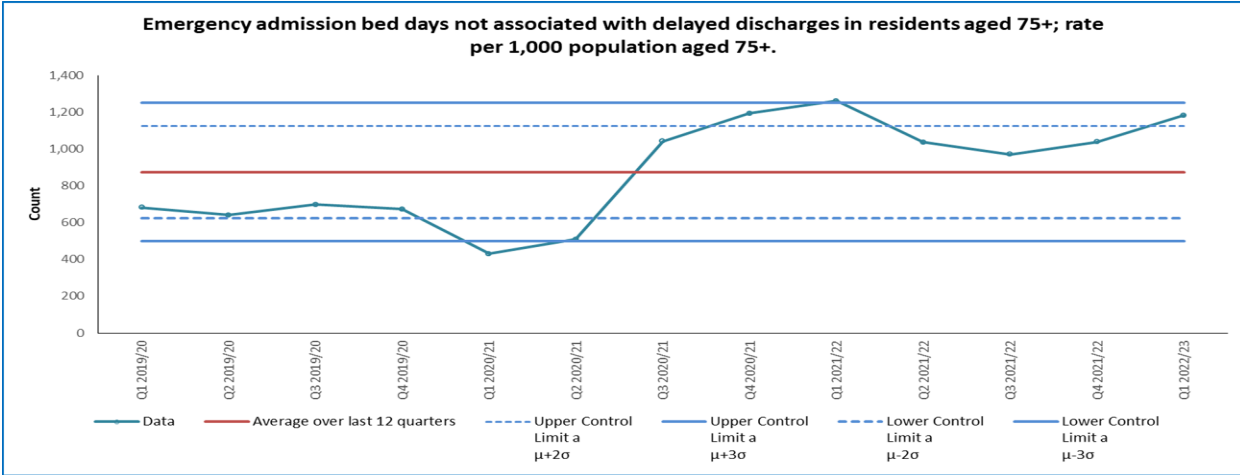
How are we performing?

NB: Data for Community Hospitals is included in both Bed Days measures from Q3 2020/21 onwards.

The quarterly occupied bed day rates for emergency admissions in Scottish Borders residents aged 75+ has fluctuated over time and had been lower than the Scottish Average until Q3 20/21 when Community Hospitals data are included. There was a reduction between Q1 2021/22 and Q2 2021/22 but rates have increased again from that point. At the end of Q1 2022/23, Occupied bed days were higher than the Scottish average. This was as a result of an increase in length of stay for all patients, comprising an increased length of non-delayed discharge length of stay, and an increased length of stay for those during their delayed discharge period.

Non-delayed occupied bed days

Source: NSS Discovery data



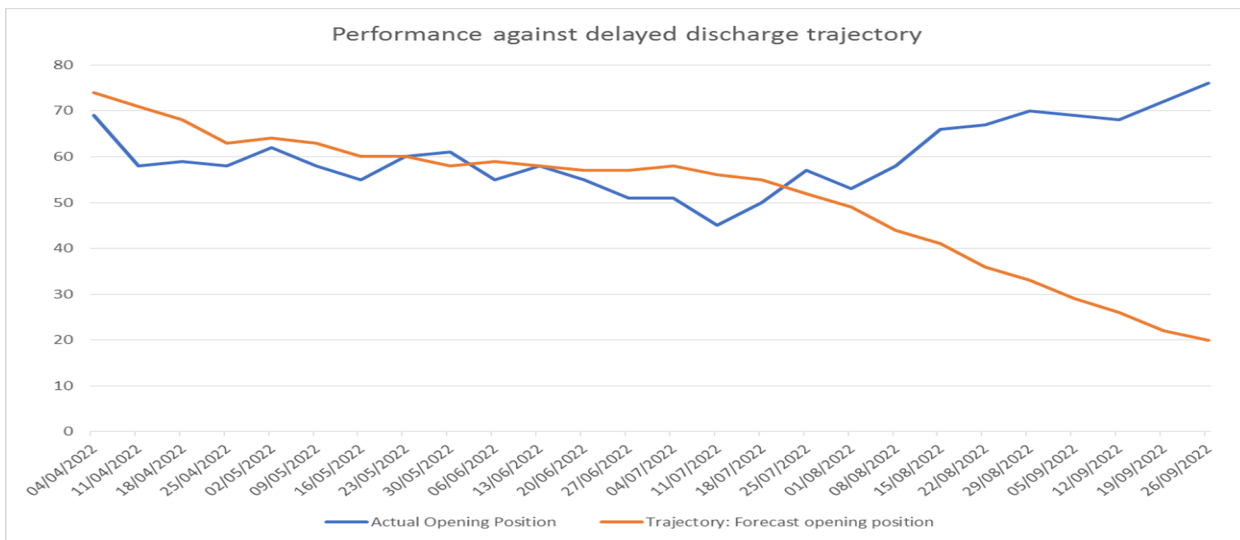
How are we performing?

