



Meeting Date: 16 DECEMBER 2020

Report By	Robert McCulloch-Graham, Chief Officer for Integration
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QUARTERLY PERFORMANCE REPORT, DECEMBER 2020
(latest available data at mid-October 2020)

Purpose of Report:	To provide a high level summary of quarterly performance for Integration Joint Board (IJB) members, using latest available data. The report focuses on demonstrating progress towards the Health and Social Care Partnership's Strategic Objectives
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Recommendations:	Health & Social Care Integration Joint Board is asked to: <ul style="list-style-type: none"> a) Note and approve any changes made to performance reporting. b) Note the key challenges highlighted. c) Direct actions to address the challenges and to mitigate risk
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Personnel:	<i>n/a</i>
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Carers:	<i>n/a</i>
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Equalities:	A comprehensive Equality Impact Assessment was completed as part of the strategic planning process. Performance information supports the strategic plan. <i>Note – an updated Integrated Impact Assessment will be undertaken by March 2021.</i>
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Financial:	<i>n/a</i>
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Legal:	<i>n/a</i>
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Risk Implications:	<i>n/a</i>
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1. Background

- 1.1 The Integration Performance Group (IPG) has established a set of high level Key Performance Indicators (KPI) for quarterly reporting to Integration Joint Board (IJB). The KPIs are aligned under the three Health and Social Care Strategic Plan 2018-2021 strategic objectives, summarised below as:
- *Objective 1:* keeping people healthy and out of hospital
 - *Objective 2:* ensuring people only stay in hospital for as long as required
 - *Objective 3:* building capacity within Scottish Borders communities
- 1.2 The IPG continues to review, refine and develop the indicators to better balance the mix of hospital-focussed and social care KPIs. Wherever possible, the indicators are selected from robust, reliable data sources that can be compared to the Scottish average. The IPG will ensure that any new indicators for reporting are similarly robust and that proposed changes are discussed at IJB.
- 1.3 The additional Social Care indicators discussed at August 2020 IJB have been incorporated into the quarterly reporting.
- 1.4 The IPG endeavours to present the latest available data. However, for some measures there is a significant lag whilst local data is validated and released publicly. This does increase robustness of the data and allows for national comparison, but is not ideal.
- 1.5 The IJB Strategic Risk Register focuses on risk and controls. The focus of the Quarterly Performance Report is to highlight performance trend, but the indicators also show where performance is off target and where mitigating action to address this needs to be taken. Performance and risk are very closely linked.
- 1.6 Two appendices are provided with this report:
- Appendix 1** provides a high level, “at a glance” summary for EMT, IJB and the public.
- Appendix 2** provides further details for each of the measures including more information on performance trends and analysis.

2. Summary of Performance

- 2.1 The data for **emergency hospital admissions (all ages)** is up to the end March 2020 so will include the beginning of the impact of Covid-19. The specific (**age 75+**) local data is up to June 2020 and shows a greater Covid-impact (*67.1 admissions per 1,000 populations this quarter, compared to 86.4 last quarter*). Both indicators show that the latest performance is better than our pre-Covid target (as may be expected), but that 'performance improvement' Nationally for the (**all ages**) indicator (*25.1 per 1,000 population*) outstrips the Borders performance (*25.5 per 1,000 population*).
- 2.2 The data for **A&E attendances** is up to June 2020. Historically in the Borders, we have averaged between 7,000–8,000 A&E attendances per quarter (equivalent to 60–70 per 1,000 population per quarter). The June 2020 result of *48 attendances per 1,000 population* indicates a significant Covid-related reduction in A&E attendances, but once again the National result (*44 per 1,000 population*) is better than our local result. Despite the volume of A&E attendance decreasing significantly the latest **A&E Waiting Times** data for people seen within 4hrs (*88.5% as of June 2020*) remains well below our 95% target and below the Scotland average (*95.4%*).
- 2.3 In relation to the **percentage of the budget spent on emergency hospital stays**, the quarterly data to June 2020 shows a huge reduction (from 18.5% last quarter to 11.8% this quarter). This should indicate that next quarter's figures for emergency hospital admissions (all ages) will also show a significant reduction.
- 2.4 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**, (again, as of Oct 2020) shows that 30% of those cases looked at can demonstrate a reduction. These are two of the new indicators agreed at August IJB and it will be interesting to look at the trend over time as this data builds up.
- 2.5 The latest data for **emergency admission occupied bed days (age 75+)** shows a huge reduction on the previous quarter (*513 bed days per 1,000 population to end June 2020, compared to 833 last quarter*). This is to be expected based on the reduced volume of emergency admissions for this age group shown in 2.1 above.
- 2.6 Delayed discharge rates vary in regard to 'snapshot' data, but performance has declined over the last 4 periods (from 16 DDs recorded in June 2020 to 22 as of Sept 2020). The figure for the same period last year (Sept 2019) was 20. One conclusion could be that delayed discharge performance has changed very little, despite the significant DD reductions seen in the early months of the Covid-pandemic. Another conclusion could be that snapshot data is so variable (on a monthly basis) that perhaps a different more stable DD indicator should be used for quarterly reporting. The rate of **Bed Days Associated with Delayed Discharge** has reduced significantly (*from 200 last quarter to 118 as of June 2020*). This may see a reversal once the immediate Covid-impact is removed.
- 2.7 The **% of patients satisfied** with care, staff & information in BGH and Community hospitals remains high, with the combined satisfaction rate of 95.5%. The data is taken from questions asked in the "2 minutes of your time" survey done at BGH and

community hospitals. *Please note the Patient Survey is currently suspended due to Covid-restrictions.*

- 2.8 The **percentage of acute patients discharged to a permanent residential care bed without any opportunity for short-term recovery** is one of the new indicators added. The latest result (October 2020) shows that for that 50% of the people discharged to permanent residential care did not have any opportunity for short-term recovery (reablement, rehabilitation...). As with the other new indicators added, it will be interesting to look at the trend over time as this data builds up.
- 2.9 Our performance for the **Quarterly rate of emergency readmissions within 28 days of discharge** for Scottish Borders residents has been declining with performance now showing a 11.5% readmission rate (**however this figure is as of December 2019 so is quite out of date**). This is worse than the latest Scotland average (10.4%) and worse than our local target (10.5%). Updated comparator data has been requested from Public Health Scotland.
- 2.10 Performance in relation to **end of life care** has improved significantly. As of June 2020, 89.8% of people have been able to spend the last 6 months of their life at home or in a community setting, compared to 87.2% last quarter.
- 2.11 The **% of Carer Support Plans completed** performance remains positive and remains well above our current 40% target.
- 2.12 Similarly, the **outcomes for carers** indicators remain positive. This suite of indicators looks at the positive outcome change between baseline assessment and subsequent review.
- 2.13 The **% of people who require long-term care after a period of short-term reablement/rehabilitation** latest result (October 2020) is 25% which is right on target. **The proportion of older people who receive a period of domiciliary care before entering residential care** shows that as of October 2020, 75% of people are receiving homecare before entering residential care (against our local target of >80%). As above, it will be interesting to look at the trend over time as this data builds up.



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: DECEMBER 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 \(2019/20\)](#)

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

- trend over 4 reporting periods
- comparison to Scotland average
- comparison against local target

- -ve trend over 4 reporting periods
- compares poorly to Scotland average
- compares poorly to local target

KEY

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 (all ages)	£ on emergency hospital stays	The % of older people who receive a package of less than 10 hours of domiciliary care	The % of older people receiving long-term care whose care needs have decreased (from their initial assessment/latest review)
25.5 admissions per 1,000 population (Q4 - 2019/20)	67.1 admissions per 1,000 population Age 75+ (Q1 - 2020/21)	48.0 attendances per 1,000 population (Q1 - 2020/21)	11.8% of total health and care resource, for those Age 18+ was spent on emergency hospital stays (Q1 - 2020/21)	67% (Oct 2020)	30% (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 greater Covid-impact. Both indicators show that latest performance is better than our pre-Covid target (as may be expected), but that the 'performance improvement' 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

A&E waiting times (Target = 95%) 88.5% of people seen within 4 hours (Jun 2020) +ve trend over 4 periods Worse than Scotland (95.4% - Jun 2020) Worse than target (95%)	Rate of Occupied Bed Days* for Emergency admissions (ages 75+) 513 bed days per 1,000 population Age 75+ (Q1 - 2020/21) +ve trend over 4 periods Better than Scotland (1,185 - Q4 2019/20) Better than target (min 10% better than Scottish average)	Number of delayed discharges ("snapshot" taken 1 day each month) 22 over 72 hours (Sept 2020) -ve trend over 4 periods Better than target (23)	Rate of bed days associated with delayed discharge 118 bed days per 1,000 population aged 75+ (Q1 - 2020/21) +ve trend over 4 periods Better than Scotland (198 - 19/20 average) Better than target (180)	"Two minutes of your time" survey – conducted at BGH and Community Hospitals 95.5% Overall satisfaction rate (Q4 - 2019/20) -ve trend over 4 periods Better than target (95%)	The proportion of acute patients discharged to a permanent residential care bed without any opportunity for short-term recovery. 50.0% (Oct 2020) -ve trend over 4 periods Worse than target (0%)
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*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. 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

Emergency readmissions within 28 days (all ages) 11.5 per 100 discharges from hospital were re-admitted within 28 days (Q3 - 2019/20) -ve trend over 4 Qtrs Worse than Scotland (10.4 - Q3 2019/20) Worse than target (10.5)	End of Life Care 89.8% of people's last 6 months was spent at home or in a community setting (Q1 - 2020/21) +ve trend over 4 Qtrs Better than Scotland (88.7% - 2019/20) Better than target (87.5%)	Carers support plans completed 66% of carer support plans offered that have been taken up and completed in the last quarter (Q2 - 2020/21) -ve trend over 4 Qtrs Better than target (40%)	Support for carers: change between baseline assessment and review. Improvements in self-assessment: Health and well-being Managing the caring role Feeling valued Planning for the future Finance & benefits (Q2 - 2020/21) +ve impact No Scotland comparison No local target	The proportion of people who require long-term care after a period of short-term reablement/rehabilitation 25% (Oct 2020) +ve trend over 4 periods On target (25%)	The proportion of older people who receive a period of domiciliary care before entering residential care 75% (Oct 2020) Flat trend over 4 periods Worse than target (>80%)
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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 home care 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.



Scottish Borders
Health and Social Care
PARTNERSHIP

Quarterly Performance Report for the
Scottish Borders Integration Joint Board December 2020

SUMMARY OF PERFORMANCE:
LATEST AVAILABLE DATA AT MID OCTOBER 2020

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

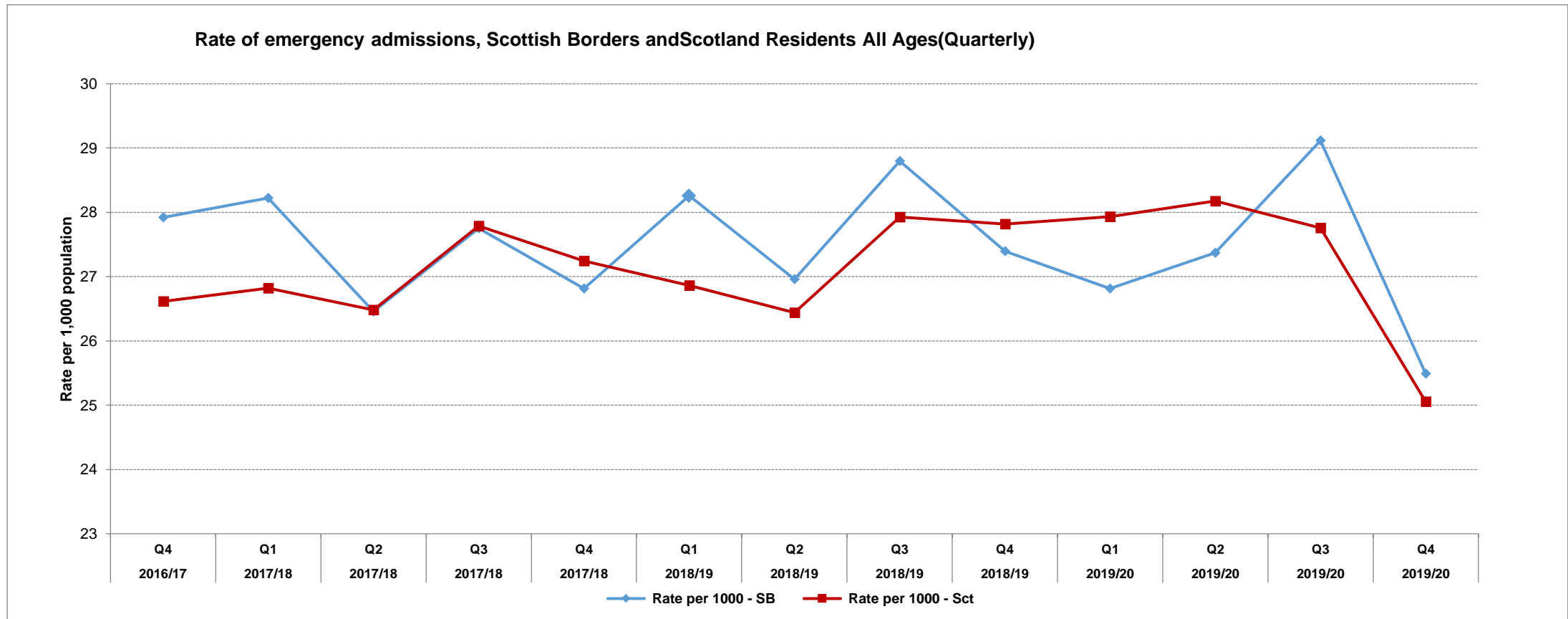
Objective 3: We will improve the capacity within the community for people who have been in receipt of health and social care services to manage their own conditions and support those who care for them

