



**REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 2 FEBRUARY 2022**  
**REPORT ON: DUNDEE HEALTH AND SOCIAL CARE PARTNERSHIP PERFORMANCE REPORT – 2021-22 QUARTER 2**  
**REPORT BY: CHIEF FINANCE OFFICER**  
**REPORT NO: PAC1-2022**

**1.0 PURPOSE OF REPORT**

1.1 The purpose of this report is to update the Performance and Audit Committee on 2021-22 Quarter 2 performance against the National Health and Wellbeing Indicators and 'Measuring Performance Under Integration' indicators. This report also sets out a revised approach and format for quarterly performance reports based on feedback received from Integration Joint Board Members and internal audit colleagues.

**2.0 RECOMMENDATIONS**

It is recommended that the Performance & Audit Committee (PAC):

- 2.1 Note the content of this summary report.
- 2.2 Note the performance of Dundee Health and Social Care Partnership, at both Dundee and Local Community Planning Partnership (LCPP) levels, against the National Health and Wellbeing Indicators as summarised in Appendix 1 (tables 1, 2 and 3).
- 2.3 Note the performance of Dundee Health and Social Care Partnership against the 'Measuring Performance Under Integration' indicators as summarised in Appendix 1 (table 3).

**3.0 FINANCIAL IMPLICATIONS**

3.1 None.

**4.0 REVISION OF QUARTERLY PERFORMANCE REPORT**

4.1 The Partnership's approach to quarterly performance reporting has been constantly evolving since the establishment of the Integration Joint Board in 2016. Until Quarter 4 2020/21 the overall format of the quarterly performance report had been in place for four years, with only summary reports being provided during 2020/21 due to resource pressures arising from the wider pandemic circumstances. Following consultation with members of the Performance and Audit Committee and also taking into account feedback received via the '2020-21 Annual Governance Report', through discussion with the Chief Internal Auditor and through the process of undertaking the Dundee IJB Performance Management internal audit, the format and content of quarterly performance reports was revised in Quarter 1 2020/21.

## 5.0 QUARTER 2 PERFORMANCE 2021-22 – KEY ANALYTICAL MESSAGES

5.1 Key analytical messages for the Quarter 2 2021/22 period are:

- Premature mortality rate is high for Dundee and performance is second poorest of the 8 comparable Partnerships (as aligned by the Improvement Service) and poorest out of the 3 Tayside partnerships.
- Significant variation by Local Community Planning Partnership (LCPP) is still apparent, with poorest performance for many of the National Indicators in the most deprived LCPPs.
- Performance poorer than the 2015/16 baseline in all or most of the LCPPs for rate of emergency admissions 18+, emergency admission numbers from A+E 18+, emergency admissions as a rate of all A+E attendances 18+.
- Despite having a deteriorating rate of emergency admissions 18+, performance is 2<sup>nd</sup> best out of the 8 family group partnerships, although performance is poorest out of the 3 Tayside Partnerships.
- The number of emergency admissions from A+E has increased over the last 4 quarters although the number of emergency admissions as a rate per 1,000 of all A+E attendances has decreased over the last 3 quarters (both are higher than the 2015/16 baseline).
- The rate of emergency bed days 18+ has reduced since 2015/16, which is an improvement although the rate has been increasing (deteriorating) over the 2021 calendar year. Performance is best in the family group and 2<sup>nd</sup> out of the 3 Tayside Partnerships.
- 91.4% of the last 6 months of life was spent at home or in a community setting and this is higher than the 2015/16 baseline (improvement) and although performance across Scotland is similar it is best out of the 8 family group partnership and is 2<sup>nd</sup> out of the 3 Tayside partnerships.
- Rate of hospital admissions due to a fall for aged 65+ is 31.3% higher than the 2015/16 baseline and is higher in every LCPP. The rate decreased (improved) between quarter 1 and 2, however is the poorest of the 8 family group partnerships and poorest out of the 3 Tayside partnerships. An improvement report is currently being prepared.
- % care services graded 'good' (4) or better in Care Inspectorate inspections has deteriorated since the 2015/16 baseline. An analytical report is currently underway.
- Rate of bed days lost to a standard delayed discharge for age 75+ is 30.6% less than the 2015/16 baseline. There were improvements across every LCPP except The Ferry.
- Rate of bed days lost to complex (code 9) delayed discharge for age 75+ is 36% less than the 2015/16 baseline, with increases across 3 LCPPs (Lochee, West End and The Ferry). Performance has however deteriorated over the last 4 quarters.
- % of health and social care resource spent on hospital stays where the patient was admitted as an emergency was 5.8% less in 2020/21 than 2015/16.