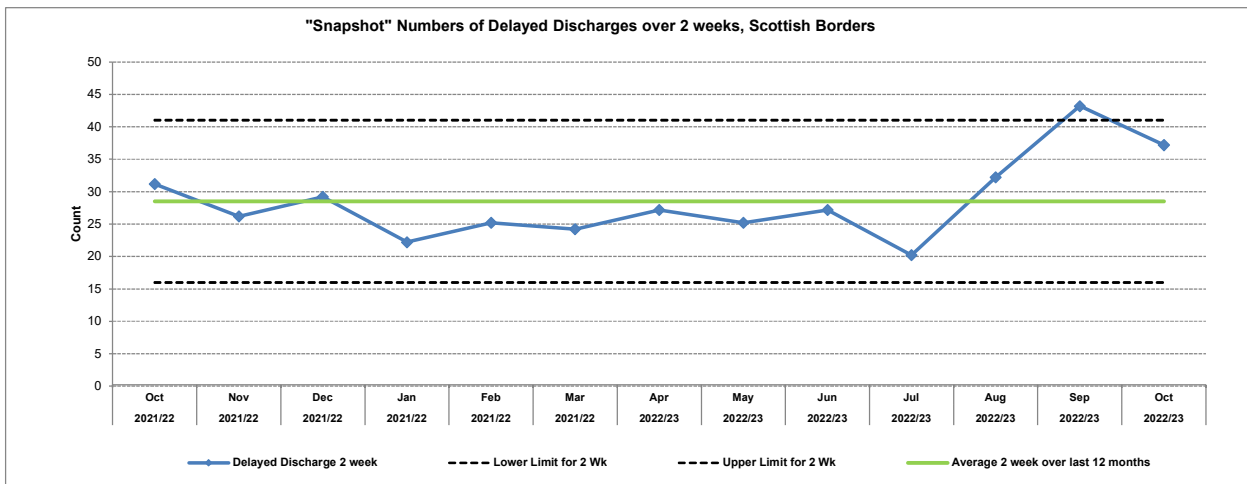
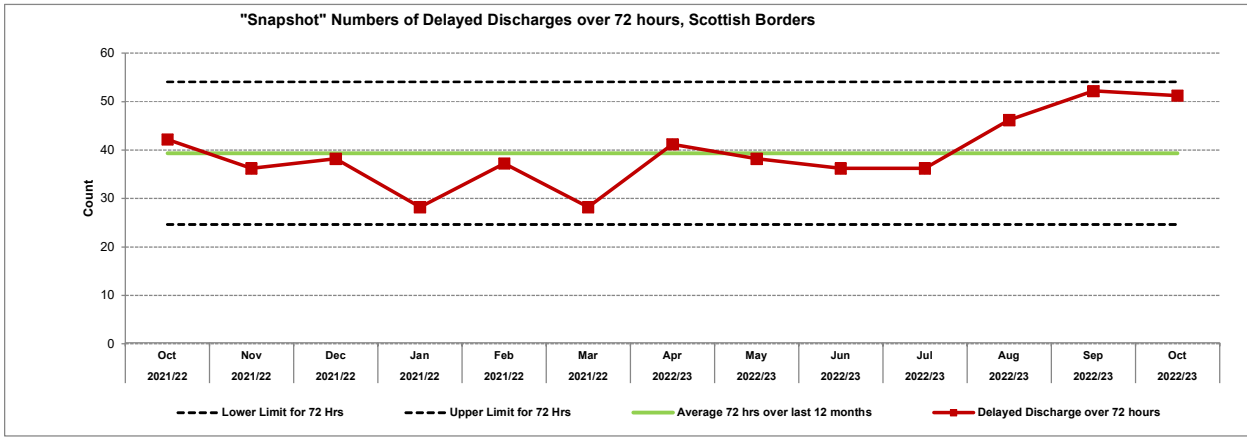
Although, at the onset of the COVID-19 pandemic there was a reduction in the number of emergency bed days that were not associated to delayed discharges, this was short-lived and these have again been on an increasing trend since May 20. This peaked in Q1 2021/22, and then reduced to Q3 2021/22, where it then started to increase to Q1 2022/23. The Scottish Borders Health and Social Care Partnership is facing significant challenges with increased length of stay, which continues to impact on patient flow within the Borders General Hospital, Mental Health and our four Community Hospitals.