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)

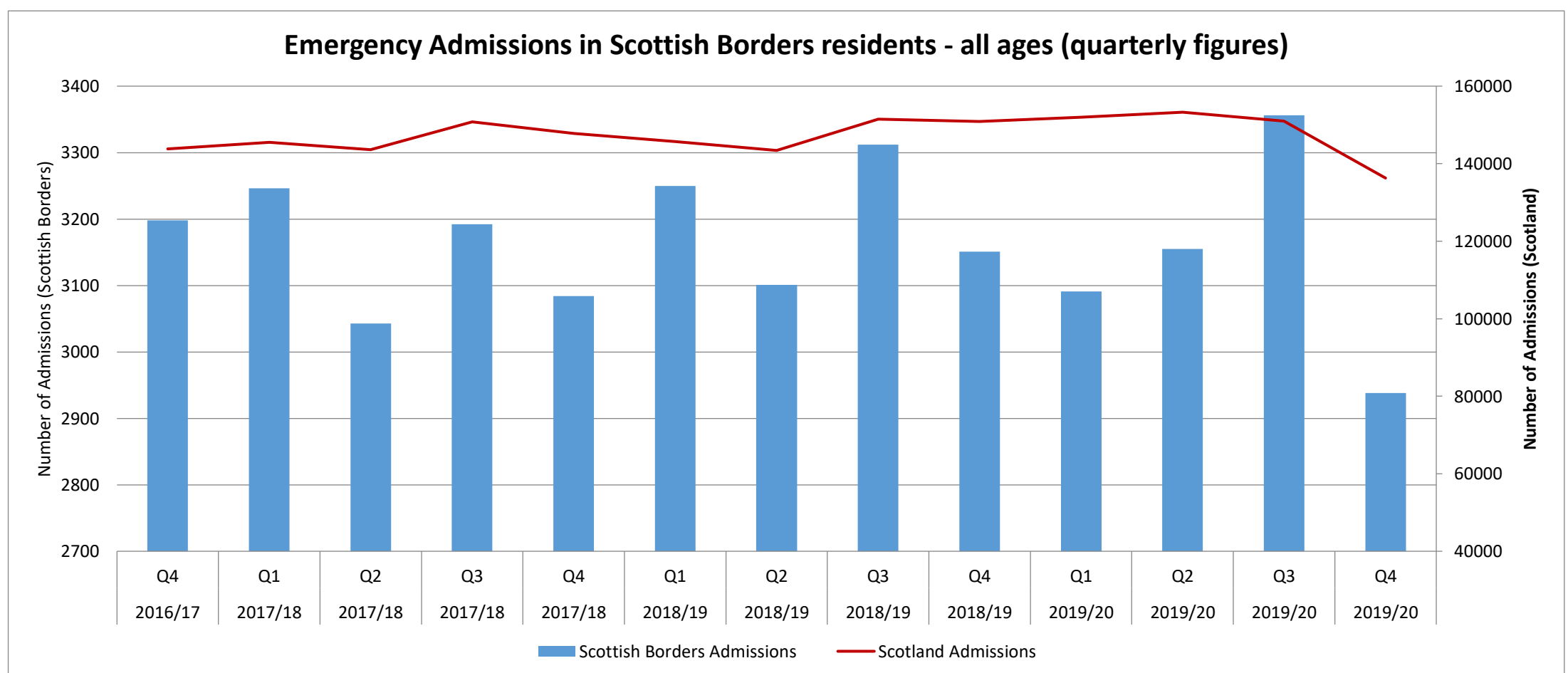
	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
Rate of Emergency Admissions per 1,000 population All Ages	27.9	28.2	26.5	27.8	26.8	28.3	27.0	28.8	27.4	26.8	27.4	29.1	25.5
Scotland - Rate of Emergency Admissions per 1,000 population All Ages	26.6	26.8	26.5	27.8	27.2	26.9	26.4	27.9	27.8	27.0	26.8	27.6	25.1



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

Source: MSG Integration Performance Indicators workbook (SMR01 data)

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
Number Scottish Borders Emergency Admissions - All Ages	3,198	3,246	3,043	3,192	3,084	3,250	3,101	3,312	3,151	3,091	3,155	3,356	2,938
Number Scotland Emergency Admissions - All Ages	143,831	145,495	143,649	150,739	147,780	145,738	143,422	151,497	150,915	151,954	153,278	150,989	136,287



How are we performing?

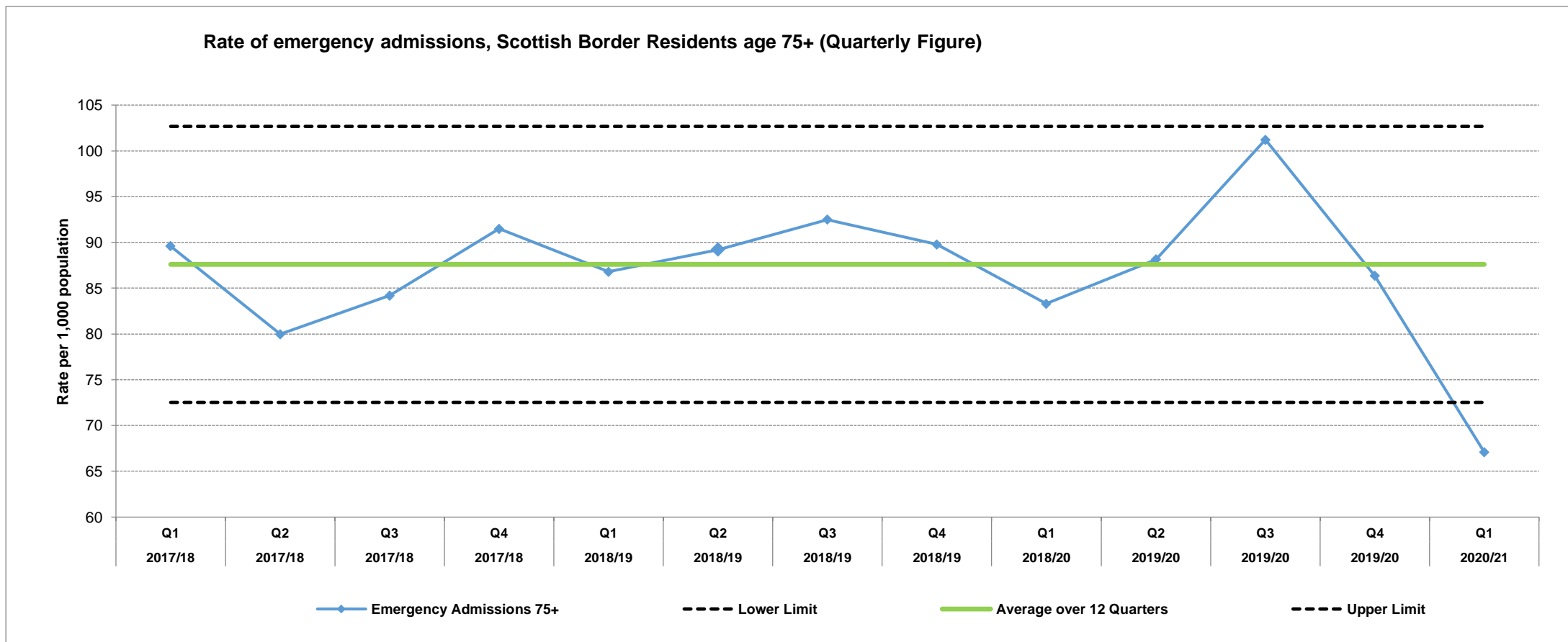
The quarterly number of Emergency Admissions for Scottish Borders residents (all ages) has continued to fluctuate since the start of the 2016/17 financial year; however, shows an overall positive decreasing trend. There was a significant spike in Emergency Admissions in Q3 2019/20 with a rate of 29.1. This is the highest Borders rate in the last 3 years and also surpasses the highest reported scottish rate of 27.9 (Q3 2018/19) for the same period.

Q4 2019/20 begins to demonstrate the impact of the Corona Virus pandemic. This is shown in the clear reduction of Emergency Admissions.

Emergency Admissions, Scottish Borders residents age 75+

Source: NSS Discovery

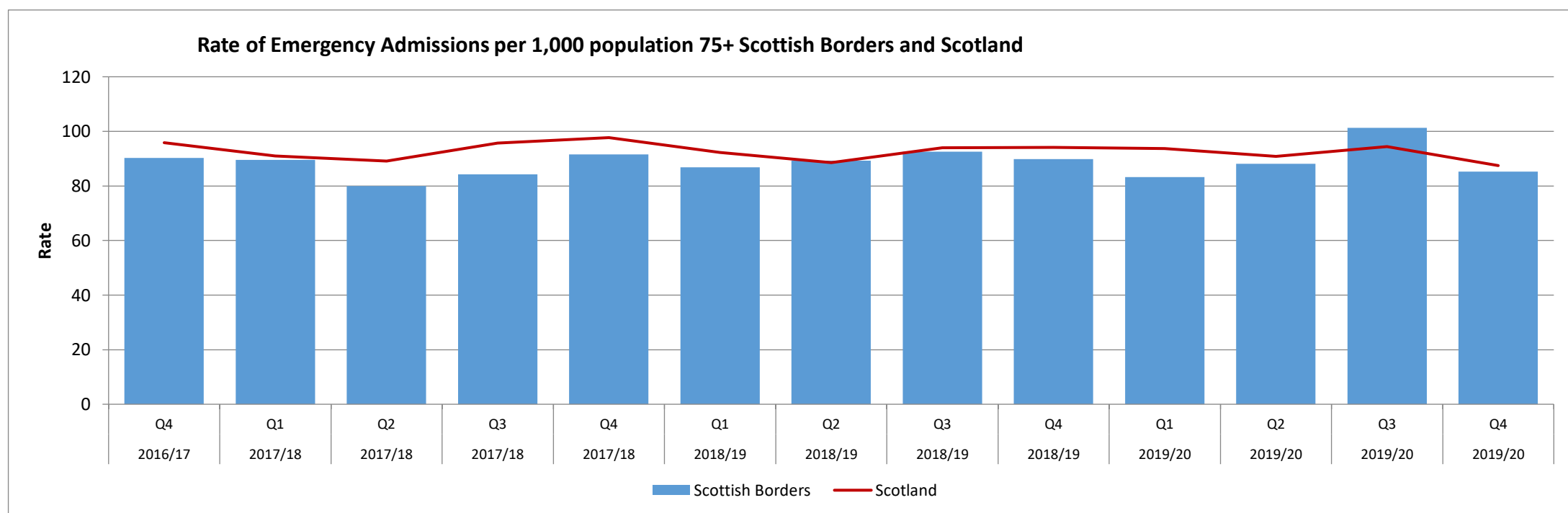
	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21
Number of Emergency Admissions, 75+	1,074	959	1,009	1,096	1,040	1,069	1,108	1,076	1,020	1,079	1,239	1,057	846
Rate of Emergency Admissions per 1,000 population 75+	89.6	80.0	84.2	91.5	86.8	89.2	92.5	89.8	83.3	88.2	101.2	86.4	67.1