5.2 The data included in this report for rate of readmissions within 28 days is for Q1. The Business Support Unit at NHS Tayside identified a data quality issue which they are currently working to resolve. Q2 data will be analysed and presented when it becomes available.

5.3 As agreed at the Performance and Audit Committee in November 2021, the Strategy and Performance Team are continuing to work with colleagues to progress an in-depth analytical report relating to readmissions and operational colleagues are continuing to progress a report on improvement plans to address poor performance in relation to falls.

## 6.0 POLICY IMPLICATIONS

6.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

## 7.0 RISK ASSESSMENT

<b>Risk 1 Description</b>	Poor performance against national indicators could affect outcomes for individuals and their carers, spend associated with poor performance and the ability of the IJB to deliver fully commitments set out in the Strategic and Commissioning Plan.
<b>Risk Category</b>	Financial, Governance, Political
<b>Inherent Risk Level</b>	Likelihood 3 x Impact 5 = Risk Scoring 15 (which is an Extreme Risk Level)
<b>Mitigating Actions</b> (including timescales and resources )	<ul style="list-style-type: none"><li>- Continue to develop a reporting framework which identifies performance against national and local indicators.</li><li>- Continue to report data quarterly to the PAC to highlight areas of exceptional performance (poor and excellent).</li><li>- Continue to support operational managers by providing in depth analysis regarding areas of poor performance, such as around readmissions to hospital and falls related hospital admissions.</li><li>- Continue to ensure that data informs operational practices and improvements and also that operational activities and priorities are used to interpret trends shown by the data.</li><li>- Work with operational managers, through a recommencement of the Performance and Finance Group, to identify areas of poor performance that result in operational risk and undertake additional analysis as required.</li></ul>
<b>Residual Risk Level</b>	Likelihood 3 x Impact 3 = Risk Scoring 9 (which is a Moderate Level)
<b>Planned Risk Level</b>	Likelihood 2 x Impact 3 = Risk Scoring 6 (which is a Moderate Risk Level)
<b>Approval recommendation</b>	Given the moderate level of planned risk, this risk is deemed to be manageable.

## 8.0 CONSULTATIONS

8.1 The Chief Officer, Heads of Service, Health and Community Care and the Clerk were consulted in the preparation of this report.

## 9 BACKGROUND PAPERS

9.1 None.

**DATE:** 10 January 2022

Dave Berry  
Chief Finance Officer

Lynsey Webster  
Senior Officer, Strategy and Performance

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## APPENDIX 1 – Performance Summary

Table 1: Performance in Dundee’s LCPPs - % change in Q2 2021-22 against baseline year 2015/16