Delayed Discharges (DDs)

Source: NHS Borders Trakcare system

	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22
Number of DDs over 2 weeks	31	26	29	22	25	24	27	25	27	20	32	43	37
Number of DDs over 72 hours	42	36	38	28	37	28	41	38	36	36	46	52	51





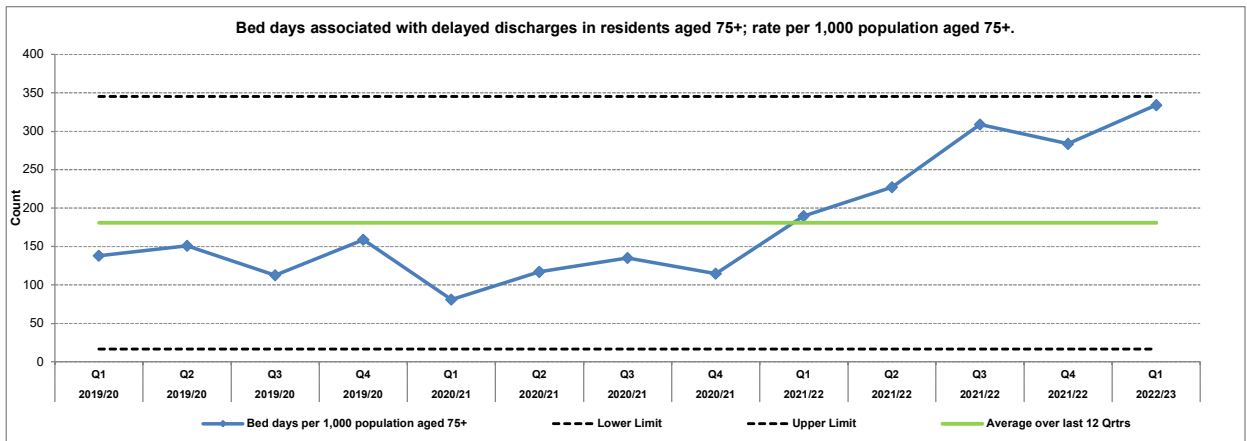
Please note the Delayed Discharge over 72 hours measurement has been implemented from April 2016.

The DD over 2 weeks measurement has several years of data and has been plotted on a statistical run chart (with upper, lower limits and an average) to provide additional statistical information to complement the more recent 72 hour measurement.

Bed days associated with delayed discharges in residents aged 75+; rate per 1,000 population aged 75+

Source: Core Suite Indicator workbooks

	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23
Bed days per 1,000 population aged 75+	137.9	150.8	112.4	158.6	80.9	116.8	135.0	114.7	189.3	227.0	308.8	283.5	334.0



How are we performing?

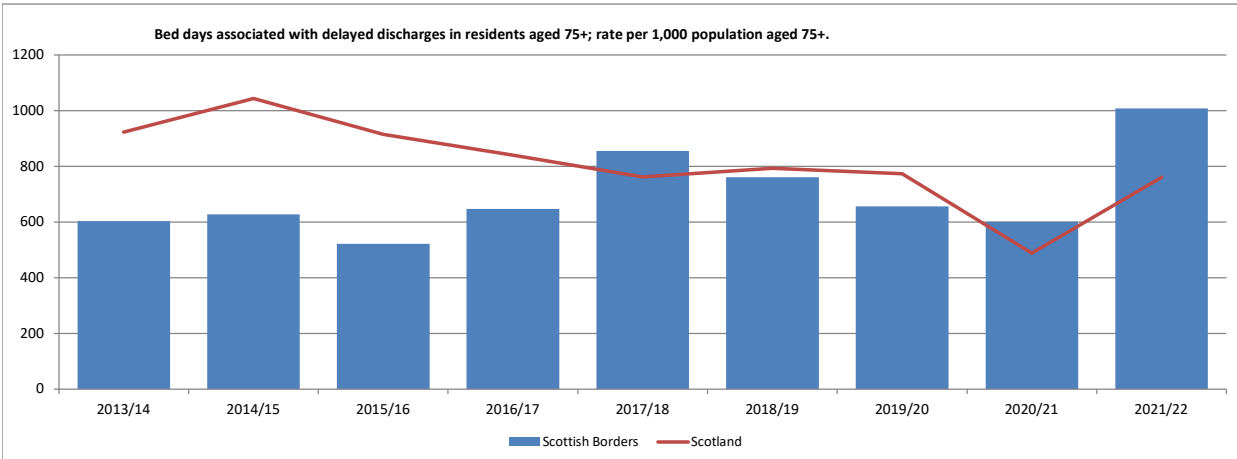
Although, at the onset of the COVID-19 pandemic there was a reduction in the number of delayed discharges, this was short-lived and these have again been on an increasing trend since May 20. December 2020 demonstrated a drop in delayed discharges; this is in-line with the previous year although the 2020 figure is higher than in 2019. In 2021 the rate of delayed discharges started to increase from February 2021 onwards. This was associated to an increase in demand for care which has gone beyond the levels of available care capacity and other removals. October 2021 was the first month to show a reduction in over 72 hour waits. Rates have been fluctuating from that point, despite increases in care capacity.

