

Health and Social Care PARTNERSHIP

Quarterly Performance Report for the Scottish Borders Integration Joint Board November 2023

SUMMARY OF PERFORMANCE:

Latest available Data at end June 2023

Structured Around the 6 Objectives in the Strategic Plan:

Objective 1: Improving Access

Objective 2: Rising to the workforce challenge

Objective 3: Prevention and early intervention

Objective 4: Supporting unpaid carers

Objective 5: Improving effectiveness and efficiency

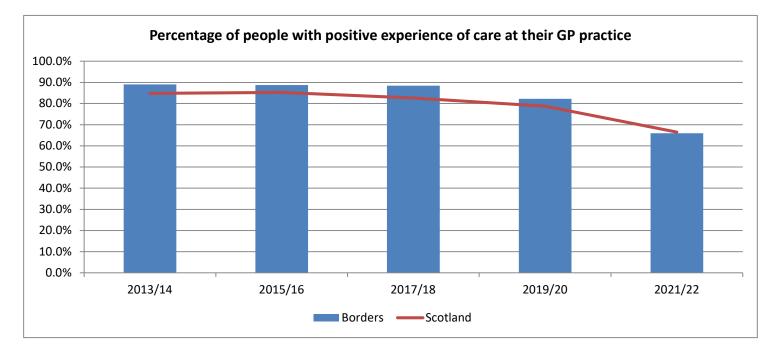
Objective 6: Reducing Proverty and Inequalities

Objective 1. Improving Access

Percentage of people with positive experience of care at their GP

Source: Core Suite Indicator workbooks

	2013/14	2015/16	2017/18	2019/20	2021/22
Borders	89.0%	88.7%	88.5%	82.3%	65.9%
Scotland	84.8%	85.3%	82.7%	78.7%	66.5%

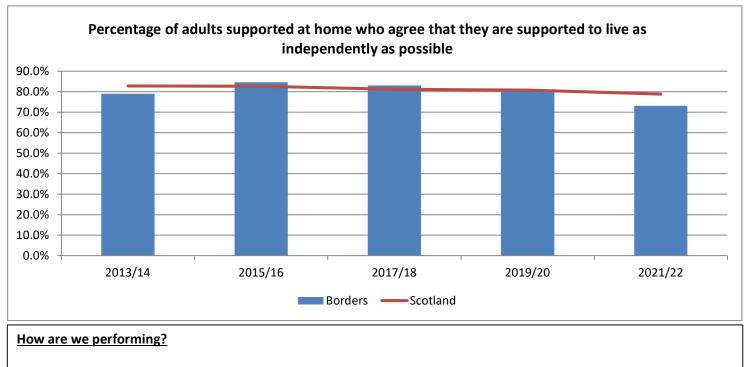


How are we performing?

Rates for both Scotland and Scottish Borders for the percentage of people with a positive experience of care at their GP practice decreased from a high point in 2013/14 to 2021/22. The Scotland rate is 0.6% higher than the Borders rate.

<u>Percentage of adults supported at home who agree that they are supported to live as independently as possible</u> <u>Source: Core Suite Indicator workbooks</u>

	2013/14	2015/16	2017/18	2019/20	2021/22
Borders	79.0%	84.6%	83.1%	81.1%	73.1%
Scotland	82.8%	82.7%	81.1%	80.8%	78.8%

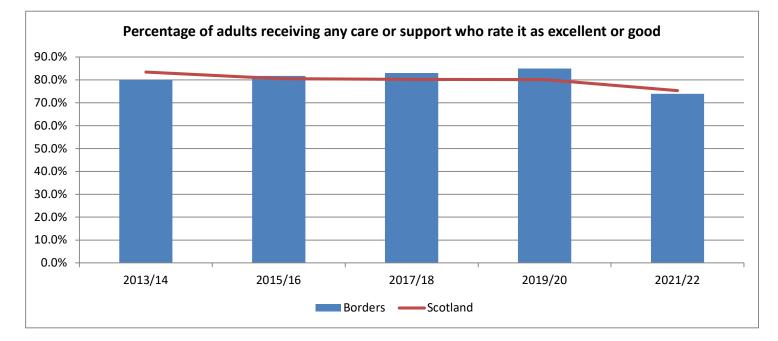


Rates for both Scotland and Scottish Borders for the percentage of adults supported at home who agree they are supported at home to live as independently as possible decreased from a high point in 2015/16 to 2021/22. The Scotland rate is 5.7% higher than the Borders rate.

Percentage of adults receiving any care or support who rate it as excellent or good

Source: Core Suite Indicator workbooks

	2013/14	2015/16	2017/18	2019/20	2021/22
Borders	80.0%	81.7%	83.1%	85.0%	73.9%
Scotland	83.4%	80.6%	80.2%	80.2%	75.3%

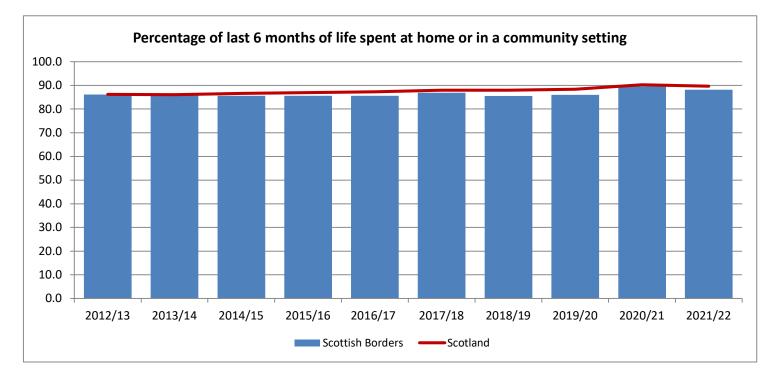


Rates for both Scotland and Scottish Borders for the percentage of adults receiving any care or support who rate it as excellent or good decreased from a high point in Borders for 2019/20 to 2021/22. The Scotland rate is 1.4% higher than the Borders rate.

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

Source: Core Suite Indicator workbooks

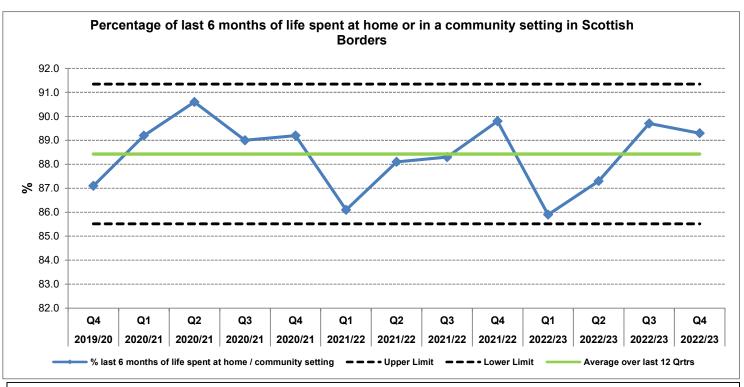
	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22
Borders	86.1	85.7	85.6	85.6	85.6	86.9	85.5	86.0	89.5	88.2
Scotland	86.2	86.1	86.6	87.0	87.3	88.0	88.0	88.3	90.2	89.8