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

Source: NSS Discovery

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
Rate of Emergency Admissions Scottish Borders	90.3	89.6	80.0	84.2	91.5	86.8	89.2	92.5	89.8	83.3	88.1	101.2	85.3
Rate of Emergency Admissions 75+ Scotland	95.8	90.9	89.1	95.8	97.7	92.2	88.5	94.0	94.2	93.7	90.8	94.4	87.5



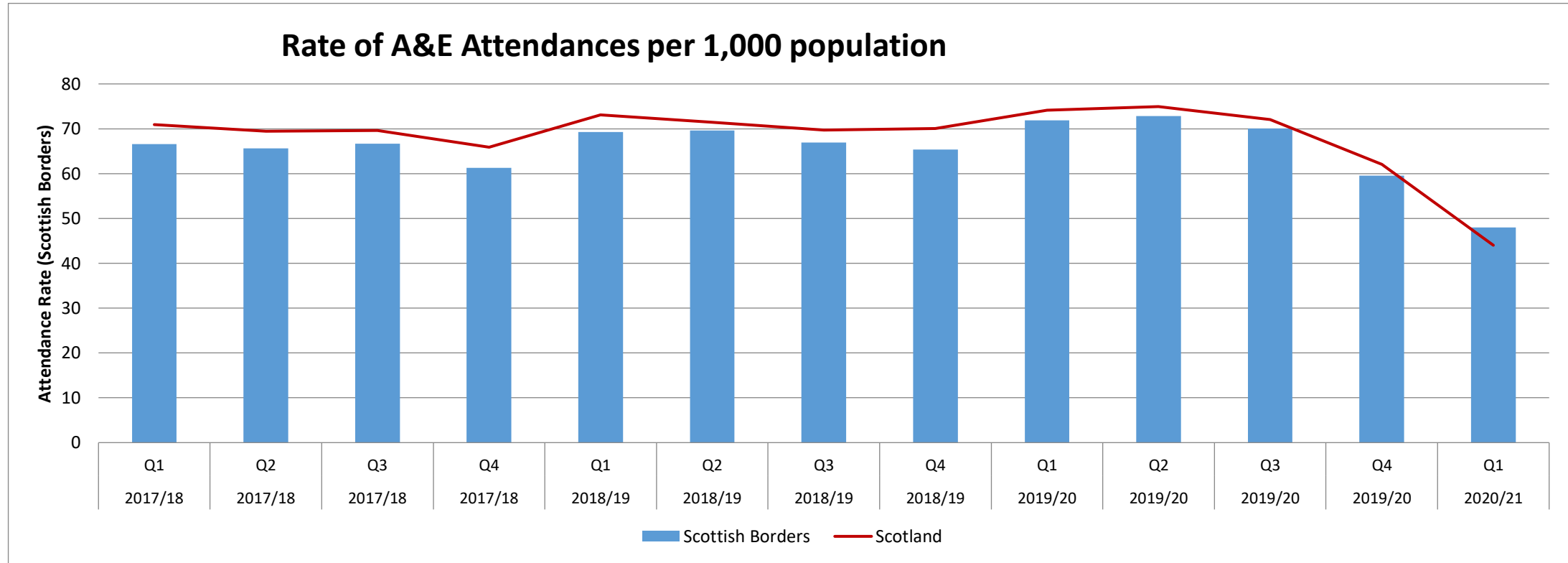
How are we performing?

The 3 year trend for the rate of 75+ emergency admissions was showing an increasing trend 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. Similar to Emergency Admissions for all ages, 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 Corona Virus pandemic during Q4 2019/20 and it's ongoing effects would explain the sudden decrease in Emergency Admissions over the last 2 quarters.

Rate of A&E Attendances per 1,000 population

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

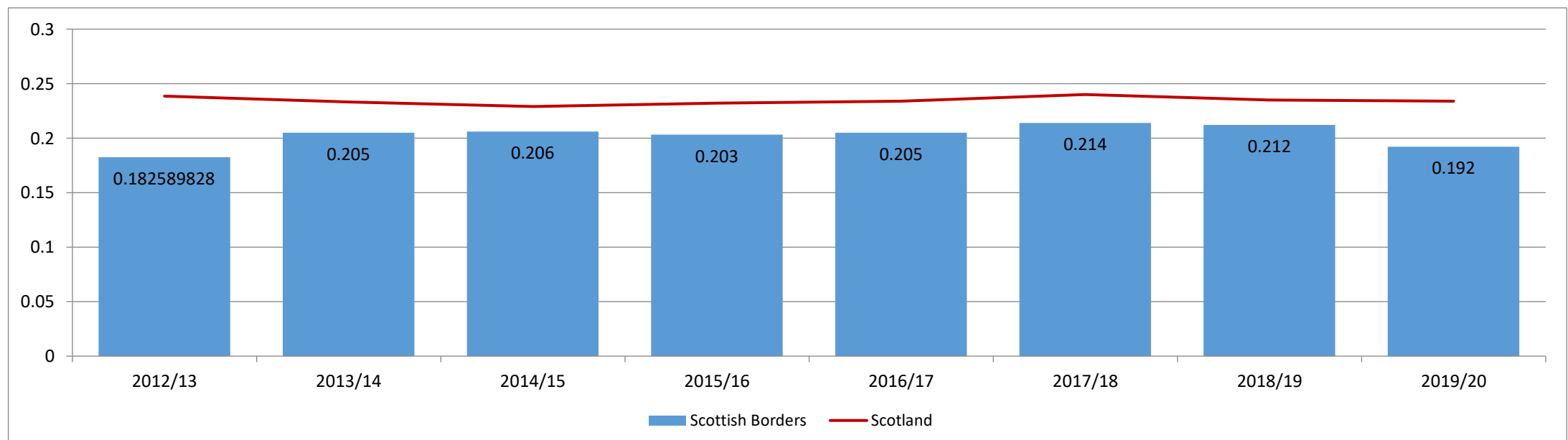
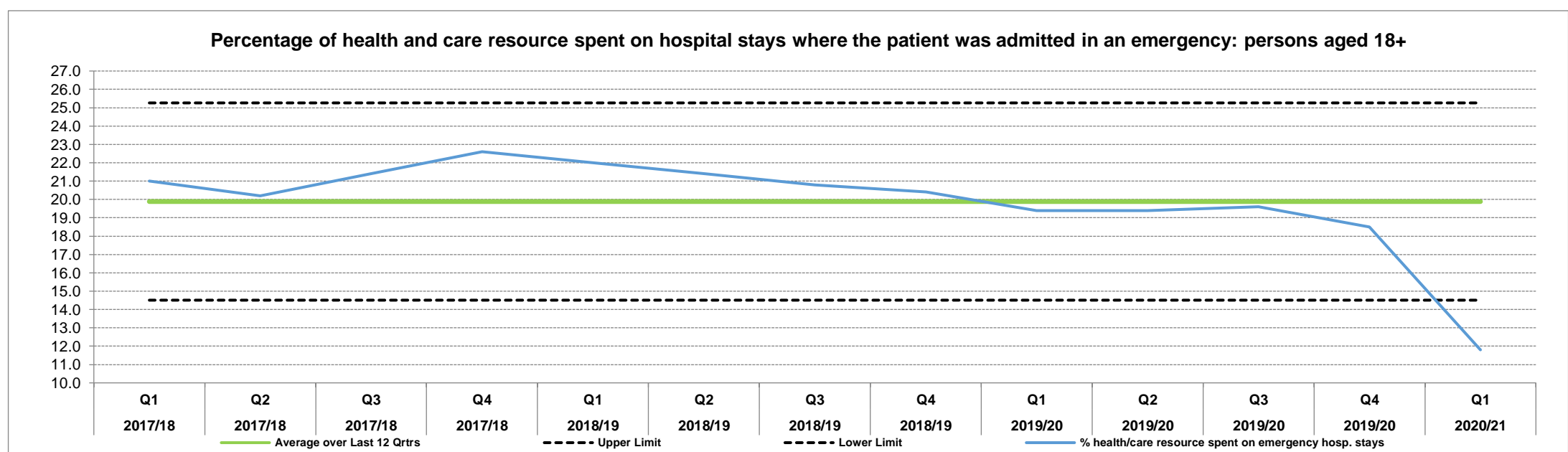
	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21
Rate of Attendances, Scottish Borders	66.6	65.6	66.7	61.3	69.2	69.6	67.0	65.4	71.9	72.8	70.1	59.6	48.0
Rate of Attendances, Scotland	71.0	69.4	69.6	65.9	73.1	71.5	69.7	70.0	74.1	74.9	72.1	62.0	44.0



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

	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21
% of health and care resource spent on emergency hospital stays (Scottish Borders)	21.0	20.2	21.4	22.6	22.0	21.4	20.8	20.4	19.4	19.4	19.6	18.5	11.8



How are we performing?

In contrast to Emergency Admissions, attendances at A&E shows a decrease in Q3 2019/20. With this showing further decline in Q4 and Q1 of 2020/21. However, in Q1 2020/21 the Borders rate (48.0) is above the Scottish Average (44.0).

The percentage of health and social care resource spent on unscheduled hospital stays has seen an overall slight decrease over the past 3 years. The significant reduction in spend reported in Q1 2020/21 echoes the reduced emergency admissions rate.

Both these indicators are impacted by the effects of the Corona Virus pandemic.

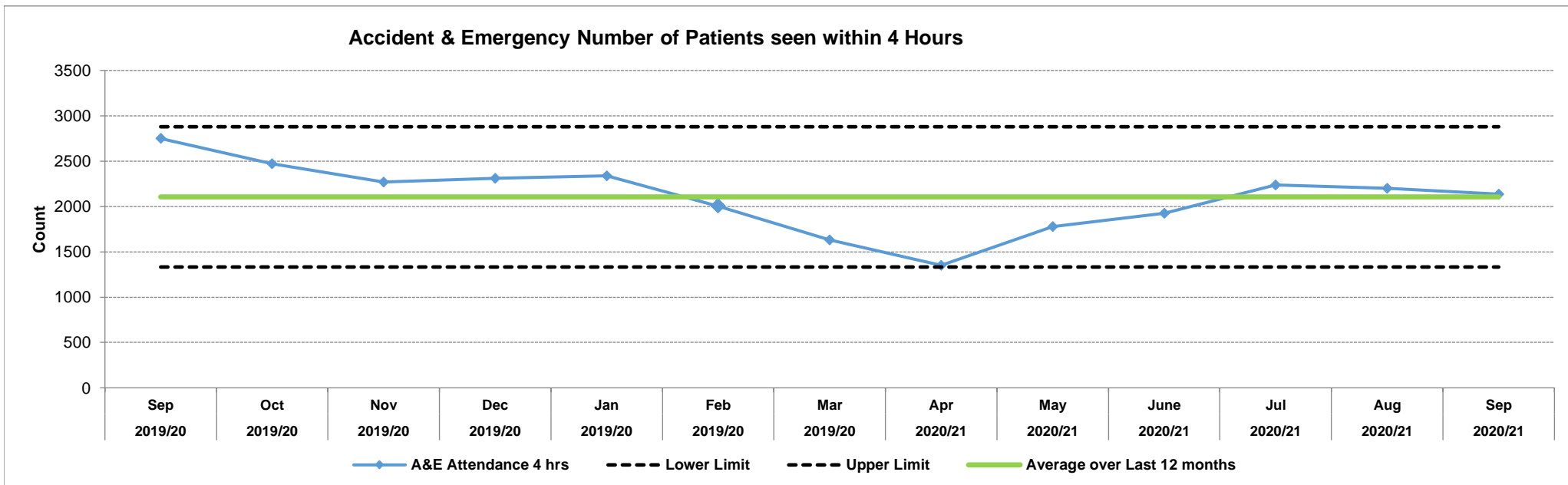
NB: December 2019, the denominator for this indicator now includes dental and ophthalmic costs. As a result, the % of spend has slightly decreased. The Table and Charts above have been updated to reflect the altered % as a result of this change.