The rate of bed days associated with delayed discharges (75+) from Q1 2019/20 to Q4 2020/21 show fluctuations within control limits, there has been an increase since Q1 21/22 in the bed day rate. The Scottish Borders Health and Social Care Partnership is facing significant challenges with Delayed Discharges, which continues to impact on patient flow within the Borders General Hospital and our four Community Hospitals. The trajectory put in place to the end of September 2022 shows that currently the Partnership is above target.

Scotland / Scottish Borders comparison of bed days associated with delayed discharges in residents aged 75+

Source: Core Suite Indicator workbooks

	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
Scottish Borders	522	647	855	761	656	601	1009
Scotland	915	841	762	793	774	488	761



Please Note: where two areas are concerned it is not possible to show values as a control chart.

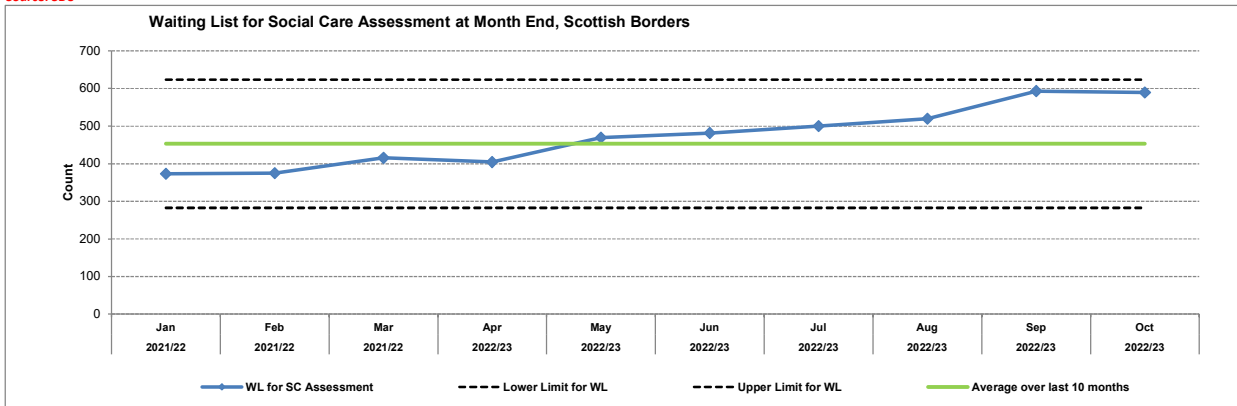
How are we performing?

Up to 2016/17, rates for the Scottish Borders were lower (better) than the Scottish average. However, in 2017/18 the Borders' rate was higher than Scotland's. This reduced in 2018/19 - when the Scottish average increased - and further reduced in 2019/20 and 2020/21. 2021/22 has seen a marked increase however.

*Please note definitional changes were made to the recording of delayed discharge information from 1 July 2016 onwards. Delays for healthcare reasons and those in non hospital locations (e.g. care homes) are no longer recorded as delayed discharges. In this indicator, no adjustment has been made to account for the definitional changes during the year 2016/17. The changes affected reporting of figures in some areas more than others therefore comparisons before and after July 2016 may not be possible at partnership level. It is estimated that, at Scotland level, the definitional changes account for a reduction of around 4% of bed days across previous months up to June 2016, and a decrease of approximately 1% in the 2016/17 bed day rate for people aged 75+.