National Indicator	Dundee	Lochee	East End	Coldside	North East	Strathmartine	Maryfield	West End	The Ferry
Emer Admissions rate per 100,000 18+ (Covid and Non Covid)	+1.2%	+6.0%	+7.0%	-6.3%	+0.5%	+2.9%	+9.0%	-0.3%	-7.0%
Emer Admissions rate per 100,000 18+ (Non Covid Only)	-20.0%	-3.5%	-4.4%	-16.4%	-9.5%	-8.7%	-2.3%	-7.5%	-15.1%
Emer Bed Days rate per 100,000 18+ (Covid and Non Covid)	-13.1%	-8.0%	-15.6%	-17.9%	-6.5%	-8.6%	-13.1%	-23.1%	-9.3%
Emer Bed Days rate per 100,000 18+ (Non Covid Only)	-20.5%	-14.8%	-23.0%	-25.8%	-14.1%	-16.9%	-20.3%	-28.9%	-17.0%
Readmissions rate per 1,000 Admissions All (Q1)*	27%	34%	17%	18%	-11%	6%	38%	31%	64%
Hospital admissions due to falls rate per 1,000 65+	+25.4%	+30.0%	+22.5%	+18.0%	-32.4%	+12.4%	+59.5%	+28.5%	+48.3%
Delayed Discharge Bed Days Lost rate per 1,000 75+ (Standard)	-30.6%	-32.2%	-45.8%	-55.6%	-29.5%	-49.0%	-33.2%	-31.8%	+38.3%
Delayed Discharge Bed Days Lost rate per 1,000 75+ (Code 9)	-36.4%	+173.2%	-58.7%	-46.9%	-86.0%	-90.0%	-39.4%	+40.8%	+71.0%

\* The quarterly and locality data included in this report for rate of readmissions within 28 days is for Q1. The Business Support Unit at NHS Tayside identified a data quality issue which they are currently working to resolve. Q2 data will be analysed and presented when it becomes available.

**Table 2: Performance in Dundee's LCPPs - LCPP Performance in Q1 2021-22 compared to Dundee**



National Indicator	Dundee	Lochee	East End	Coldside	North East	Strathmartine	Maryfield	West End	The Ferry
Emer Admissions rate per 100,000 18+ (Covid and Non Covid)	12,080	14,584	16,928	12,856	11,686	13,470	10,809	7,974	10,246
Emer Admissions rate per 100,000 18+ (Non Covid Only)	9,554	13,280	15,132	11,470	10,524	11,957	9,689	7,400	9,357
Emer Bed days rate per 100,000 18+ (Covid and Non Covid)	115,519	149,085	153,875	133,846	105,316	113,261	92,675	75,499	114,603
Emer Bed days rate per 100,000 18+ (Non Covid Only)	94,550	138,173	140,285	120,977	96,778	102,948	84,966	69,768	104,882
Readmissions rate per 1,000 Admissions All (Q1)*	31.7	35.7	32.2	35.3	18.4	26.6	32.0	36.2	33.2
Hospital admissions due to falls rate per 1,000 65+	31.3	34.6	33.6	35.3	13.9	28.3	37.0	35.4	30.0
Delayed Discharge bed days lost rate per 1,000 75+ (standard)	365	412	353	246	333	250	398	465	433
Delayed Discharge bed days lost rate per 1,000 75+ (Code 9)	184	449	216	235	106	41	98	305	71

Source: NHS Tayside data

\* The quarterly and locality data included in this report for rate of readmissions within 28 days is for Q1. The Business Support Unit at NHS Tayside identified a data quality issue which they are currently working to resolve. Q2 data will be analysed and presented when it becomes available.

Key:  Improved/Better  Stayed the same  Declined/Worse

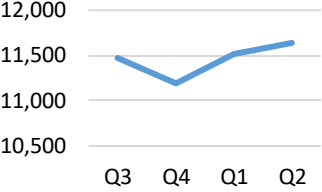
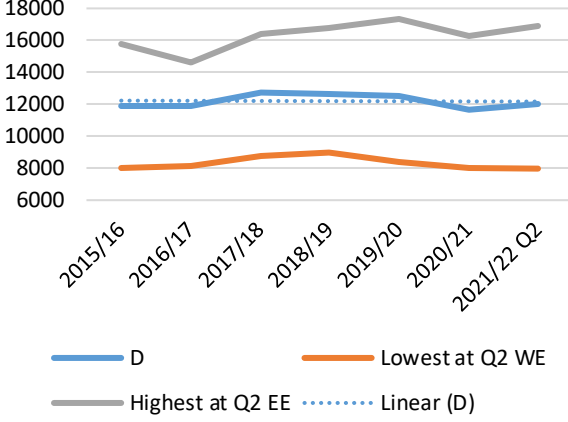
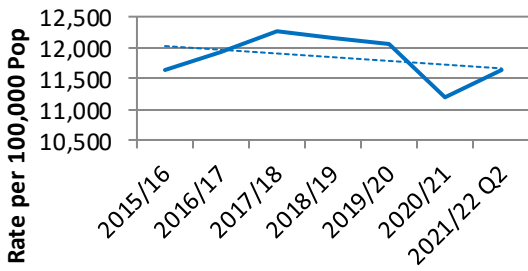
**Table 3: Performance in Dundee's LCPPs - LCPP Performance in Q2 2021-22 compared to Dundee**