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

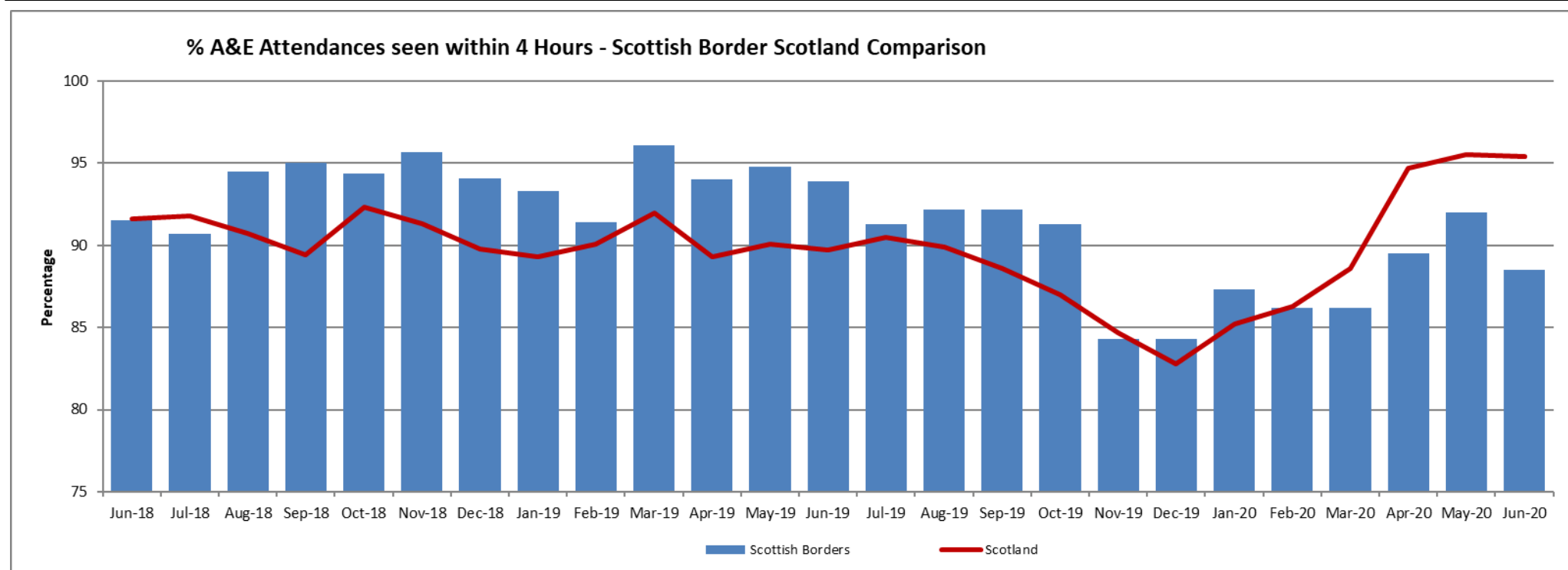
	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20
Number of A&E Attendances seen within 4 hours	2749	2473	2271	2312	2338	2004	1631	1351	1779	1923	2237	2201	2136



% 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

	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20
% A&E Attendances seen within 4 hour Scottish Borders	93.9	91.3	92.2	92.2	91.3	84.3	84.3	87.3	86.2	86.2	89.5	92.0	88.5
% A&E Attendances seen within 4 hour Scotland	89.7	90.5	89.9	88.6	87.0	84.7	82.8	85.2	86.3	88.6	94.7	95.5	95.4



How are we performing?

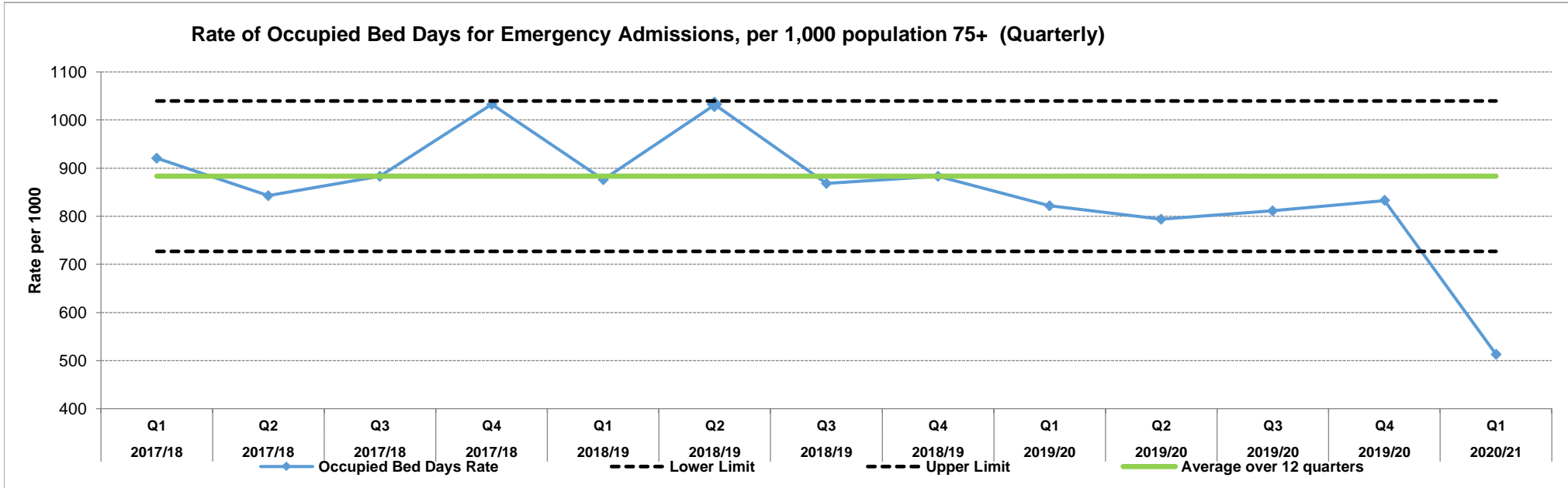
Historically, NHS Borders consistently performed better than the Scottish comparator for A&E waiting times; however, Borders has fallen below the Scottish Average on 7 occasions in the last year, with the gap widening significantly since the onset of the Corona Virus pandemic in March 2020.

Performance against this measure showed a positive trend over the year 2018/19, peaking in March 2019 at 96.1%. In contrast to this the chart shows a negative trend in 2019/20. The 95% target has not been met in the last 15 months. March - May 2020 did show an improvement in performance - mostly likely as a result of fewer people attending A&E; however, this again decreased in June, which could coincide with the easing of lock-down restrictions. NHS Borders are working towards consistently achieving an ambitious local 98% standard; therefore action is required to improve A&E waiting times.

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

Source: NSS Discovery

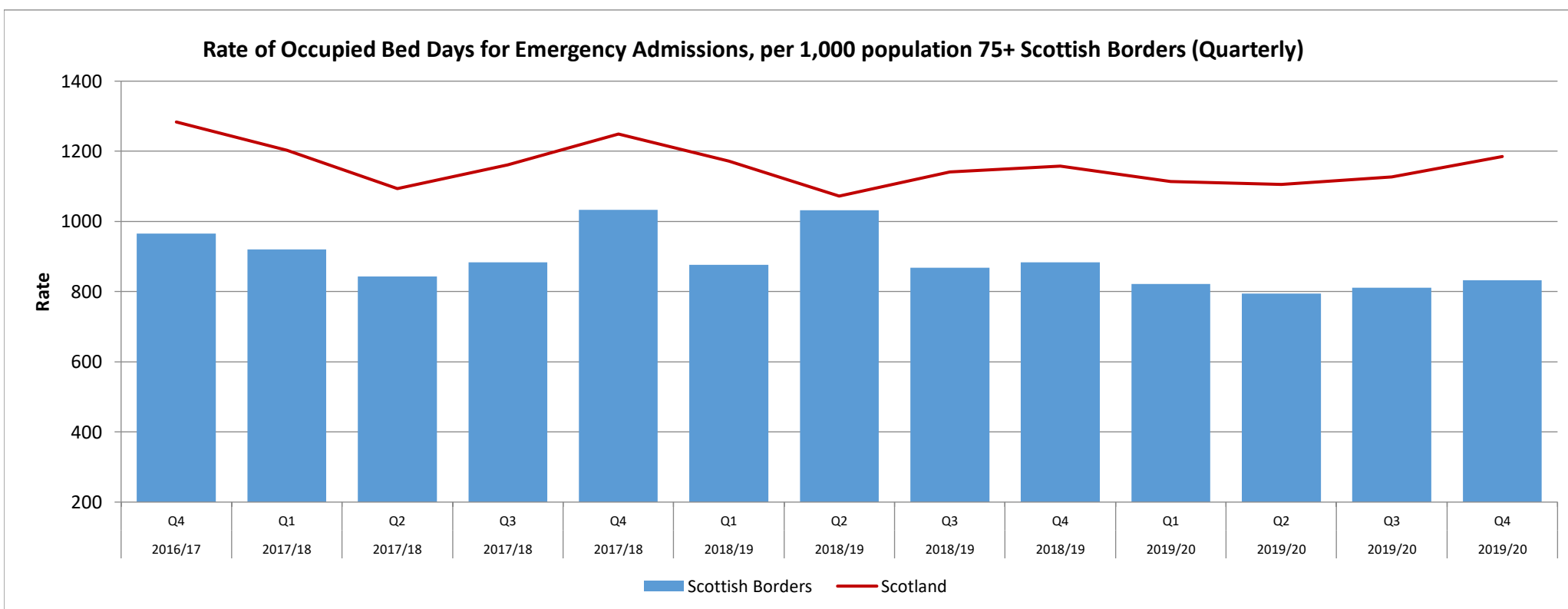
	Q1 2017/18	Q2 2017/18	Q3 2017/17	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21
Number of Occupied Bed Days for emergency Admissions, 75+	11035	10103	10582	12377	10523	12356	10407	10587	10056	9719	9933	10505	6471
Rate of Occupied Bed Days for Emergency Admissions, per 1,000 population 75+	921	843	883	1033	876	1032	868	883	822	794	812	833	513



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

Source: NSS Discovery

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/17	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
Rate of Occupied Bed Days for Emergency Admissions, per 1,000 population 75+ Scottish Borders	966	921	843	883	1033	876	1032	868	883	822	794	812	833
Rate of Occupied Bed Days for Emergency Admissions, per 1,000 population 75+ Scotland	1284	1203	1094	1161	1250	1172	1072	1141	1157	1114	1105	1127	1185