Social Care Assessment Waiting List

Source: SBC



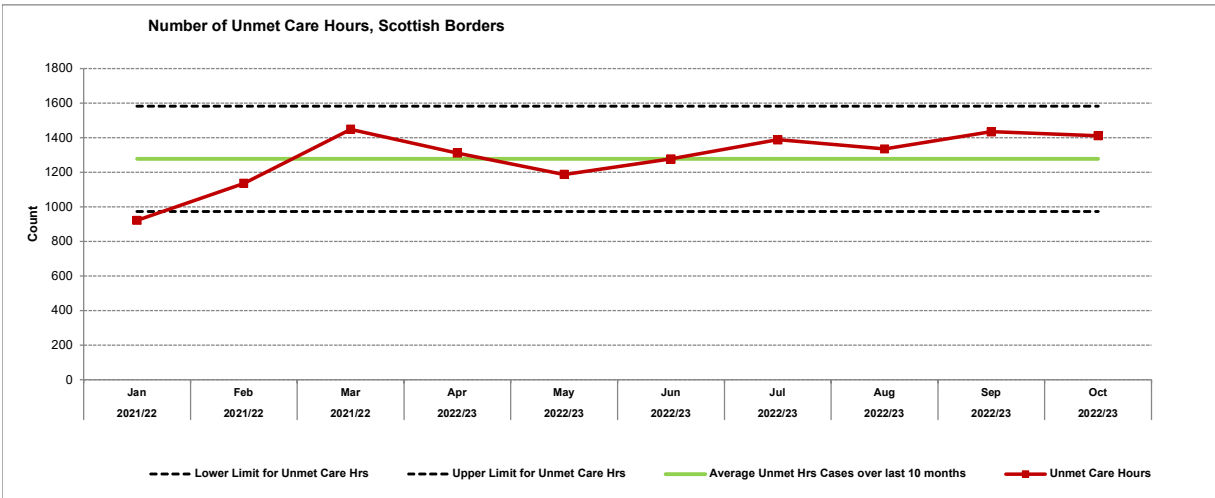
How are we performing?

Information is provided for the end of month position for the last 10 months to August 2022. This shows that patients waiting for Social Care Assessments are increasing month on month from Nov 2021 to date.

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

Care Hours Yet to be Provided for Those Assessed as Requiring Them

Source: SBC



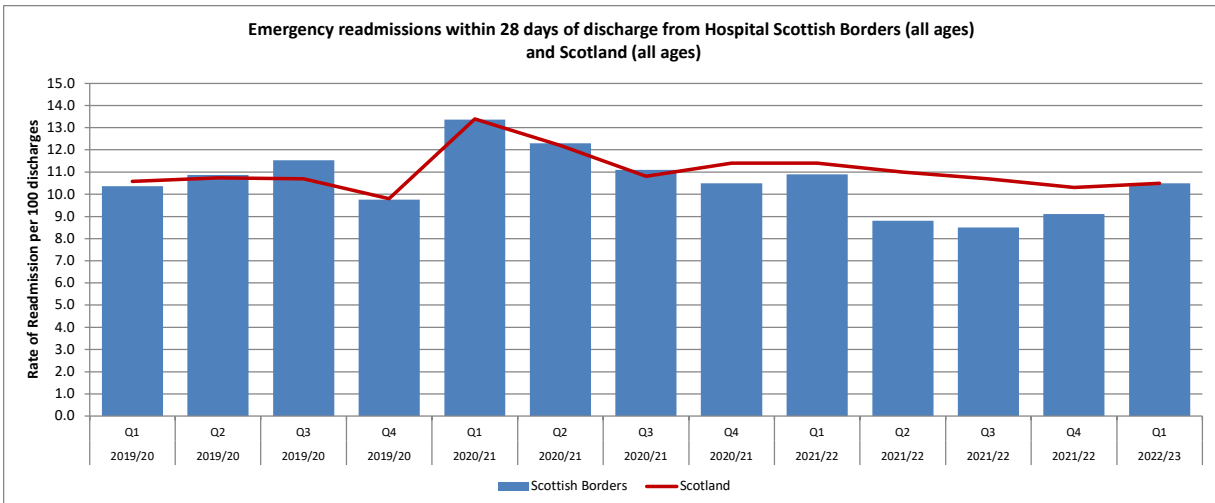
How are we performing?

Information is provided for the end of month position for the last 10 months to August 2022. This shows that unmet care hours peaked in March 2022 and have fluctuated since then at a lower level.