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

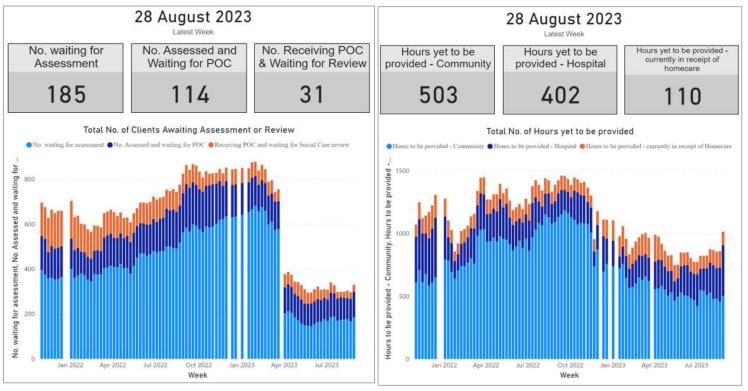
Source: Core Suite Indicator workbooks

	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	2019/20	2020/21	2020/21	2020/21	2020/21	2021/22	2021/22	2021/22	2021/22	2022/23	2022/23	2022/23	2022/23
Borders	87.1	89.2	90.6	89.0	89.2	86.1	88.1	88.3	89.8	85.9	87.3	89.7	89.3



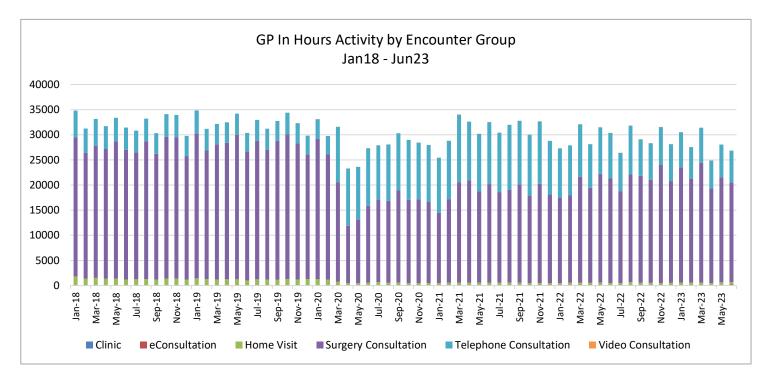
The percentage of last 6 months of life spent at home or in a community setting remains below the Scottish average. Following a drop in 2018/19, 2019/20 saw performance improve for this measure. The first two quarters of 20/21 demonstrated continued improvement against this indicator. Q2 20/21 demonstrated 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 decrease in performance, reducing to 86% in Q1 21/22. There was an improvement in the Q2 - Q4 period. This pattern was also seen during the first 3 quarters of 2022/23 with a dip in Q1 and improvement following in Q2 and Q3. This has decreased again slightly in Q4.

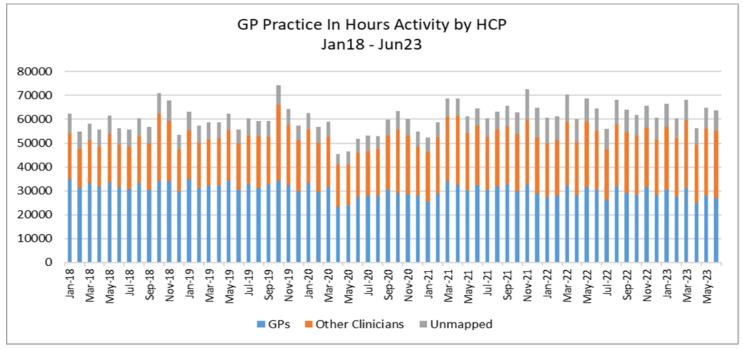
Social Work Assessment Waiting List and Total Hours of Unmet Homecare



GP In Hours Activity

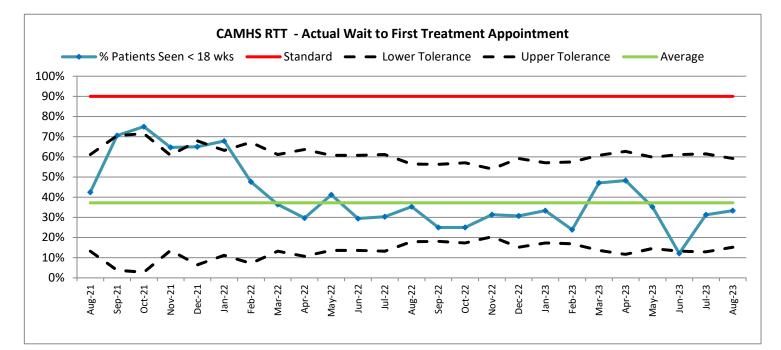
Source: GP Encounters Dataset, PHS

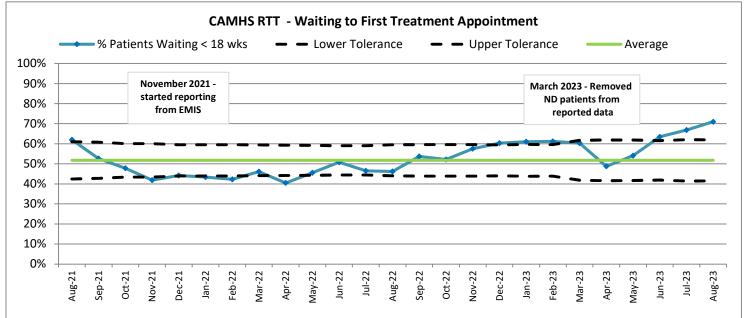




CAMHS Referral to Treatment

Source: CAMHS RTT national return to PHS





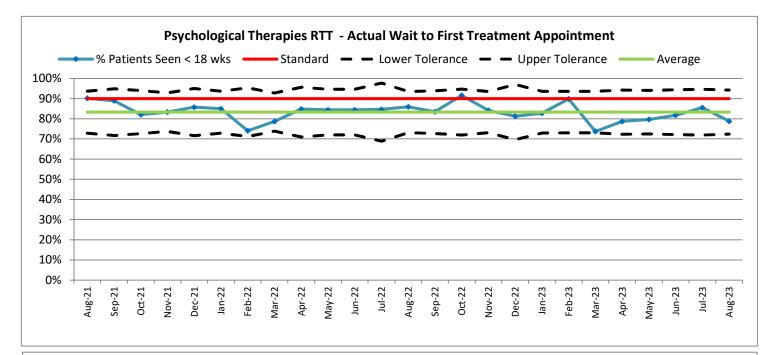
How are we performing?

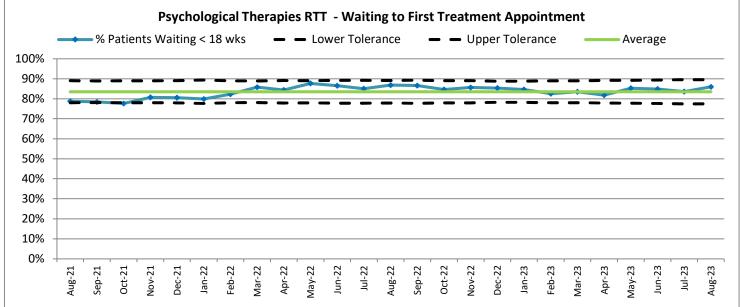
The percentage of waits for first treatment appointment in CAMHS seen within 18 weeks have been dropping since January 2022. The mean average for the period from August 2021 to August 2023 is 37%. In March/April this year the rates rose above the median to 47% and 48% respectively but have dropped back since then. In March 2023 Neurodevelopmental cases were removed from reporting in line with Scottish Government guidance.

The percentage on the waiting list under 18 weeks to first treatment have been rising since April 2023 to 71% in August 2023.