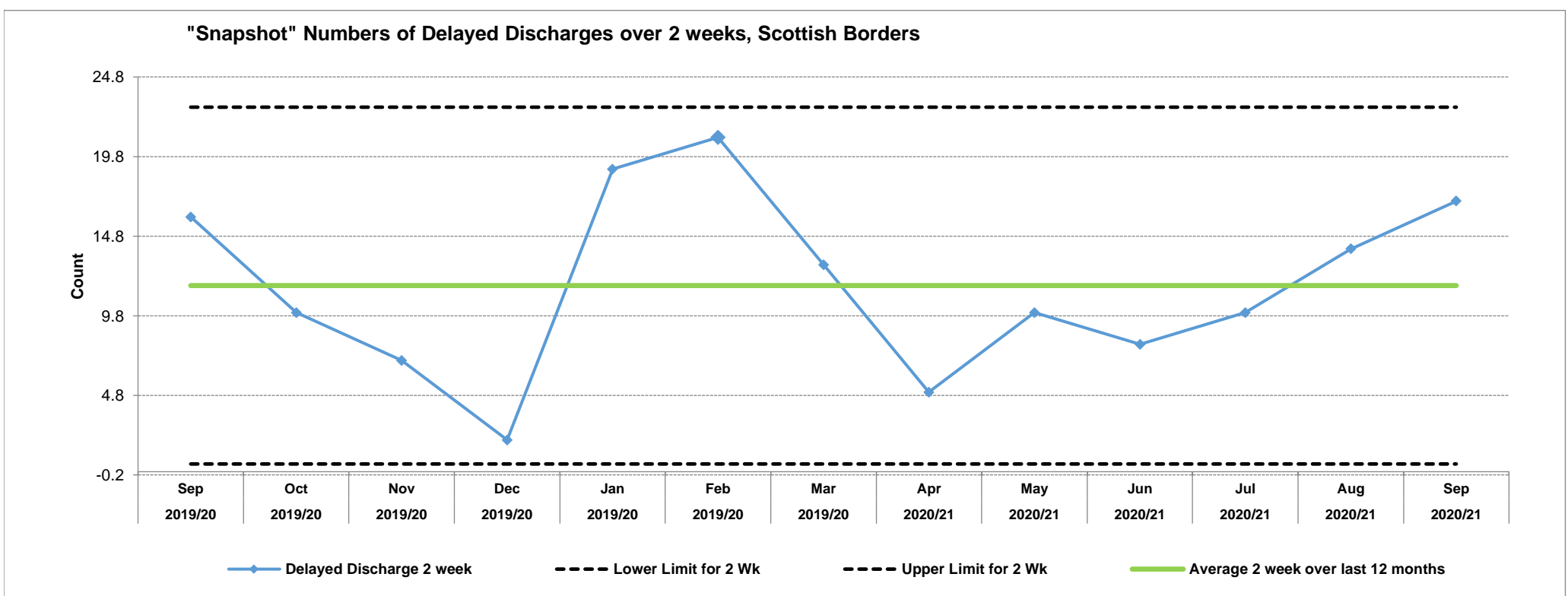
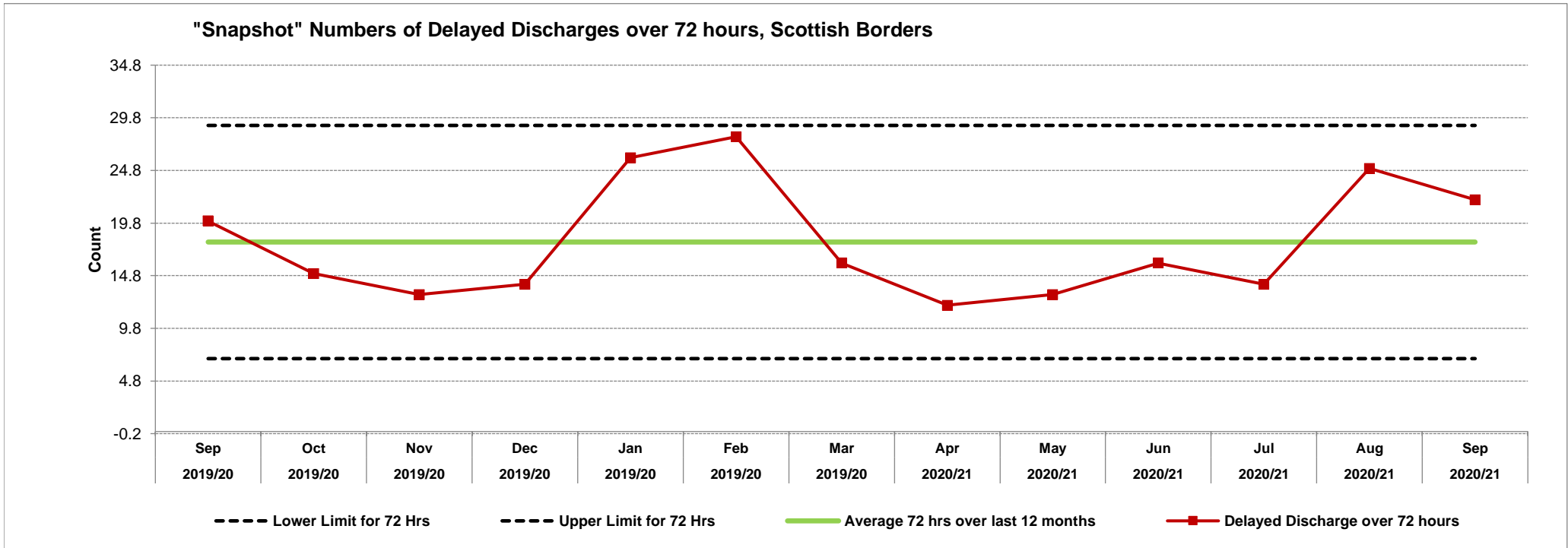
How are we performing?

The quarterly occupied bed day rates for emergency admissions in Scottish Borders residents aged 75 and over has fluctuated over time but has remained lower than the Scottish Average (it should be noted this nationally derived indicator does not take in to account the 4 Borders' Community Hospitals). There is a notable reduction in occupied bed days for Emergency admissions since Q2 of 2018/19, drawing the Border's figure further from the Scotland average. The graph shows a positive trend over the last 3 years with an overall reduction in occupied bed days; although this has begun to increase in Q3 & Q4 of 2019/20.

Delayed Discharges (DDs)

Source: EDISON/NHS Borders Trakcare system

	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20
Number of DDs over 2 weeks	16	10	7	2	19	21	13	5	10	8	10	14	17
Number of DDs over 72 hours	20	15	13	14	26	28	16	12	13	16	14	25	22



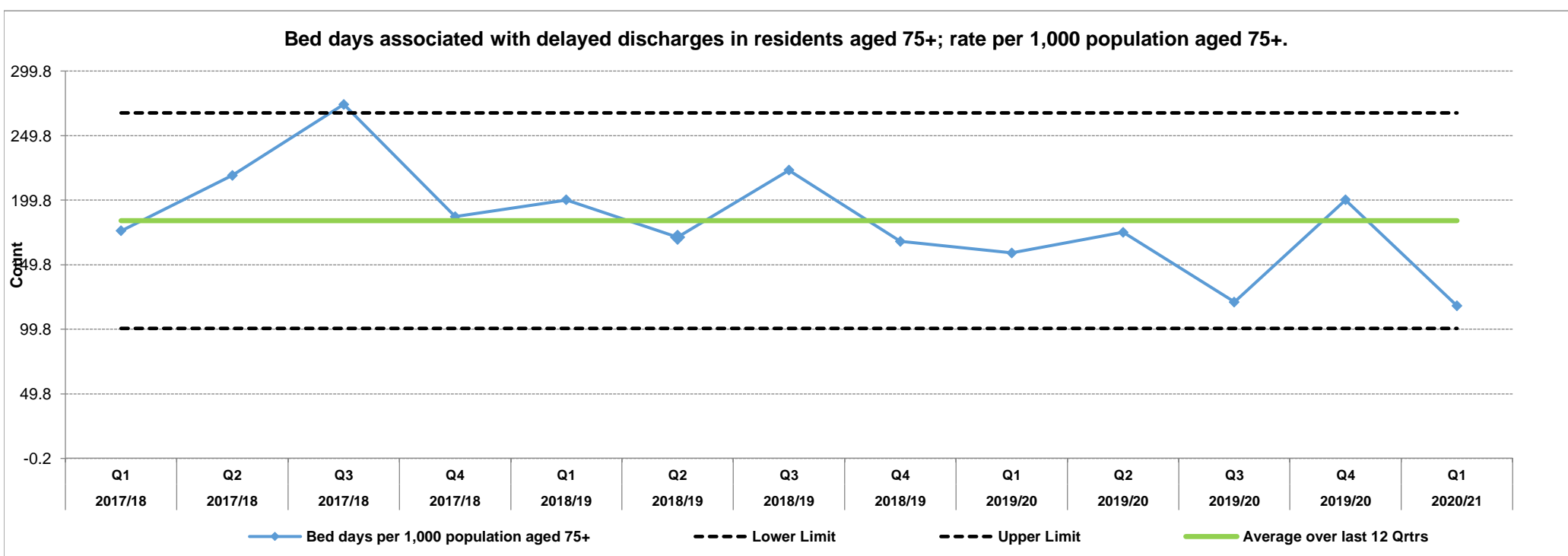
Please note the Delayed Discharge over 72 hours measurement has been implemented from April 2016.

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 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21
Bed days per 1,000 population aged 75+	176	219	274	187	200	171	223	168	159	175	121	200	118



How are we performing?

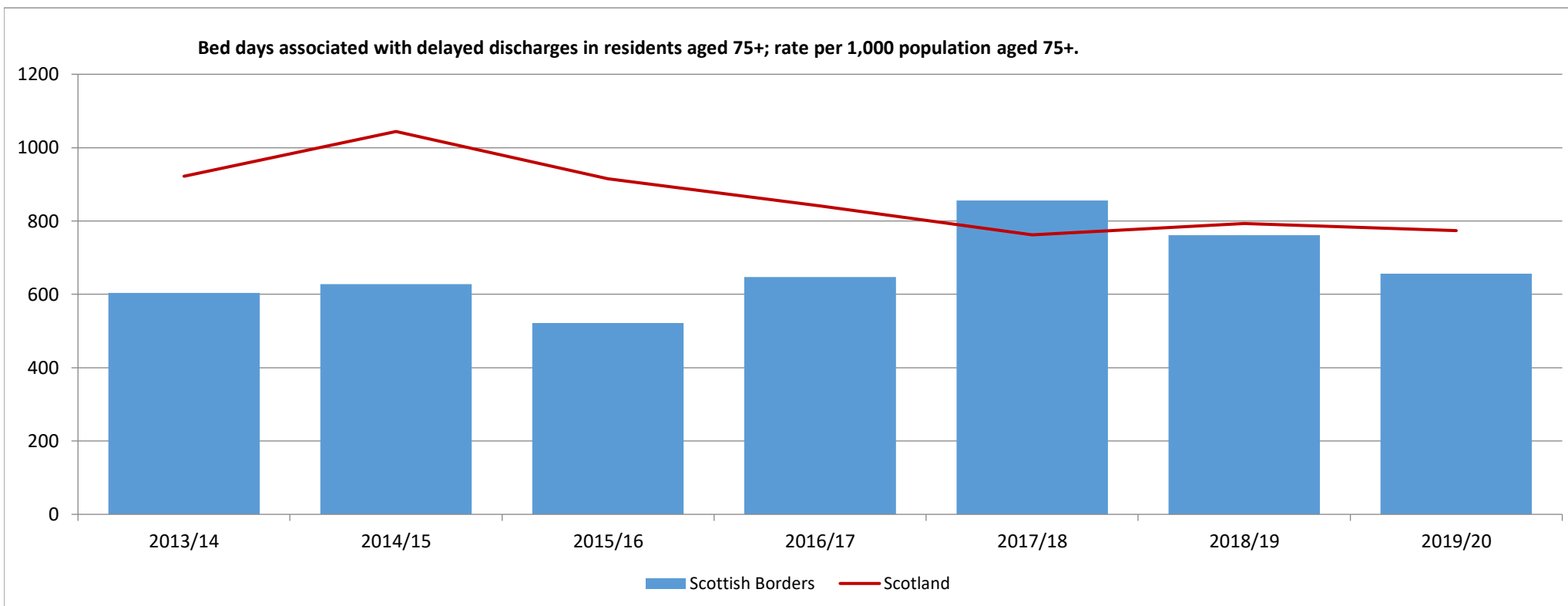
The rate of bed days associated with delayed discharges (75+) for quarter 3 of 2017/18 was higher than any previous quarter, increasing to over 250 per 1,000 residents for the first time. Quarter 3 for 18/19 had a similar spike to the same period the previous year, seeing the 2nd highest rate over the past 2 years. Generally, the overall trend for this measure is positive.

NHS Borders 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 measure has an overall positive trend over the last 3 years, although, Q4 2019/20 shows a significant increase to 200 days, which is above the average and well above the 180 day target. Although, at the onset of the Corona Virus 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.

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

Source: Core Suite Indicator workbooks

	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Scottish Borders	604	628	522	647	855	761	656
Scotland	922	1044	915	841	762	793	774



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.