Emergency readmissions within 28 days of discharge from hospital, Scottish Borders residents (all ages)

Source: NSS Discovery data

	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23
Scottish Borders	10.4	10.9	11.5	9.8	13.4	12.3	11.1	10.5	10.9	8.8	8.5	9.1	10.5
Scotland	10.6	10.7	10.7	9.8	13.4	12.2	10.8	11.4	11.4	11.0	10.7	10.3	10.5



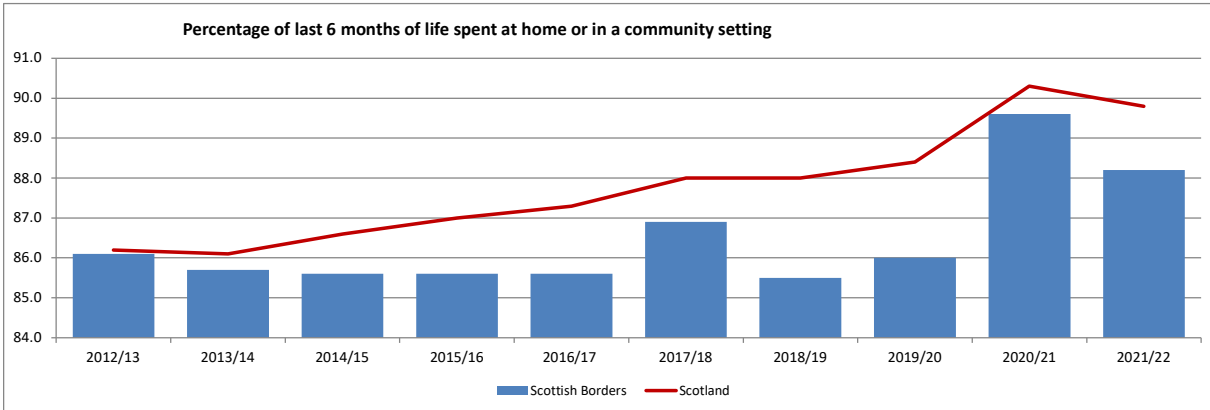
How are we performing?

The rate of emergency readmissions within 28 days of discharge shows an improving position over the last 3 quarters of 2021/22. The Borders rate which has been generally higher than the Scottish average has reduced to below the national position for the last 5 quarters to March 2022.

Percentage of last 6 months of life spent at home or in a community setting

Source: Core Suite Indicator workbooks

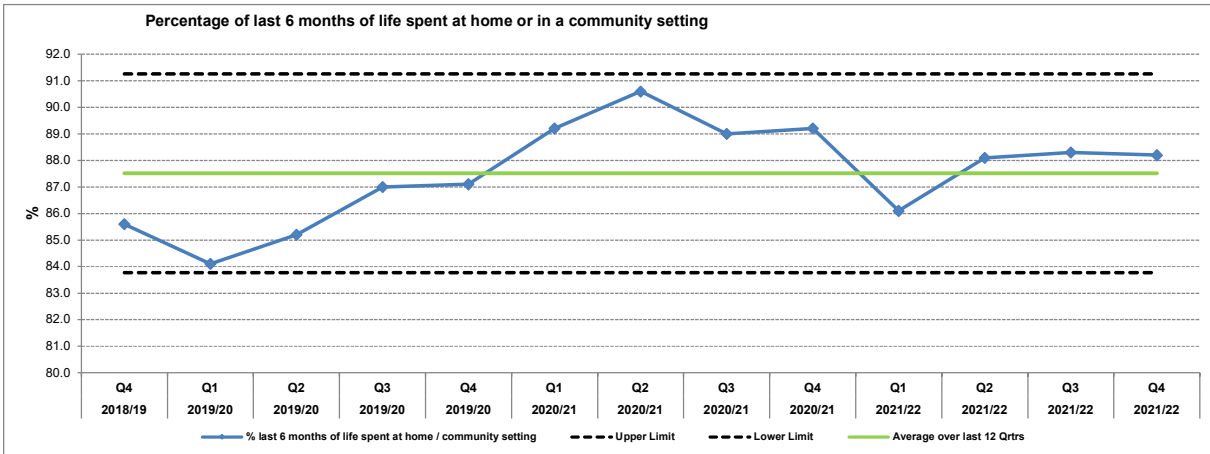
	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
Scottish Borders	86.1	85.7	85.6	85.6	85.6	86.9	85.5	86.0	89.5	88.2
Scotland	86.2	86.1	86.6	87.0	87.3	88.0	88.0	88.3	90.2	89.8



Percentage of last 6 months of life spent at home or in a community setting

Source: Core Suite Indicator workbooks

	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22
% last 6 months of life spent at home or in a community setting Scottish Borders	85.6	84.1	85.2	87.0	87.1	89.2	90.6	89.0	89.2	86.1	88.1	88.3	88.2