Psychological Therapies Referral to Treatment

Source: PT RTT national return to PHS





How are we performing?

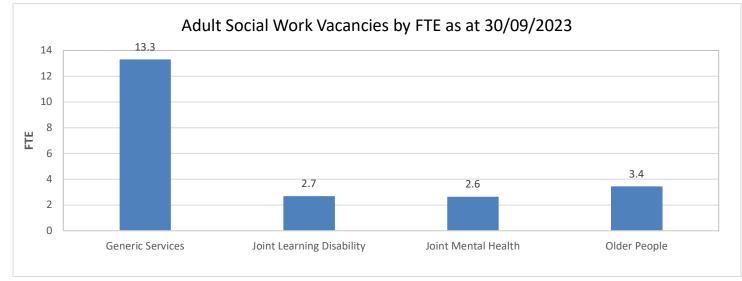
The percentage of waits for first treatment appointment in Psychological Therapies seen within 18 weeks from August 2021 onwards have been fluctuating around the mean average of 83% against the target of 90%. The target was achieved in October 2022 and February 2023.

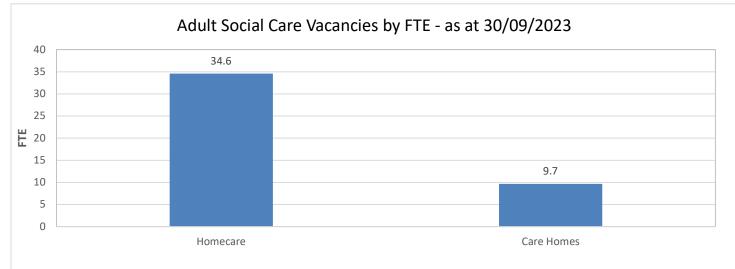
83.4% of patients on the waiting list for first treatment have been on average waiting for less than 18 weeks from August 2021 to August 2023.

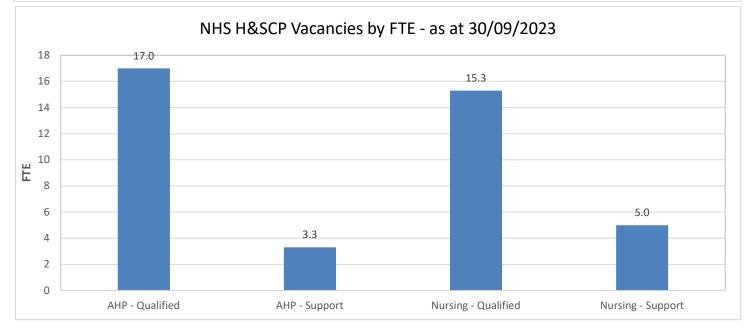
Objective 2. Rising to the workforce challenge