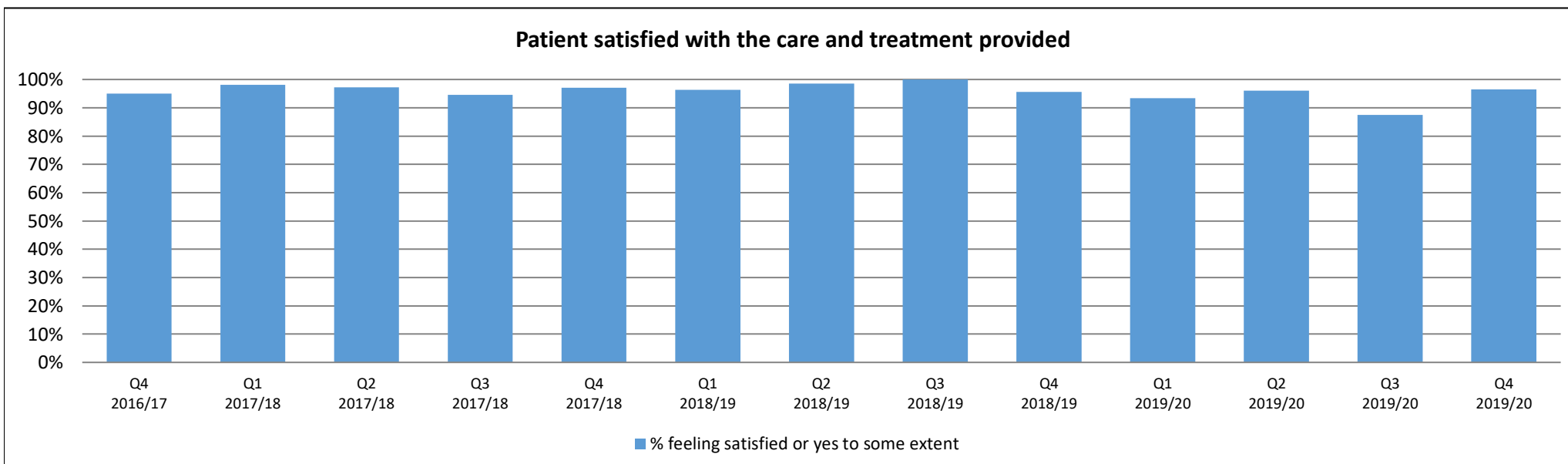
*Please note definitional changes were made to the recording of delayed discharge information from 1 July 2016 onwards. Delays for healthcare reasons and those in non hospital locations (e.g. care homes) are no longer recorded as delayed discharges. In this indicator, no adjustment has been made to account 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+.

BGH and Community Hospital Patient/Carer/Relative '2 Minutes of Your Time' Survey

Source: NHS Borders

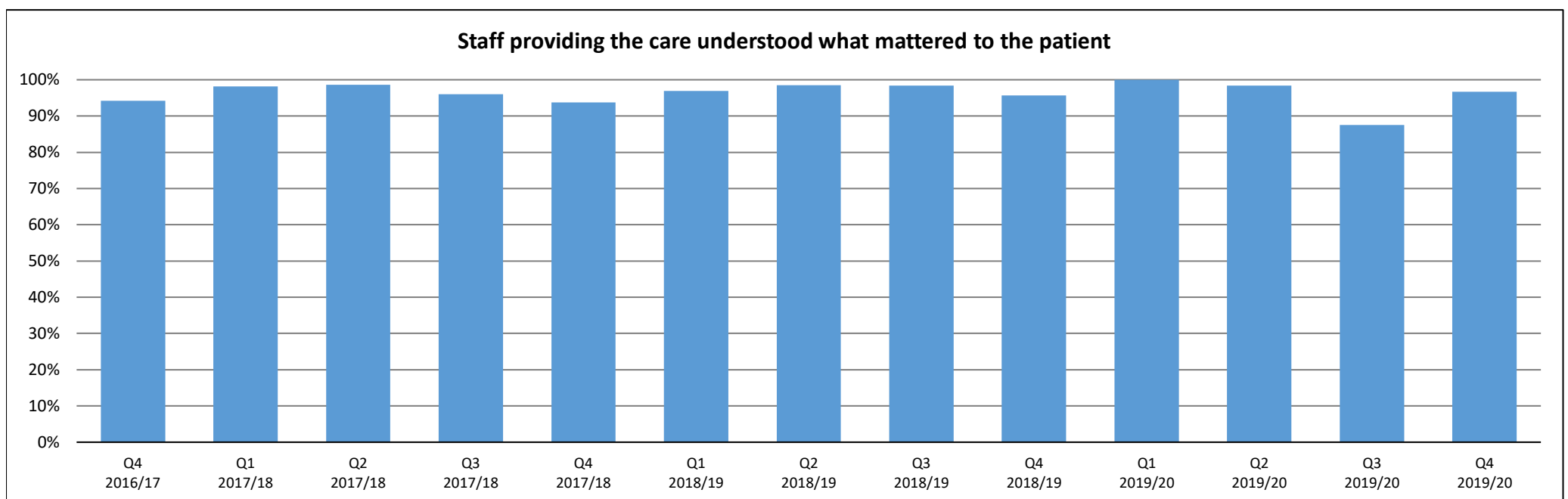
Q1 Was the patient satisfied with the care and treatment provided?

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
Patients feeling satisfied or yes to some extent	116	105	206	141	135	156	135	117	108	99	121	63	56
% feeling satisfied or yes to some extent	95.1%	98.1%	97.2%	94.6%	97.1%	96.3%	98.5%	100.0%	95.7%	93.4%	96.0%	87.5%	96.6%



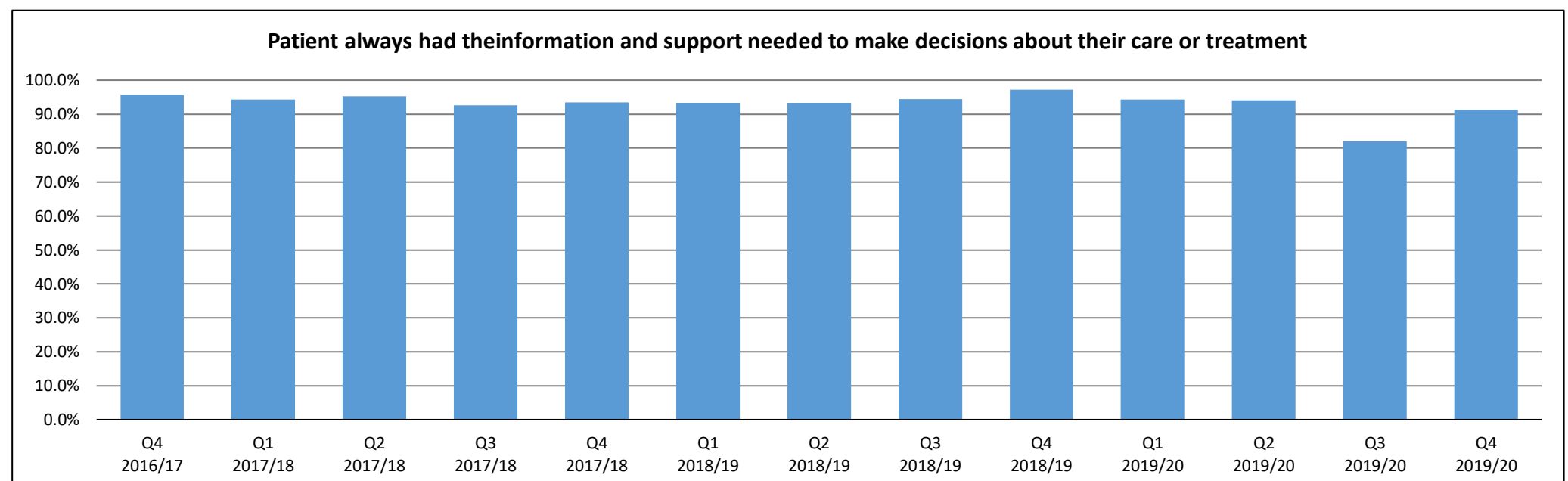
Q2 Did the staff providing the care understand what mattered to the patient?

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
Staff providing the care understood what mattered to the patient, or yes to some extent	113	105	213	144	135	158	136	119	110	106	125	63	59
% understood what mattered or yes to some extent	94.2%	98.1%	98.6%	96.0%	93.8%	96.9%	98.6%	98.3%	95.7%	100.0%	98.4%	87.5%	96.7%



Q3 Did the patient always have the information and support needed to make decisions about their care or treatment?

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
Patients always had the information and support needed to make decisions about their care or treatment, or yes to some extent	111	99	200	137	129	141	125	101	102	100	110	59	52
% always had information or support, or yes to some extent	95.7%	94.3%	95.2%	92.6%	93.5%	93.4%	93.3%	94.4%	97.1%	94.3%	94.0%	81.9%	91.2%



How are we performing?

The 2 Minutes of Your Time Survey is carried out across the Borders General Hospital and Community Hospitals and comprises of 3 quick questions asked of patients, relatives or carers by volunteers. There are also boxes posted in wards for responses. The results given here are the responses where the answer given was in the affirmative or 'yes to some extent'. Percentages given are of the total number of responses.

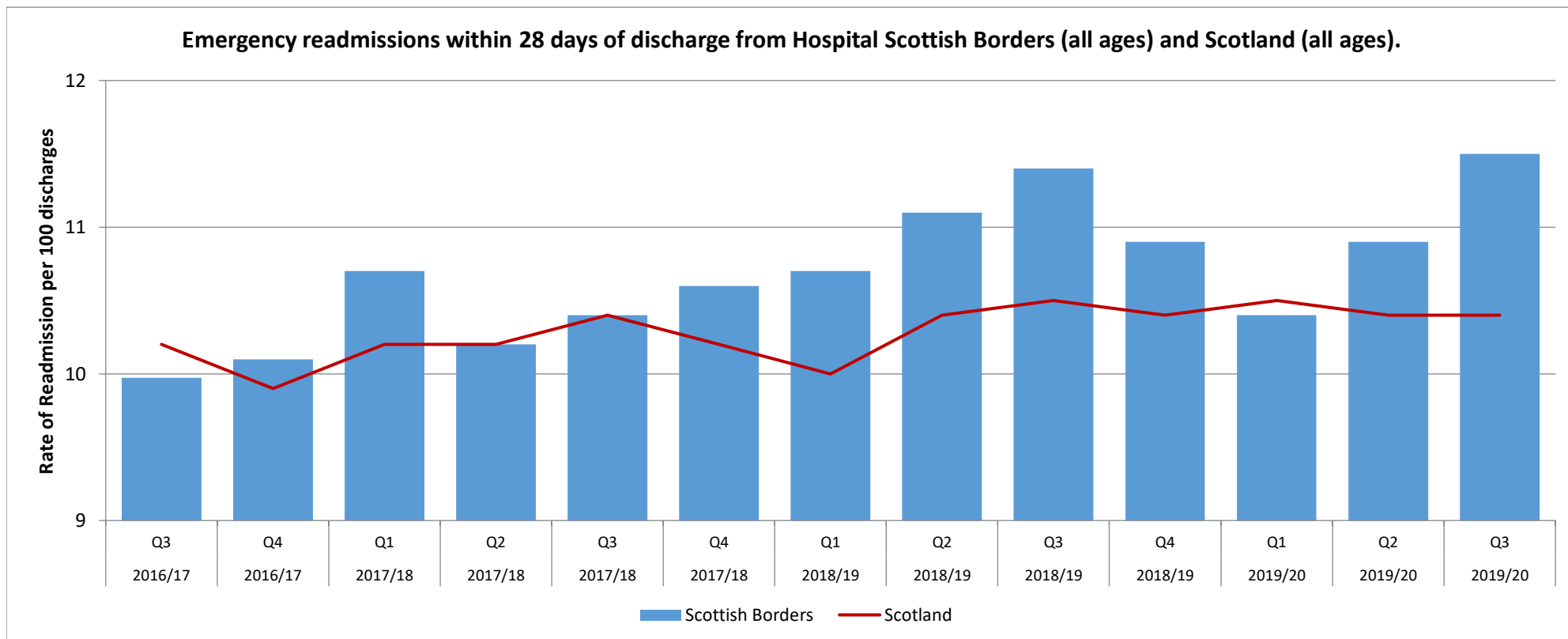
Overall, Borders scores well with an average 95.5% satisfaction rate. Patient satisfaction shows a positive trend over time and the latest overall average achieves the 95% target.

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 of discharge from hospital, Scottish Borders residents (all ages)

Source: ISD LIST bespoke analysis of SMR01 and SMR01-E data (based on "NSS Discovery" indicator but here also adding in Borders Community Hospital beds).