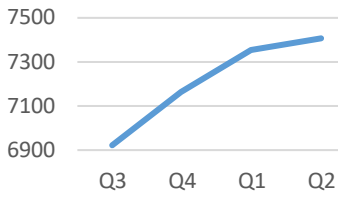
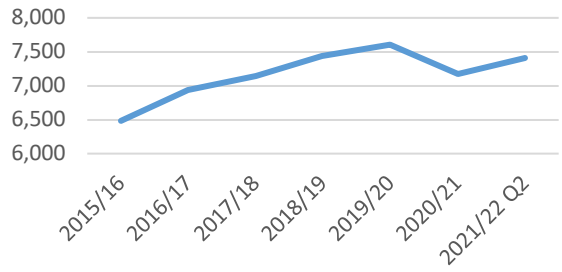
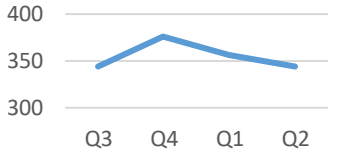
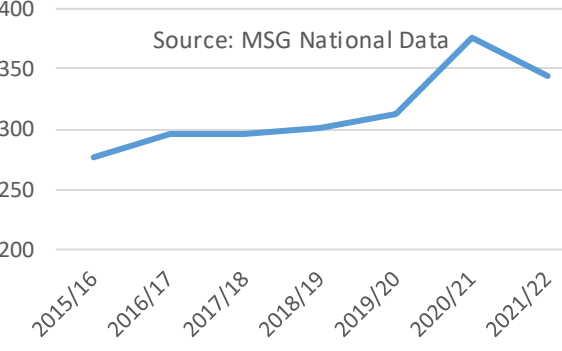
Dundee = D	East End = EE	Coldside = C	West End = WE
Strathmartine = S	North East = NE	Lochee = L	The Ferry = TF

National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst
1.% of adults able to look after their health very well or quite well				25th	2 <sup>nd</sup> (92%)	3 <sup>rd</sup>
2.% of adults supported at home who agreed that they are supported to live as independently as possible				24th	7 <sup>th</sup> (79%)	3 <sup>rd</sup>
3.% of adults supported at home who agreed that they had a say in how their help, care, or support was provided				26th	6 <sup>th</sup> (73%)	3 <sup>rd</sup>
4. % of adults supported at home who agree that their health and social care services seem to be well co-ordinated				22th	7 <sup>th</sup> (72%)	3 <sup>rd</sup>
5.% of adults receiving any care or support who rate it as excellent or good				29th	8 <sup>th</sup> (75%)	3 <sup>rd</sup>
6.% of people with positive experience of care at their GP practice				16th	4 <sup>th</sup> (79%)	2 <sup>nd</sup>