Vacancies by FTE

Source: HR, SBC; NHS Scotland Turas Dashboard

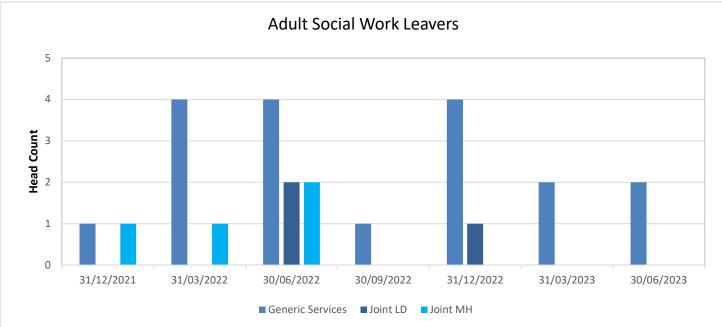




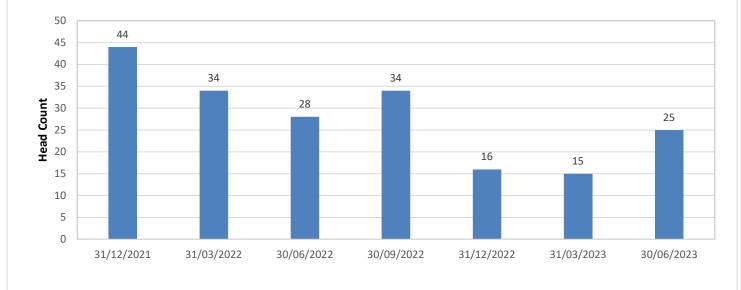


Leavers

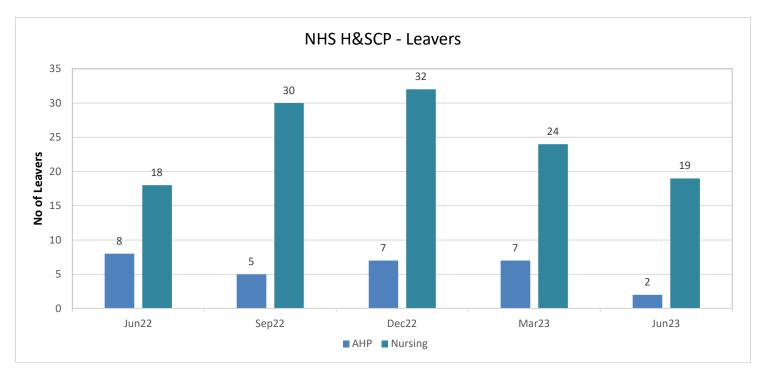






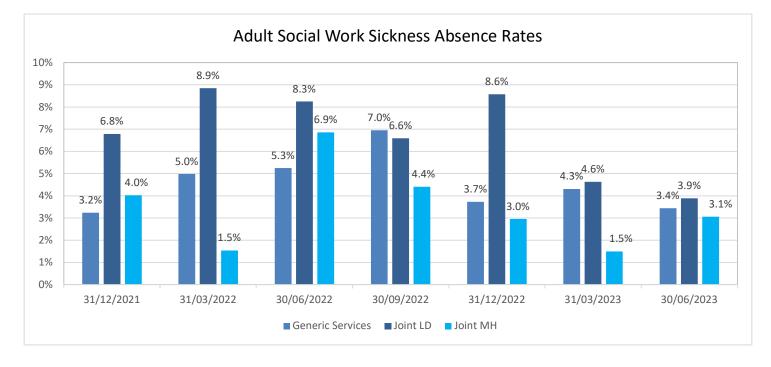


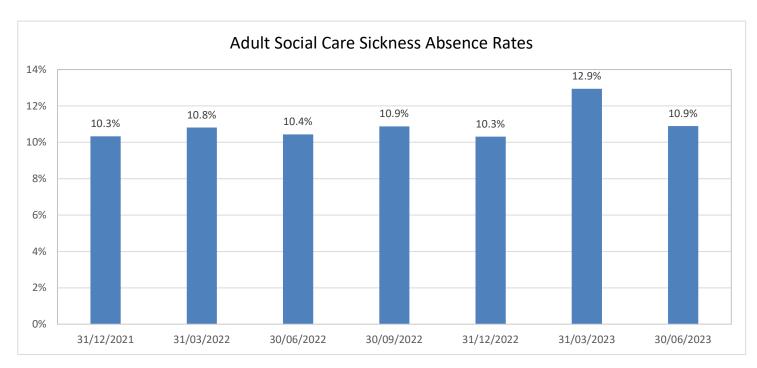
Source: NHS Regional HR Dashboard



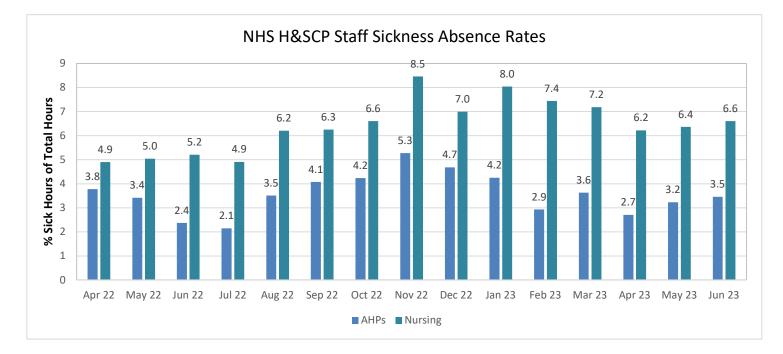
Sickness Absence Rates







Source: NHS Regional HR Dashboard



Adult Social work

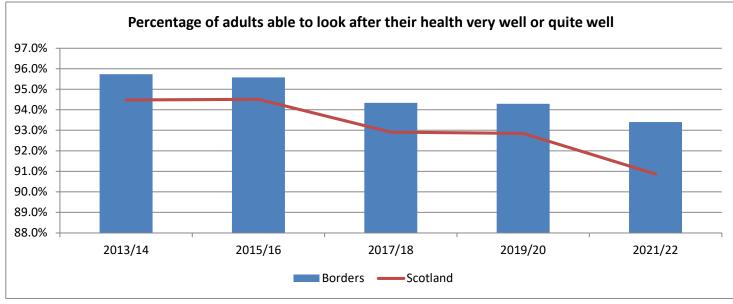
Adult Social work have experiences challenges with recruitment and retention of OTs, partly due to the difference in pay awards between NHS and COSLA. An OT assistant post is currently advertised, however, several unsuccessful adverts have been previously released due to no candidates/lack of qualified candidates.

Recruitment and retention of Social workers continues to be an issue both locally and nationally (although we are not one of the councils with the highest No of vacancies in the latest SSSC report) due to a shortage in those holding SW qualifications. Mitigation is being taken here with the Social Work trainee/grow your own scheme and have had approx. 10 Social workers successfully qualify (for all SW, including Adults, Justice and Childrens). Exit questionnaires received for the past 2 years are soon to be collated to get a better understanding of why staff choose to leave SBC. Further to this we are also going to approach those who move internally between services (Childrens to Adults and vice versa) to get a better understanding of what drives internal movement too.

Senior Social Worker and Assistant Team Leader pay has been highlighted by the service as an issue and is due to be addressed as part of the review of social work services which will resume following successful appointment to the Director of Social Work post. It is recognised both nationally and internally that career development for social workers (and OTs) is a key factor and not all those who want to develop their career want to take on leadership/line management, however may want to grow in terms of a specific specialism (an Advanced Practitioner).

Objective 3. Prevention and early intervention

Source: Core Suite Indicator workbooks 2013/14 2015/16 2017/18 2019/20 2021/22 Borders 95.7% 95.6% 94.3% 94.3% 93.4% Scotland 94.5% 94.5% 92.9% 92.9% 90.9%



How are we performing?

Rates for both Scotland and Scottish Borders for the percentage of adults who feel they can look after their health 'very well' or' quite well' decreased from a high point in 2013/14 to 2021/22. The Borders rate is 2.5% higher than the Scottish rate as a whole.

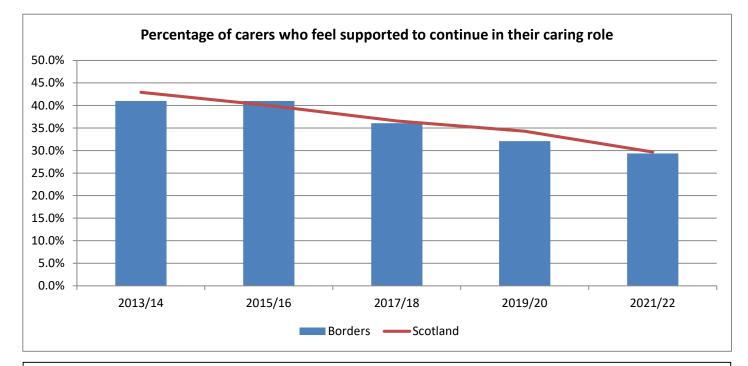
Percentage of adults able to look after their health very well or quite well

Objective 4. Supporting unpaid carers

Percentage of carers who feel supported to continue in their caring role

Source: Core Suite Indicator workbooks

	2013/14	2015/16	2017/18	2019/20	2021/22
Borders	41.0%	41.0%	36.1%	32.1%	29.4%
Scotland	43.0%	40.0%	36.6%	34.3%	29.7%



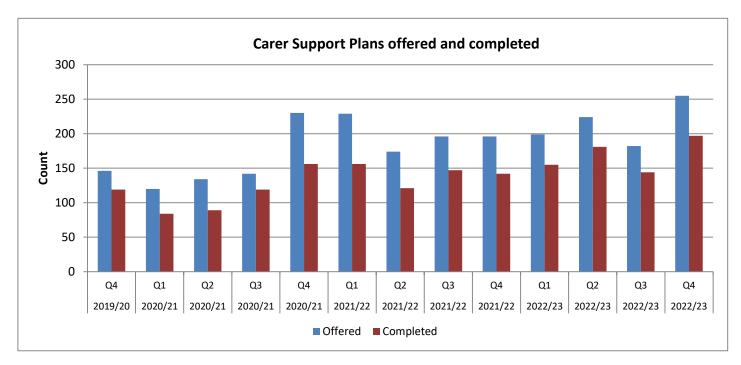
How are we performing?

Rates for both Scotland and Scottish Borders for the percentage of carers who feel supported to continue in their caring role decreased from a high point for Borders in 2015/16 to 2021/22. The Scottish rate is 0.3% higher than the Borders rate.

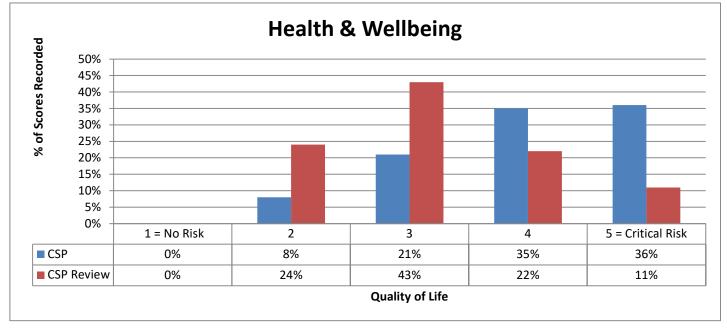
Carers offered and completed Carer Support Plans

Source: Borders Carers Centre

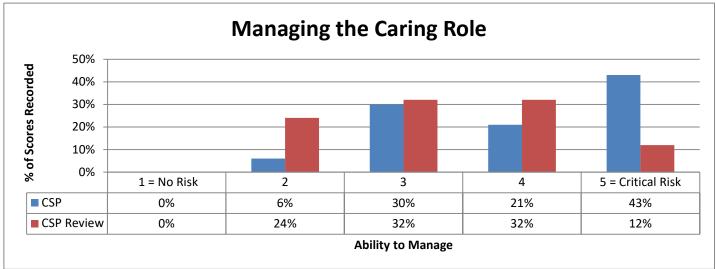
	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23
CSPs Offered	120	134	142	230	229	174	196	196	199	224	182	255
CSPs Completed	84	89	119	156	156	121	147	142	155	181	144	197