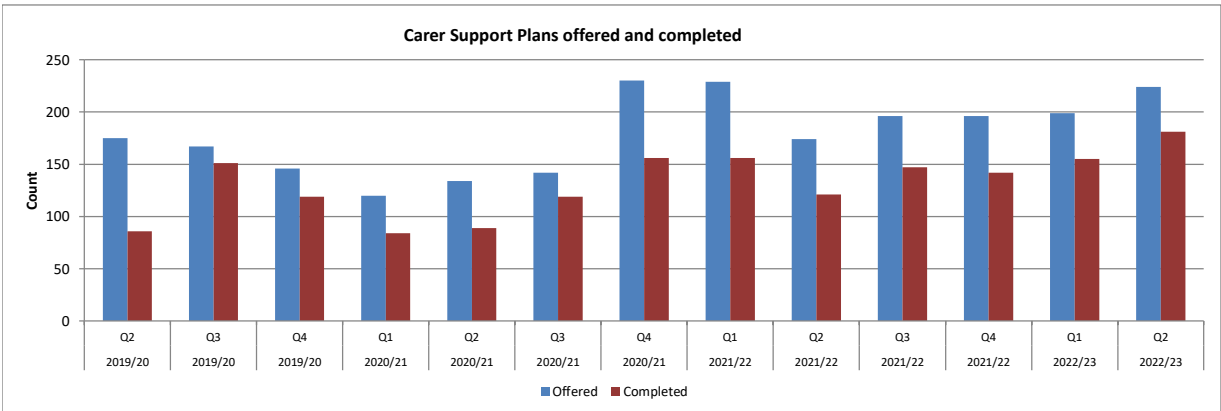
How are we performing?

The percentage of last 6 months of life spent at home or in a community setting remains below the Scottish average. Following a drop in 2018/19, 2019/20 saw performance improve for this measure. The first two quarters of 20/21 demonstrated continued improvement against this indicator. Q2 20/21 demonstrated the highest percentage (90.6%) in the last 3 years for people spending the last 6 months at home or in a Community setting. After this point there was a slight decrease which then stabilised to 88.2% of the last six months of life being spent at home or in a community setting.

Carers offered and completed Carer Support Plans

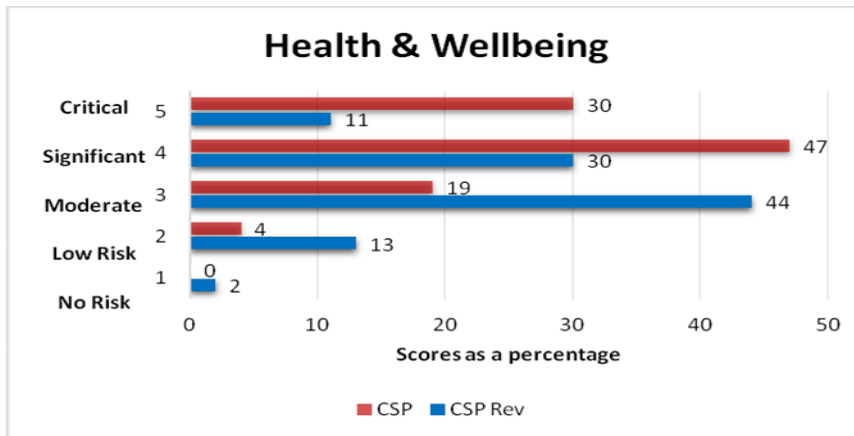
Source: Borders Carers Centre

	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23
Carer Support Plans Offered	175	167	146	120	134	142	230	229	174	196	196	199	224
Carer Support Plans Completed	86	151	119	84	89	119	156	156	121	147	142	155	181



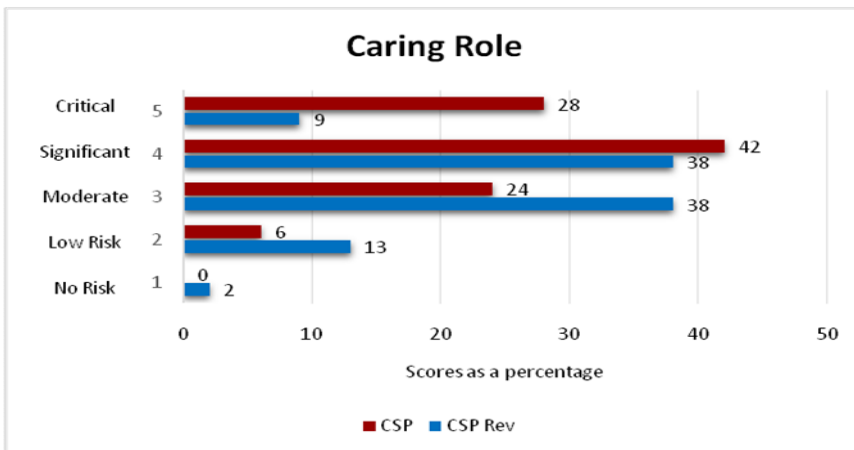
Health and Wellbeing (Q2 2022/23)