National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst												
7.% of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life				27th	7 <sup>th</sup> (77%)	3rd												
8.% of carers who feel supported to continue in their caring role				17th	6 <sup>th</sup> (35%)	3rd												
9.% of adults supported at home who agreed they felt safe				19th	6 <sup>th</sup> (82%)	3rd												
10. % staff who say they would recommend their workplace as a good place to work	Not Available Nationally	Not Available Nationally	Not Available Nationally															
11. Premature mortality rate per 100,000 persons	6% less in 20/21 than 15/16 (improved)	Not Available	<table border="1"> <caption>Premature mortality rate per 100,000 persons (2016-2020)</caption> <thead> <tr> <th>Year</th> <th>Rate</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>572</td> </tr> <tr> <td>2017</td> <td>558</td> </tr> <tr> <td>2018</td> <td>540</td> </tr> <tr> <td>2019</td> <td>542</td> </tr> <tr> <td>2020</td> <td>605</td> </tr> </tbody> </table>	Year	Rate	2016	572	2017	558	2018	540	2019	542	2020	605	29th	7th	3rd
Year	Rate																	
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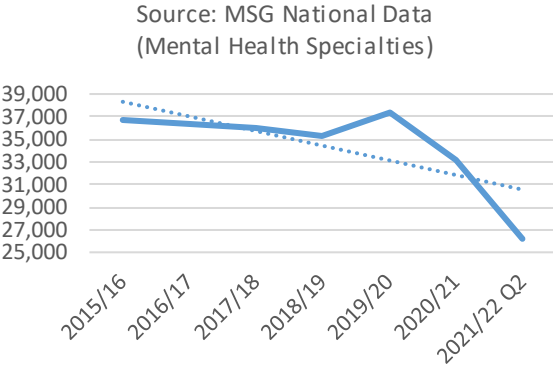
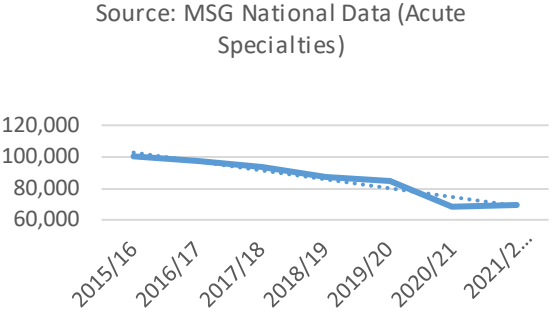
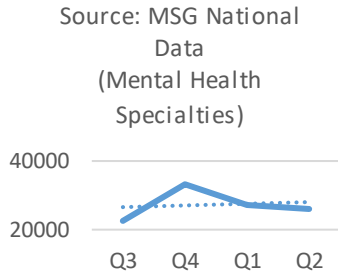


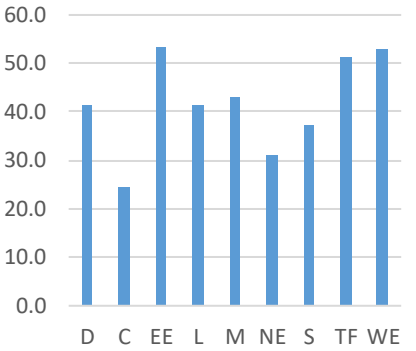
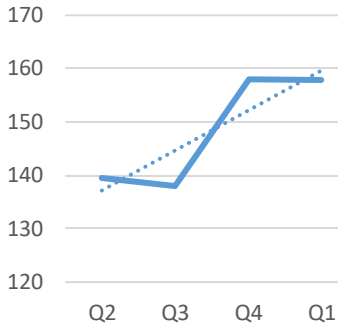
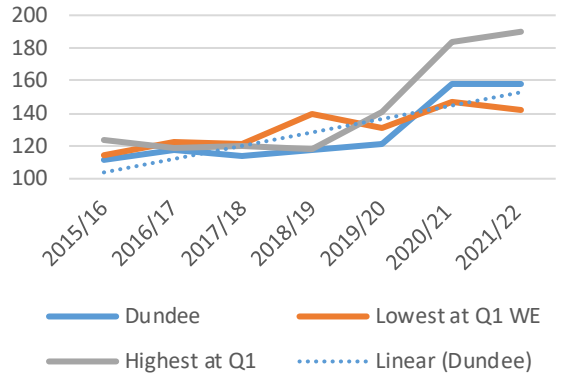
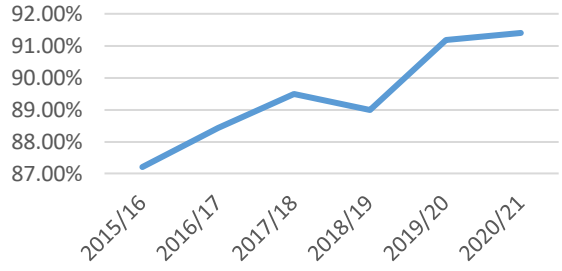
National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst
<b>12. Emer Admissions rate per 100,000 18+</b>	0.4% more in 2021/22 than 2015/16 (deterioration) (source: MSG)	Source: MSG National Data 	Source: NHST BSU  Source: National MSG Data 	18th	2 <sup>nd</sup>	3rd