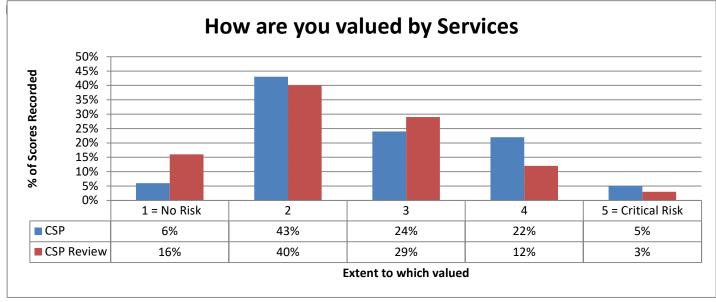
Health and Wellbeing (Q4 2022/23)



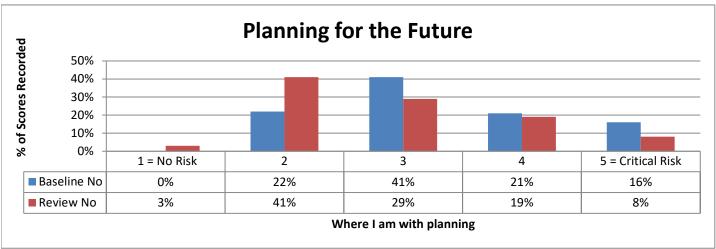
Managing the Caring role (Q4 2022/23)



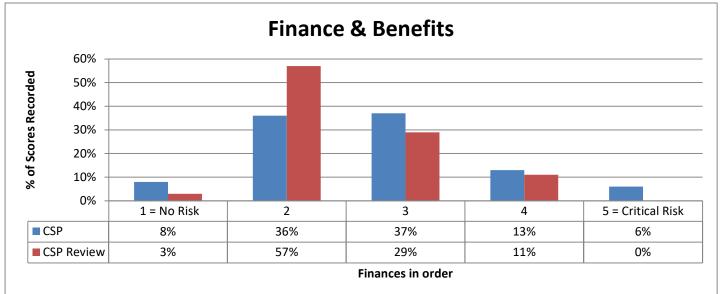
How are you valued by Services (Q4 2022/23)



Planning for the Future (Q4 2022/23)



Finance & Benefits (Q4 2022/23)



How are we performing?

There has been a continued increase in the number of completed CSPs over the past 5 quarters.

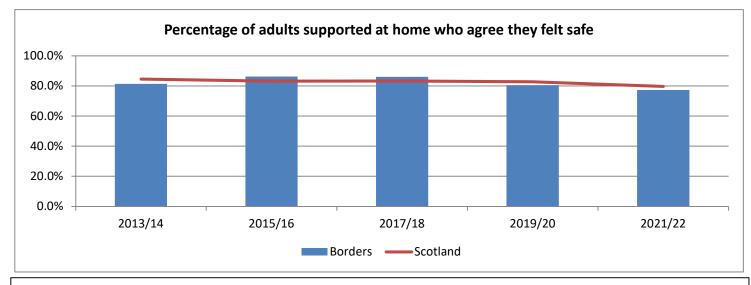
It can be implied from the movement between categories that we are managing to lift Carers out of the 'Critical Risk' category to 'Significant Risk' and from 'Significant Risk' to 'Moderate Risk' category.

Objective 5. Improving effectiveness and efficiency

Percentage of adults supported at home who agree they felt safe

Source: Core Suite Indicator workbooks

	2013/14	2015/16	2017/18	2019/20	2021/22
Borders	81.4%	86.3%	86.1%	80.5%	77.3%
Scotland	84.6%	83.2%	83.3%	82.8%	79.7%

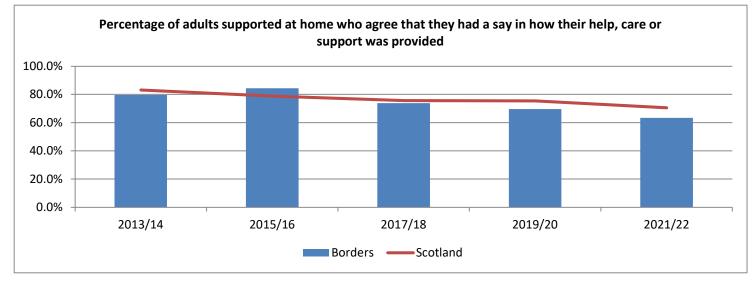


How are we performing?

Rates for both Scotland and Scottish Borders for the percentage of adult who feel they are safe supported at home has decreased from a high point in 2017/18 to 2021/22. The Scottish rate is 2.4% higher than the Borders rate.

Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided

Source: Core Suite Indicator workbooks											
	2013/14	2015/16	2017/18	2019/20	2021/22						
Borders	79.5%	84.4%	73.8%	69.7%	63.4%						
Scotland	83.1%	78.8%	75.6%	75.4%	70.6%						



Scotland

Rates for both Scotland and Scottish Borders for the percentage of adult who feel they have a say in how their help,care or support is provided at home has decreased from a high point in 2015/16 to 2021/22. The Scottish rate is 7.2% higher than the Borders rate.

Percentage of adults supported at home who agree that their health and social care services seemed to be well coordinated

Source: Core Suite Indicator workbooks										
	2013/14 2015/16 2017/18 2019/20 2021									
Borders	77.6%	71.9%	75.0%	70.0%	59.3%					

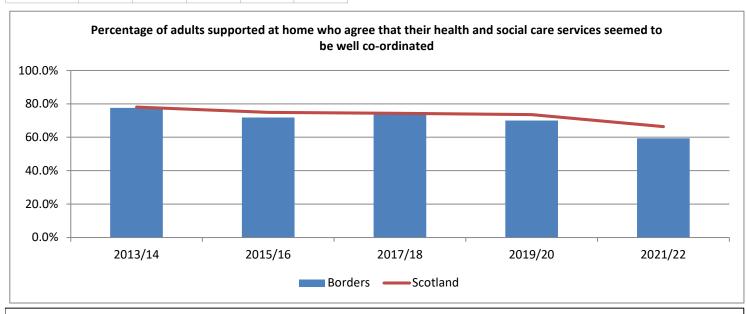
74.9%

74.3%

73.5%

66.4%

78.1%



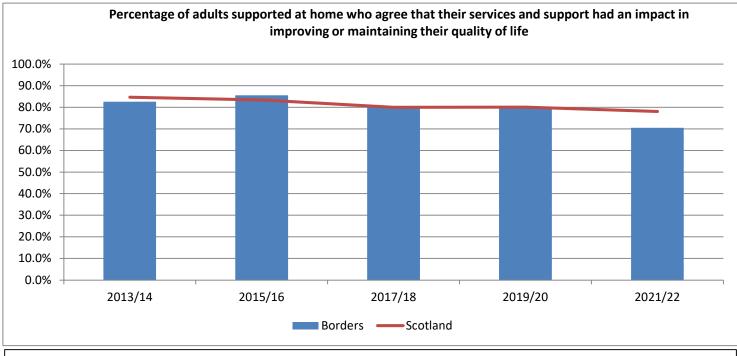
How are we performing?

The percentage of adults supported at home who agree their health and social care services seem to be well coordinated has decreased across Scotland and Scottish Borders from a high in 2013/14 to 2021/22. The Scottish rate is 7% higher than Borders.

Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life

Source: Core Suite Indicator workbooks

	2013/14	2015/16	2017/18	2019/20	2021/22
Borders	82.6%	85.6%	80.1%	80.1%	70.5%
Scotland	84.7%	83.4%	80.0%	80.0%	78.1%

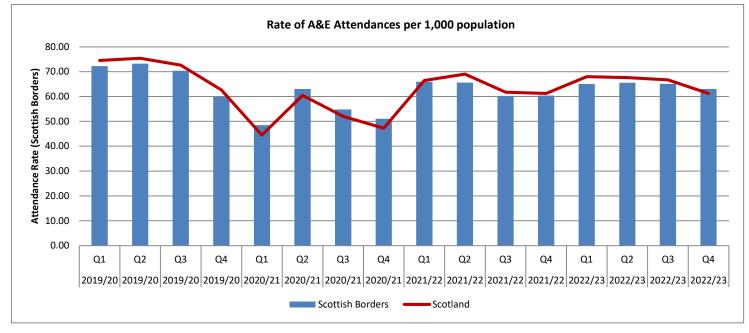


The percentage of adults supported at home who agree their services and support had an impact in improving or maintaining their quality of life has decreased across Scotland and Scottish Borders from a Borders high in 2015/16 to 2021/22. The Scottish rate is 7.6% higher than Borders.

Rate of A&E Attendances per 1,000 population

Source: MSG Integration Performance Indicators workbook (data from NHS Borders Trakcare system), which has not been updated this quarter

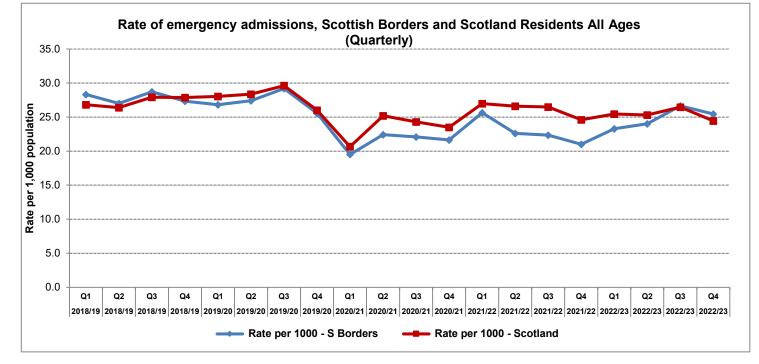
	Q1 2020/21	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23
Borders	48.5	63.0	54.7	51.0	65.9	65.6	60.2	60.4	65.5	65.7	65.1	63.0
Scotland	44.6	60.5	52.3	47.3	66.4	69.0	61.7	61.2	68.2	68.3	66.7	61.2



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

Source: IVIS	Gintegra	uon Pen	ormance	muicato		OOK (SIVII	tor ualaj					
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	2020/21	2020/21	2020/21	2020/21	2021/22	2021/22	2021/22	2021/22	2022/23	2022/23	2022/23	2022/23
Borders	19.6	22.4	22.1	21.6	25.6	22.6	22.3	21.0	23.3	24.0	26.6	25.5
Scotland	20.6	24.6	24.3	23.5	27.0	26.6	26.5	24.6	25.5	25.3	26.5	24.4

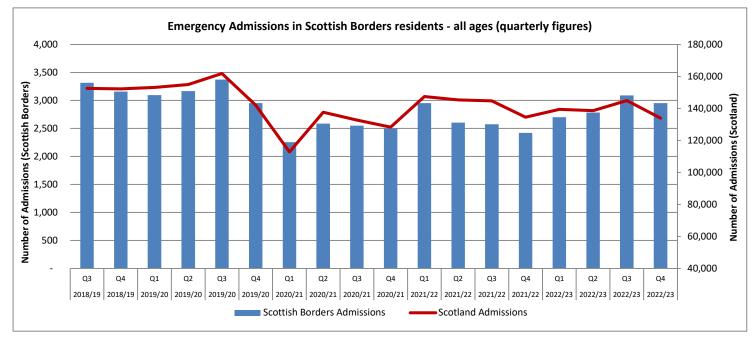
Emergency Admissions, Scottish Borders residents All Ages Source: MSG Integration Performance Indicators workbook (SMB01 data)



Number of Emergency Admissions in Scottish Borders residents - all ages (quarterly figures)

		n an na har a
Source: MSG Integration Performance Indicators	workbook (SIVIRU1 data), which i	has not been updated this quarter

	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	Q3 2022/23	Q4 2022/23
Borders	2,254	2,586	2,547	2,500	2,954	2,605	2,574	2,421	2,702	2,785	3,091	2,953
Scotland	112,034	133,783	132,773	128,364	147,480	145,393	144,776	134,532	139,490	138,640	144,957	133,908



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

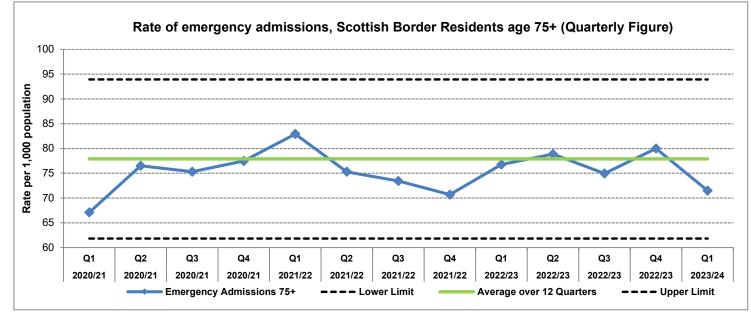
How are we performing?

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. There has been a dip subsequently in Q2 - Q4 2021/22 during the pandemic but emergency admissions started to rise again in April - June 2022. Q4 2022/23 has seen however a decrease.

Emergency Admissions, Scottish Borders residents age 75+

Source: NSS Discovery

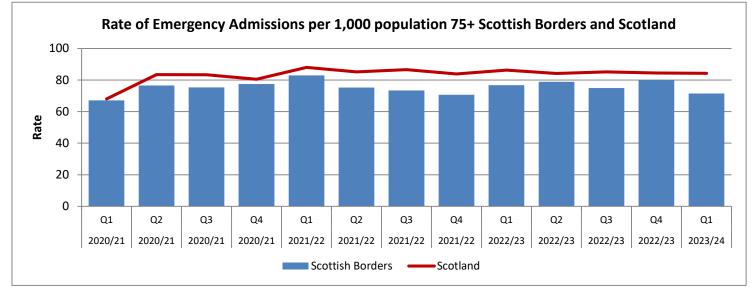
	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Q1 2023/24
Number	965	947	977	1,046	970	946	907	1,016	1044	992	1059	946
Rate per 1k	76.5	75.3	77.5	82.9	75.3	73.4	70.7	76.8	78.9	74.9	80.0	71.5



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

Source: NSS Discovery

	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	Q3 2022/23	Q4 2022/23	Q1 2023/24
Borders	76.5	75.3	77.5	82.9	75.3	73.4	70.7	76.8	78.9	74.9	80.0	71.5
Scotland	83.4	83.3	80.5	88.0	85.2	86.5	83.9	86.3	84.1	85.2	84.5	84.3

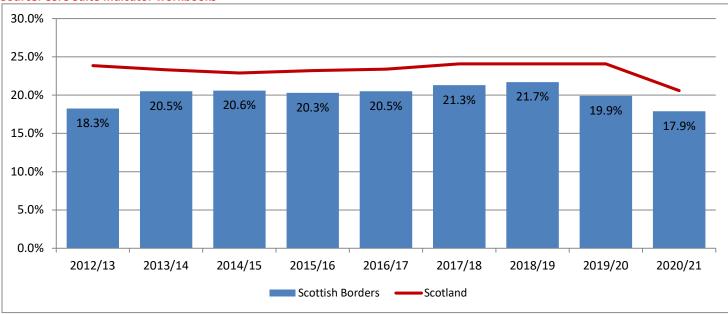


Please Note: where two areas are concerned it is not possible to show values as a control chart.