	Q3 2016/17	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20
Scottish Borders	10.0	10.1	10.7	10.2	10.4	10.6	10.7	11.1	11.4	10.9	10.4	10.9	11.5
Scotland	10.2	9.9	10.2	10.2	10.4	10.2	10.0	10.4	10.5	10.4	10.5	10.4	10.4



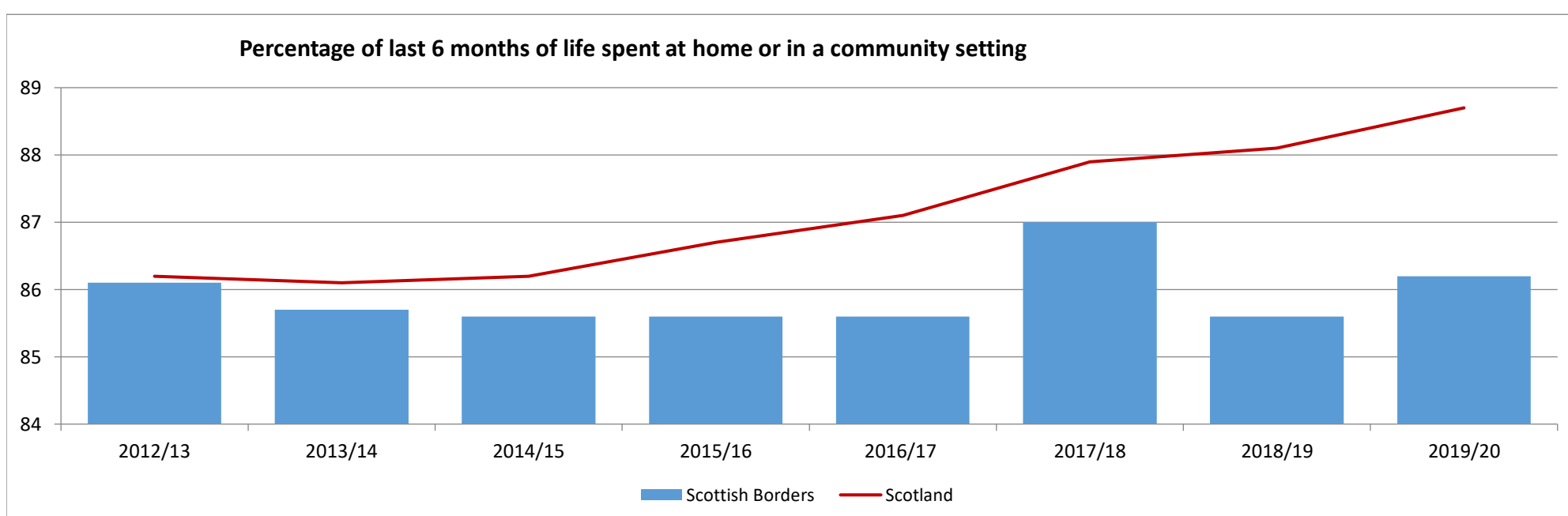
How are we performing?

The quarterly rate of emergency readmissions within 28 days of discharge for Scottish Borders residents has fluctuated since the start of the 2016/17 financial year. There has been a notable increase in readmissions within 28 days of discharge since quarter three of 2016/17. The Borders rate has usually been higher than the Scottish average and this trend continues. 2019/20 has seen a negative trend with an increasing pattern emerging across quarters 2 and 3. This followed a positive period where there was a reduction in readmission rates across the second half of 2018/19 and into Q1 of 2019/20. Q3 2019/20 has recorded the highest rate of readmissions in the last 3 years. There is a significant lag in this data due to completeness issues.

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

Source: Core Suite Indicator workbooks

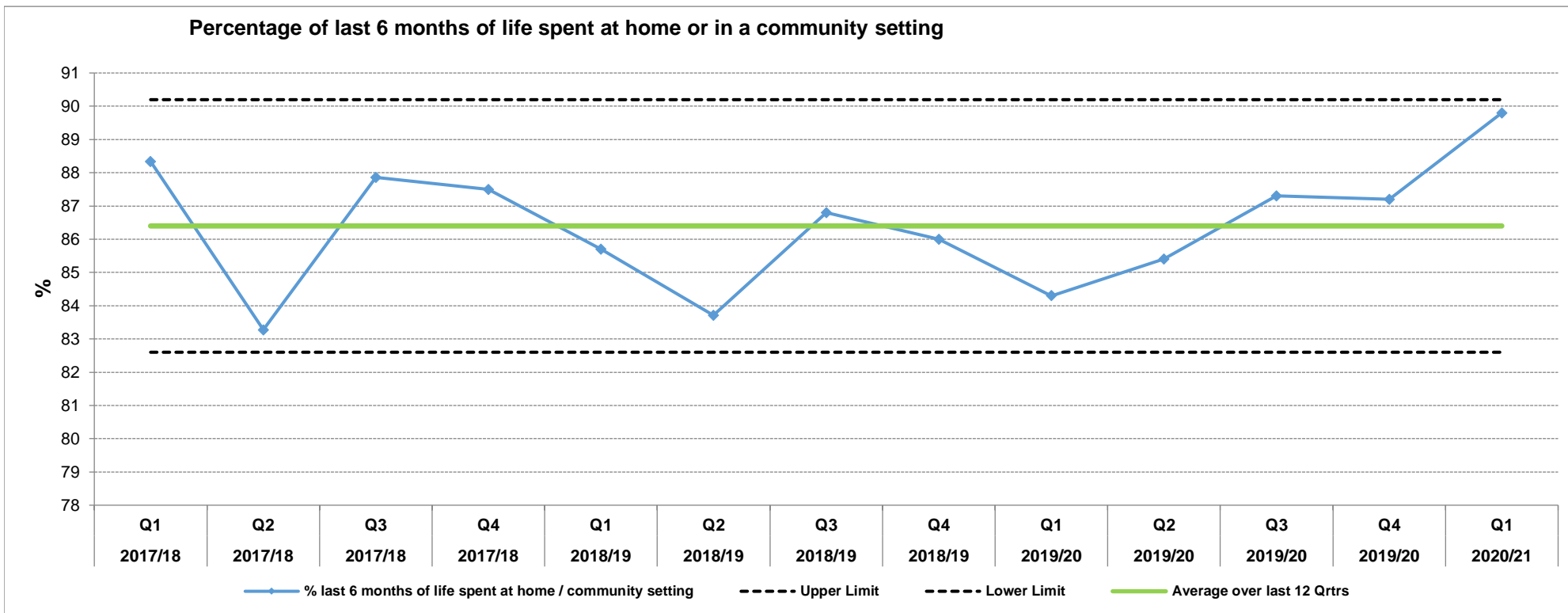
	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Scottish Borders	86.1	85.7	85.6	85.6	85.6	87.0	85.6	86.2
Scotland	86.2	86.1	86.2	86.7	87.1	87.9	88.1	88.7



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

Source: Core Suite Indicator workbooks

	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21
% last 6 months of life spent at home or in a community setting Scottish Borders	88.3	83.3	87.9	87.5	85.7	83.7	86.8	86.0	84.3	85.4	87.3	87.2	89.8



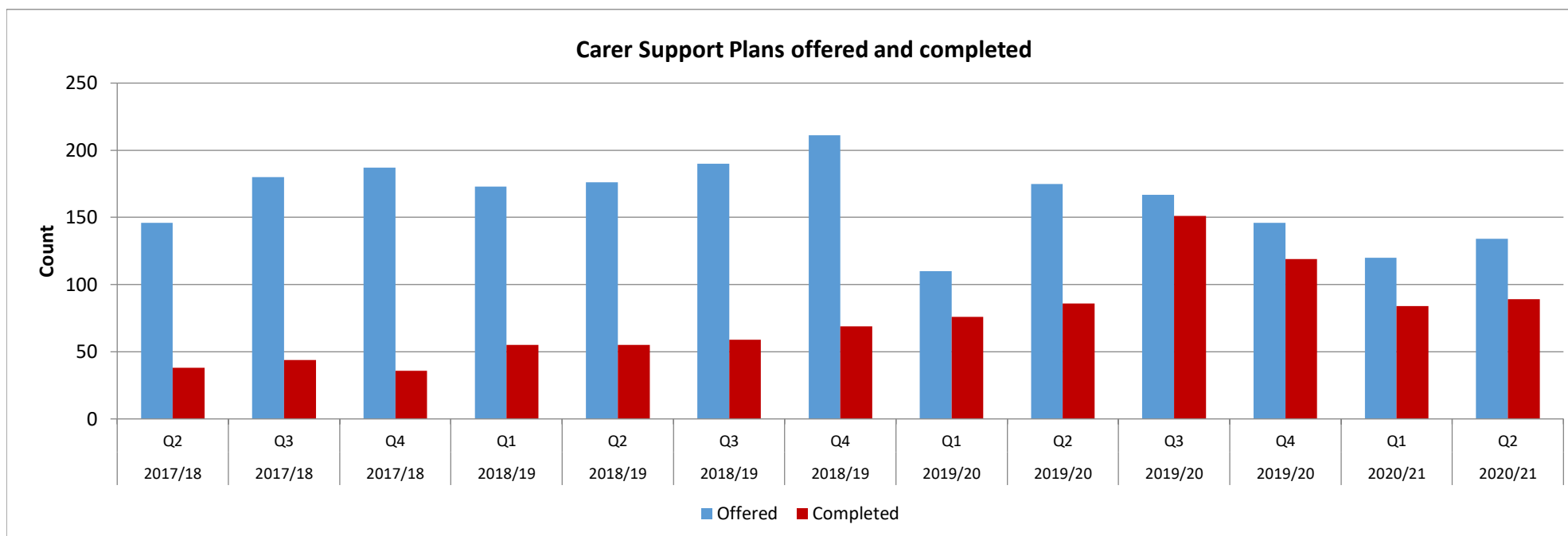
How are we performing?
 The percentage of last 6 months of life spent at home or in a community setting has appeared fairly consistent in the Borders from year to year since 2013/14 but in each case remains a little below the Scottish average which, in contrast, is gradually increasing.

In addition to the annual measure around end of life care, local quarterly data has been provided in relation to last 6 months of life (for Scottish Borders only). Over the years 2017/18 and 2018/19 there was a declining negative trend for this measure; however, over 2019/20 this has improved and in Q1 2020/21 demonstrates the highest % of people, over the last 3 years, that have spent the last 6 months of life at home or in a community setting.

Carers offered and completed Carer Support Plans

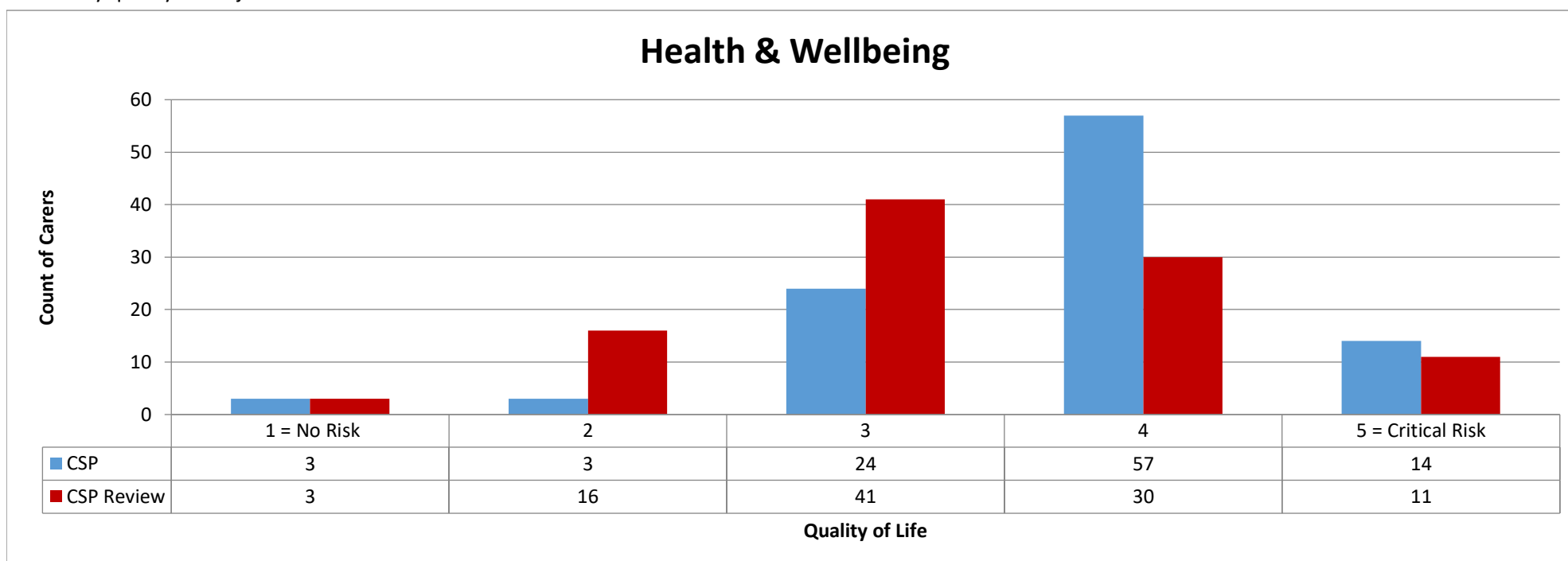
Source: Carers Centre

	Q2 2017/18	Q3 2017/18	Q4 2017/18	Q1 2018/19	Q2 2018/19	Q3 2018/19	Q4 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20	Q1 2020/21	Q2 2020/21
Carer Support Plans Offered	146	180	187	173	176	190	211	110	175	167	146	120	134
Carer Support Plans Completed	38	44	36	55	55	59	69	76	86	151	119	84	89