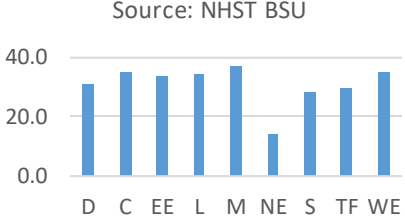
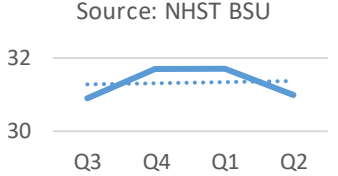
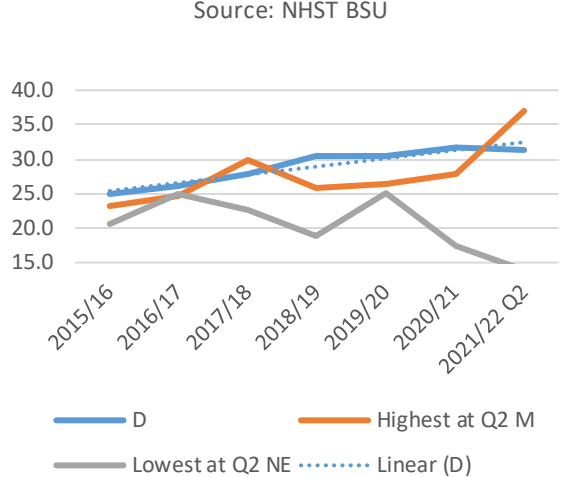
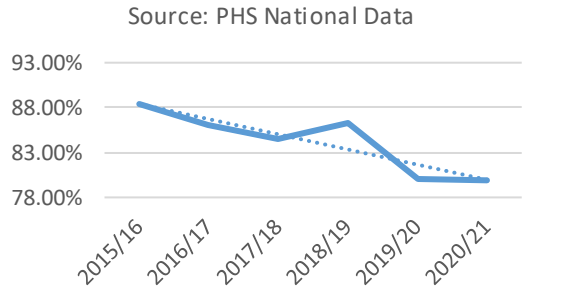
National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst
Emergency Admissions Numbers from A&E (MSG)	924 more attendances in 2021/22 Q2 than 2015/16	Source: MSG National Data 	Source: MSG National Data 	NA as number and not rate	NA as number and not rate	NA as number and not rate
Emergency Admissions as a Rate per 1,000 of all Accident & Emergency Attendances (MSG)	67 higher in 2021/22 Q2 than 2015/16	Source: MSG National Data 	Source: MSG National Data 	Not Avail	Not Avail	Not Avail