How are we performing?

The rate of 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 generally widened from Q2 2021/22 to Q3 2022/23, but reduced in Q4 2022/23. Q1 2023/24 saw Borders 13 points lower than Scotland, which is a provisional figure).

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



Source: Core Suite Indicator workbooks

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

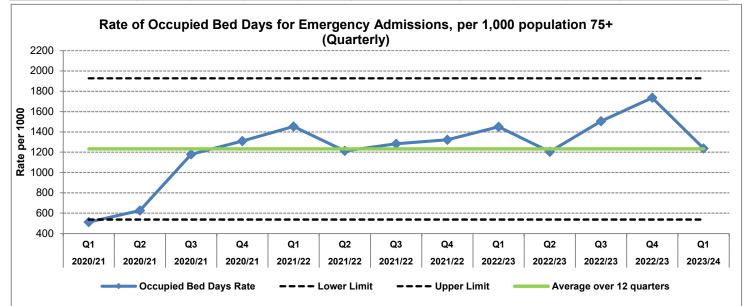
How are we performing?

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. During 2022/23 rates had increased but were still under national levels, this position altered in Q4 2022/23 where Borders had a higher rate for the first time since Q4 2020/21.

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.

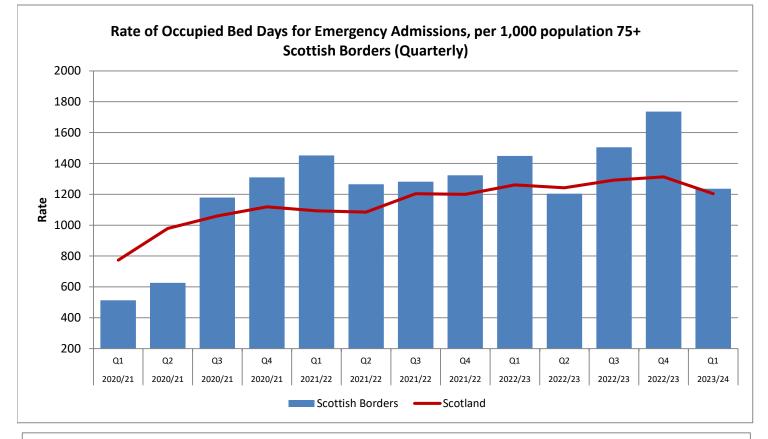
	Q2 2020/21	Q3 2020/21	Q4 2020/21	Q1 2021/22	Q2 2021/22	Q3 2021/22	Q4 2021/22	Q1 2022/23	Q2 2022/23	Q3 2022/23	Q4 2022/23	Q1 2023/24
No of OBDs	7903	14861	16521	18378	15625	16465	16829	19182	15942	19922	22982	16365
Rate per 1k	627	1179	1310	1452	1212	1282	1323	1449	1204	1505	1736	1233

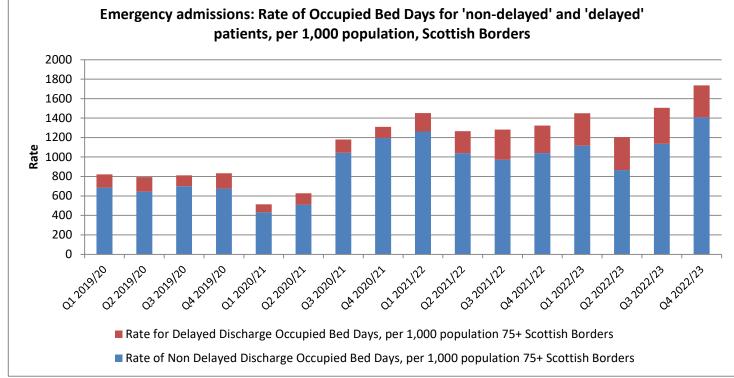


Occupied Bed Days for emergency admissions, Scottish Borders and Scotland Residents age 75+

Source: NSS Discovery

	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	Q3 2022/23	Q4 2022/23	Q1 2023/24
Borders	627	1179	1310	1452	1212	1282	1323	1449	1204	1505	1736	1236
Scotland	979	1060	1119	1093	1085	1203	1200	1261	1242	1292	1314	1204





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

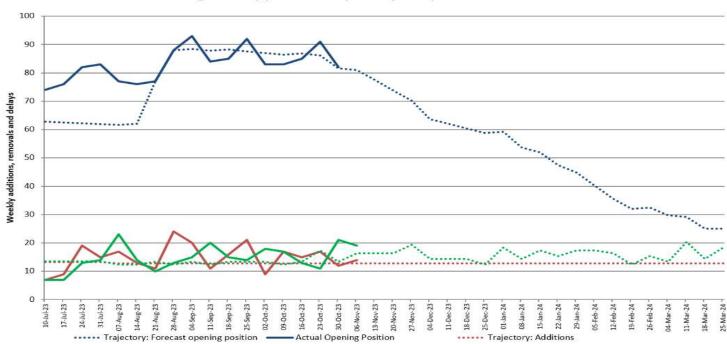
NB: Data for Community Hospitals is included in both Bed Days measures from Q3 2020/21 onwards.

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 generally increased again from that point (Q2 2022/23 being the exception). Data for Q1 2023/24 but is provisional at this time.

Delayed Discharges (DDs)

Source: NHS Borders Trakcare system

Actual Additions





	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23
Number of												
DDs over 2 weeks	32	43	37	43	30	28	34	38	44	59	52	60
Number of DDs over 72 hours	46	52	51	56	33	45	47	42	48	61	69	72