I think my quality of life just now is:



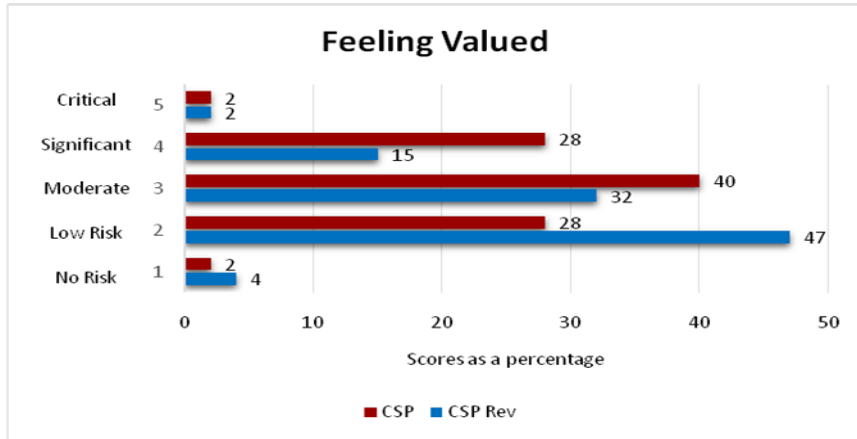
Managing the Caring role (Q2 2022/23)

I think my ability to manage my caring role just now is:



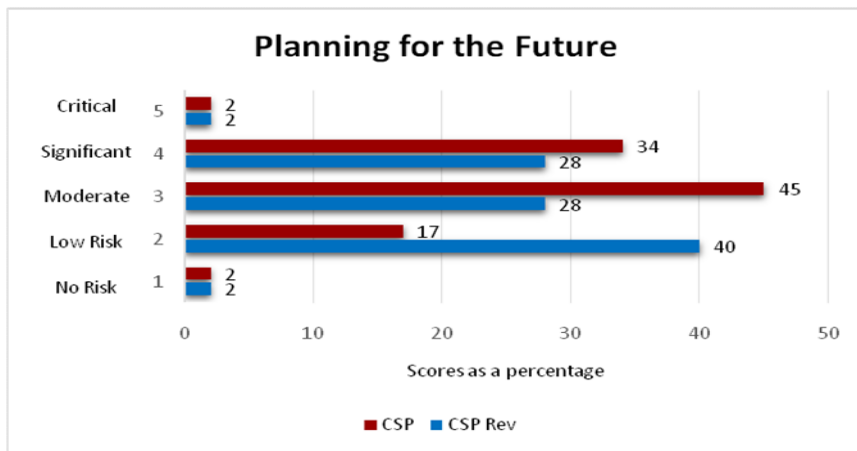
How are you valued by Services (Q2 2022/23)

I think the extent to which I am valued by services just now is:



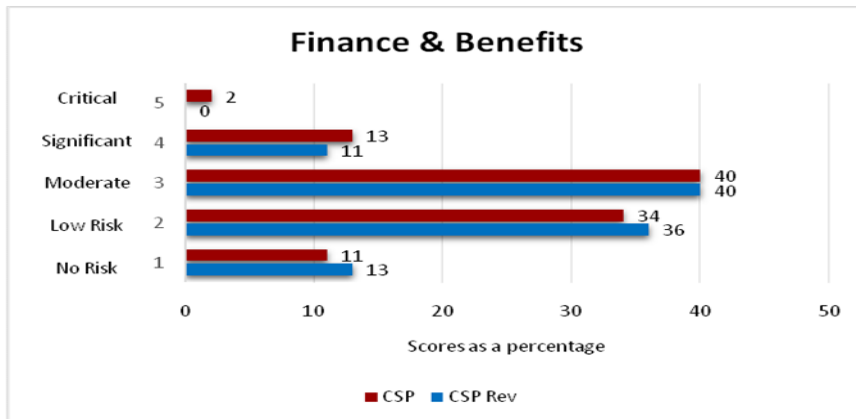
Planning for the Future (Q2 2022/23)

I think where I am at with planning for the future is:



Finance & Benefits (Q2 2022/23)

I think where I am at with action on finances and benefits is:



How are we performing?

There has been a continued increase in the number of completed CSPs over the past 4 quarters.

It can be implied from the movement between categories that we are managing to lift Carers out of the 'Critical Risk' category to 'Significant Risk' and from 'Significant Risk' to 'Moderate Risk' category.