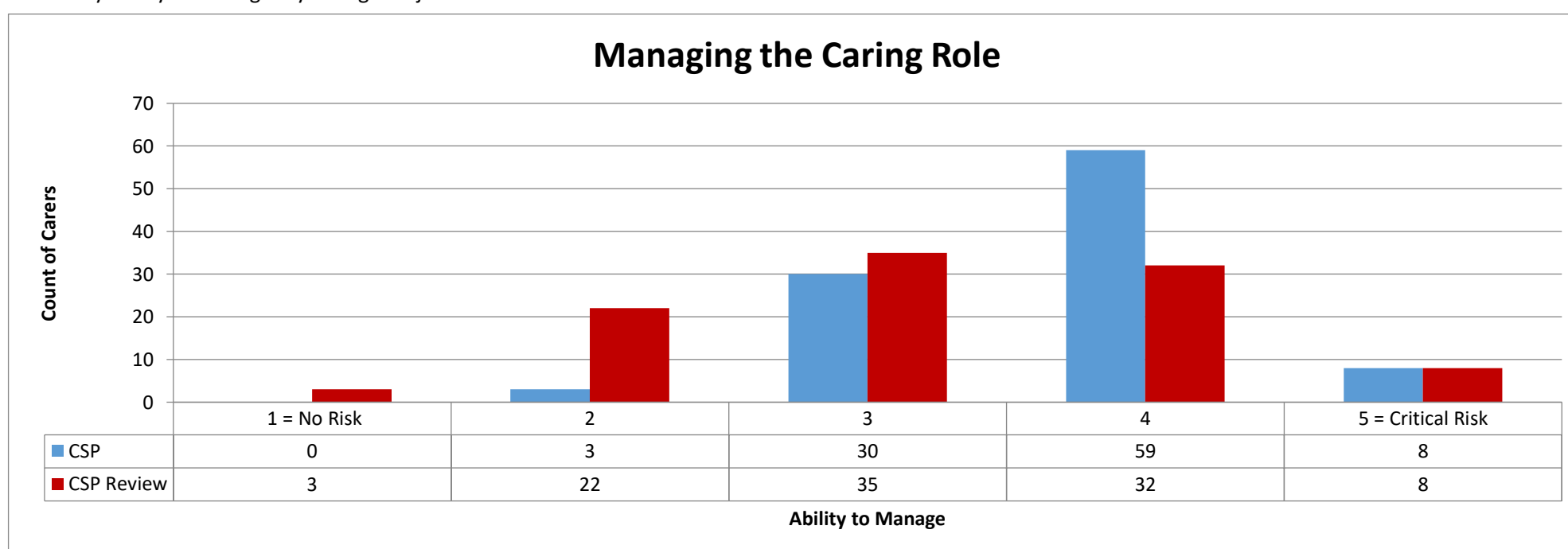
Health and Wellbeing (Q2 2020/21)

I think my quality of life just now is:



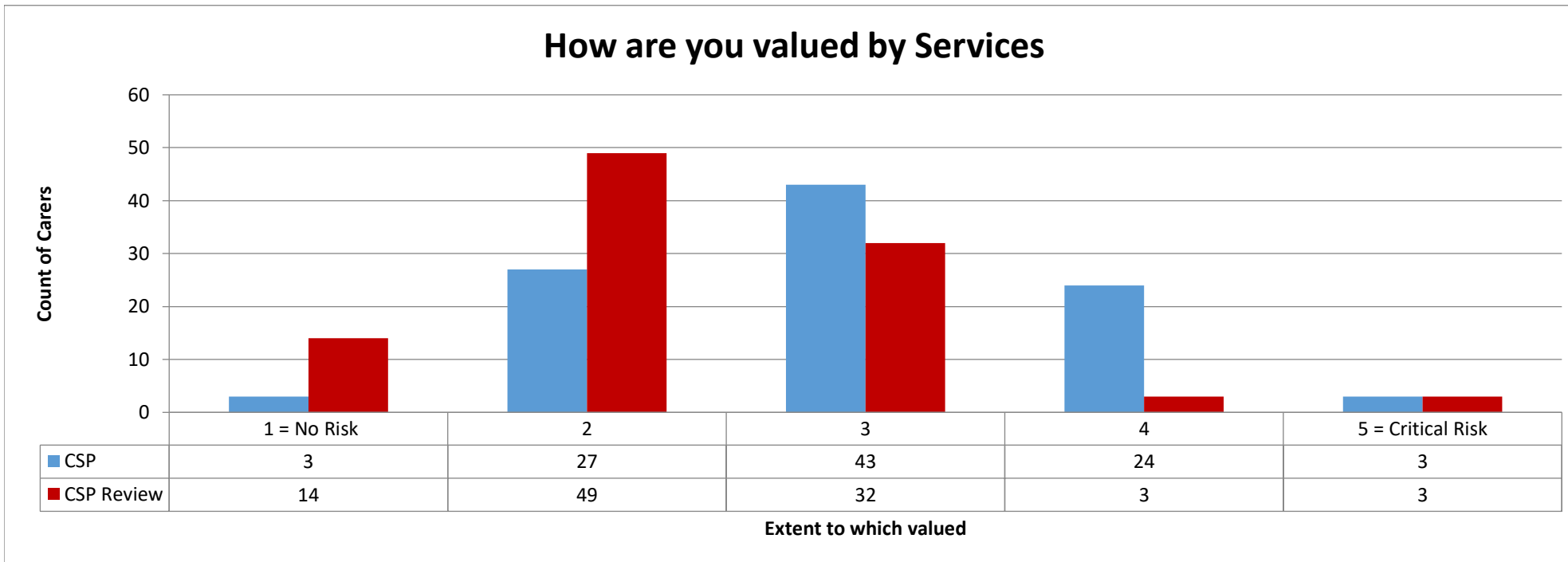
Managing the Caring role

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



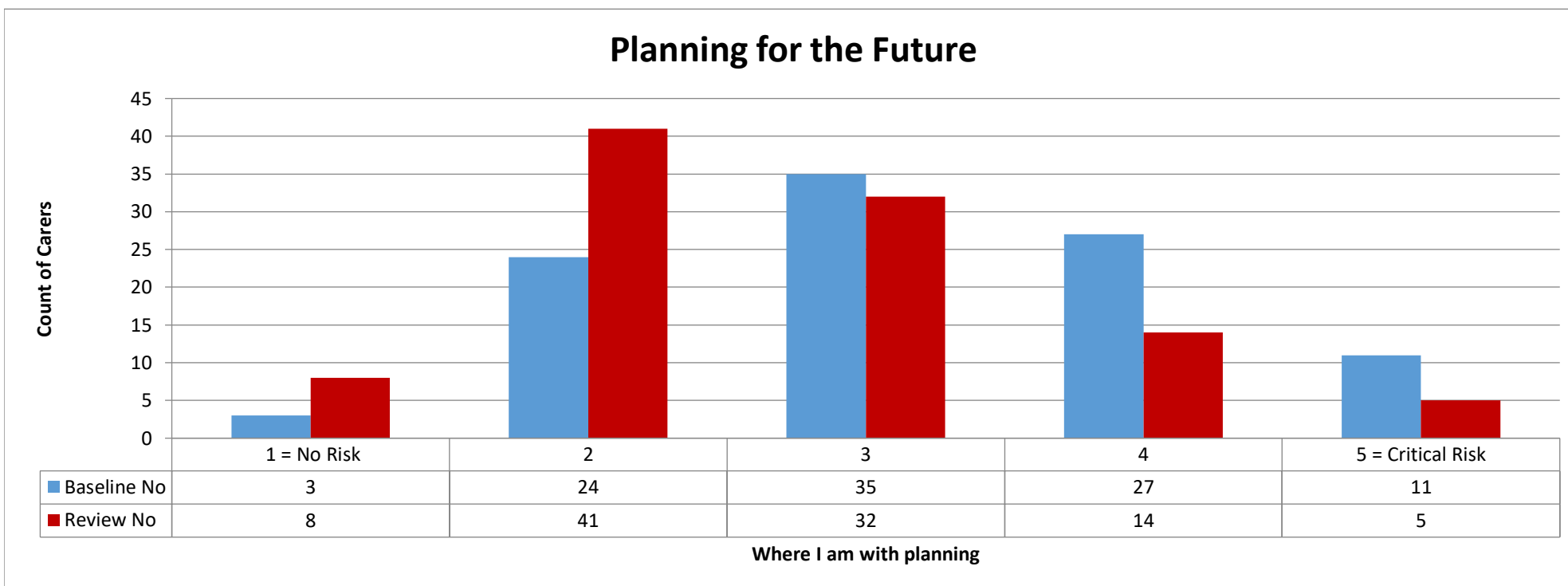
How are you valued by Services

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



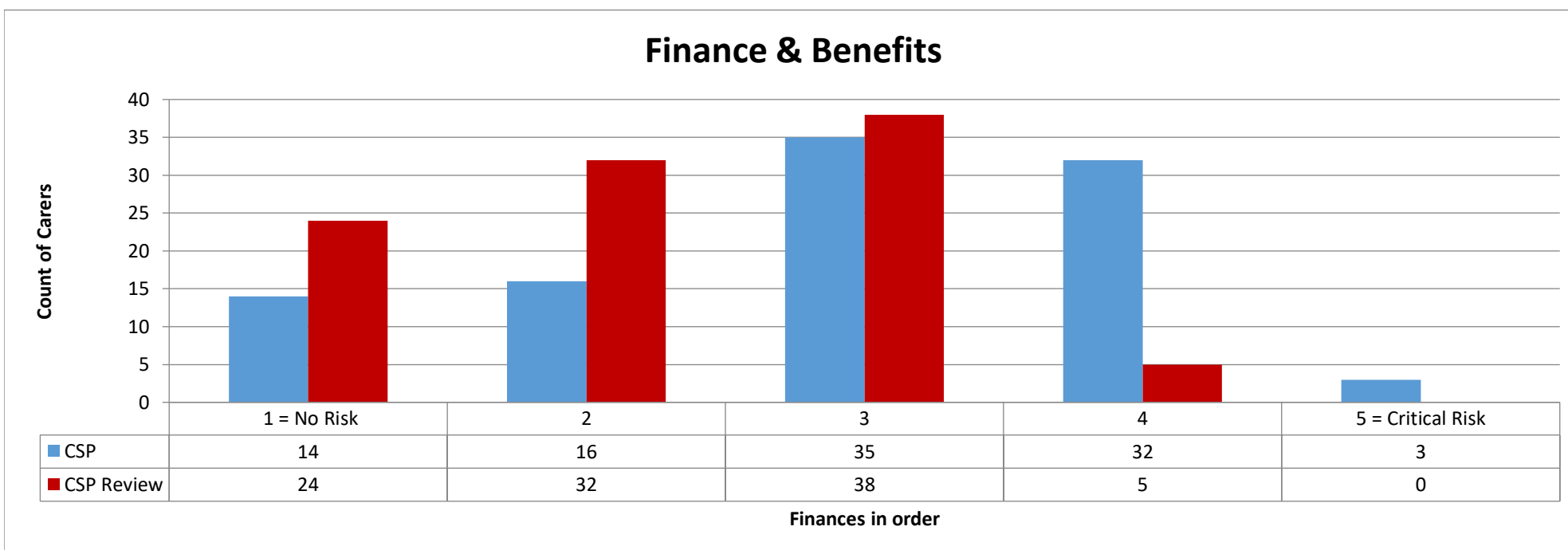
Planning for the Future

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



Finance & Benefits

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



How are we performing?

It is evident from the data above that there was a reduction in the number of Carer Support Plans (CSP) being offered in 2019/20 compared to the previous 2 years. However, the number of CSPs being completed has significantly increased and closes the gap that has been present between the number being offered and the number that were being completed. This would indicate a positive trend for 2019/20 and an assurance that Carers are receiving the support that is required. Q4 2019/20 and Q1 & 2 of 2020/21 will be affected by the impact of the Corona Virus pandemic.