•••••• Trajectory: Core Removals plus actions •

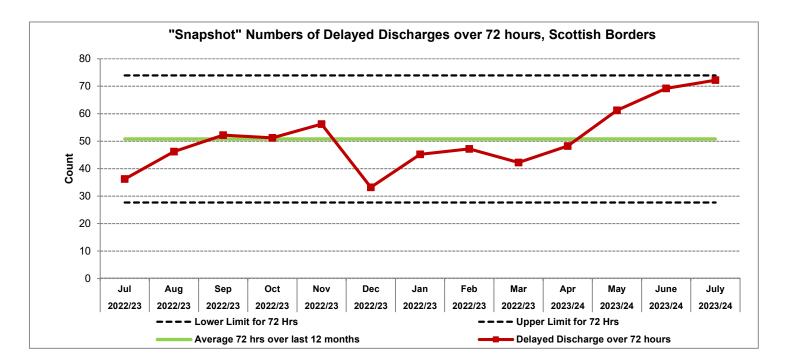
Actual Core Removals plus actions

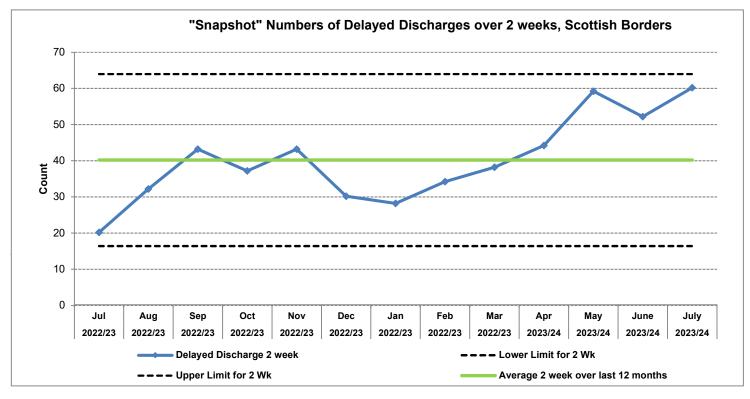
Delayed discharge performance is currently slightly ahead of the planned trajectory however there has been an increase in the number of additions / referrals over the period compared to our forecast. There has also been an associated increase in removals over the period. Referrals over the period were higher than expected, and removals were also higher than expected. The delivery of removals / transfers to care was broadly in line with our plan, however it is worth noting that there were more people removed due to health reasons than forecast.

When exploring the weeks in which these increased removals took place, it is apparent that in many weeks where there have been increased removals due to ill health, this was associated to increased referrals in the same week. It is expected that this relates to the referral of a number of people who were not fit for discharge, and also a higher denominator of referrals associated to increased acuity, need and dependence. For instance, in the week where this was most pronounced, the week commencing 23/07, there were 19 referrals made (compared to the expected 13.3), and 9 removals due to ill health (compared to the expected 5.3).

The Discharge Kaizen ended on the 31st August 2023, remains in place to consolidate data/information and associated learning and will be presented to the organisation/HSCP in November 2023. The national self-assessment for the implementation of discharge without delay principles was completed in September 2023 and we await the return to progress any associated actions. The Integration Joint Board issued a direction on surge planning, which includes a range of further measures to alleviate the pressures, including discharge (home to assess), single assessment, closer working with the third sector and communications promoting community supports, which will all help reduce the demand for social work and social care, get more people onto the right intermediate care pathway, and increase productivity.

Increased capacity within social care has progressed with the opening of 39 additional Extra Care Housing units Poynder Apartments in Kelso and continue to see residents move into this facility. The additional residential care step-down and step-up and respite capacity are projected to be in place in October remains on track, along with 9 extra Enhanced Residential rooms in Knowesouth in November, and a further 9 rooms in other settings being commissioned as planned in November. Work continues to progress to develop the approach to the integration of Home First with the Adult

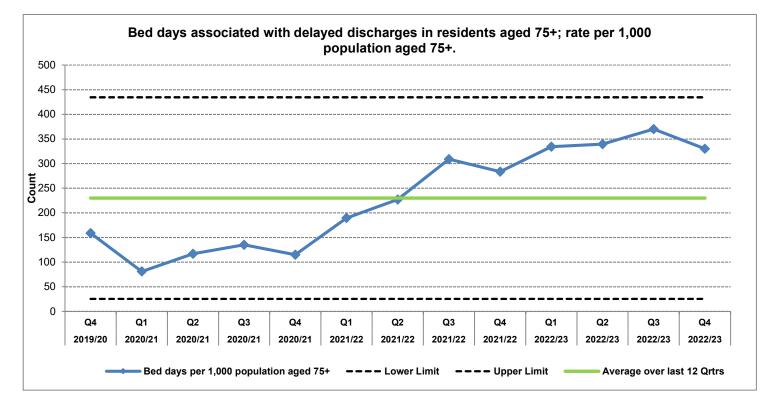




Bed days associated with delayed discharges in residents aged 75+; rate per 1,000 population aged 75+

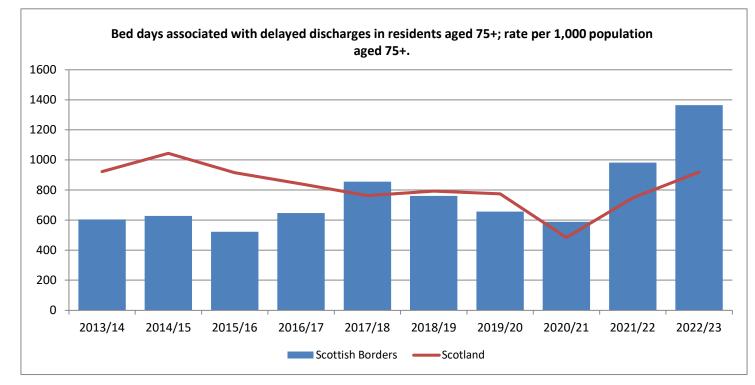
Source: Core Suite Indicator workbooks

	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	2020/21	2020/21	2020/21	2021/22	2021/22	2021/22	2021/22	2022/23	2022/23	2022/23	2022/23
Bed Day Rate	116.8	135.0	114.7	189.3	227.0	308.8	283.5	334.0	339.3	369.9	330.0



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

	2016/17	2017/18	2019/20	2020/21	2021/22	2022/23
Borders	647	855	656	588	982	1364
Scotland	841	762	774	484	748	919



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

How are we performing?

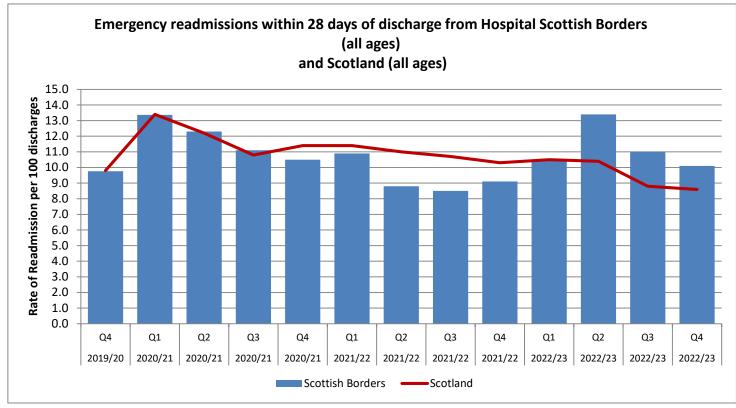
Up to 2016/17, rates for the Scottish Borders were lower (better) than the Scottish average. However, in 2017/18 the Borders' rate was higher than Scotland's. This reduced in 2018/19 - when the Scottish average increased - and further reduced in 2019/20 and 2020/21. 2021/22 and 2022/23 have seen a marked 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+.

Source: Core Suite Indicator workbooks

Emergency readmissions within 28 days of discharge from hospital, Scottish Borders residents (all ages) Source: NSS Discovery data

	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	Q3 2022/23	Q4 2022/23
Borders	13.4	12.3	11.1	10.5	10.9	8.8	8.5	9.1	10.5	13.4	11.0	10.1
Scotland	13.4	12.2	10.8	11.4	11.4	11.0	10.7	10.3	10.5	10.4	8.8	8.6



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 had been generally higher than the Scottish average reduced to below the national position for the 5 quarters to March 2022. Q1 and Q2 of 2022/23 showed an increase in rates however these have reduced again during the latter 6 months of the year. Rates are higher than the Scottish average though.

Objective 6. Reducing poverty and inequalities

We are in the process of developing a dataset to monitor progress in tackling health inequalities. There are challenges in doing this reliably and we are working to identify meaningful metrics in a number of areas that will build a picture. We hope to be able to provide further updates as this work progresses.