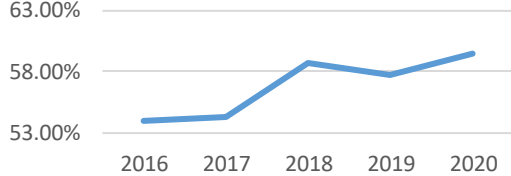
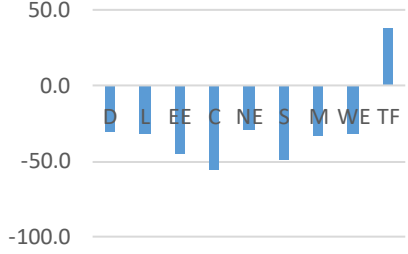
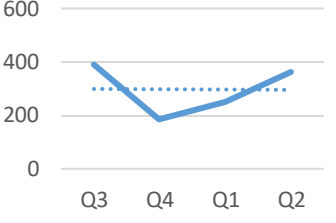
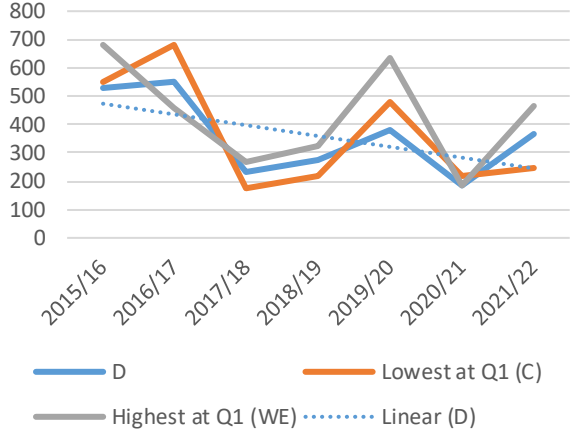
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Accident & Emergency Attendances (MSG)	2047 fewer in 2021/22 Q2 than 2015/16		<p>Source: MSG National Data</p>	NA as number and not rate	NA as number and not rate	NA as number and not rate
13. Emer Bed days rate per 100,000 18+	<p>SOURCE: NHST BSU</p> <p>36,899 (30%) less acute bed days in 2021/22Q2 than 2015/16 (improved) (source: MSG)</p>	<p>Source: NHST BSU</p>	<p>Source: NHST BSU</p>	11th	1st	2nd

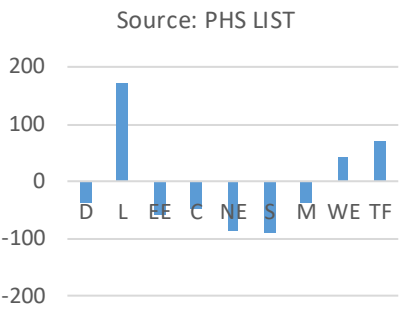
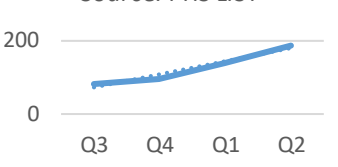
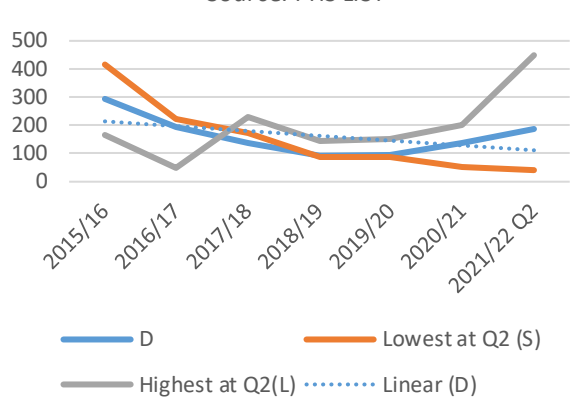
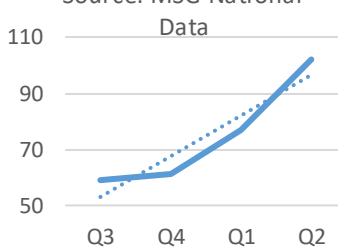
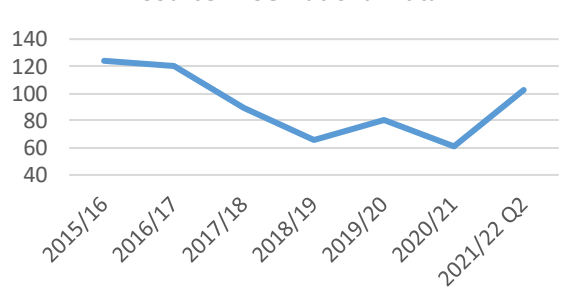
12,622 (28%) less mental health bed days in 2021/22Q2 than 2015/16 (improved) (source: MSG)



National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst
<p><b>14. Readmissions rate per 1,000 Admissions All Ages*</b></p> <p>* The quarterly and locality level data included in this report for rate of readmissions within 28 days is for Q1. The Business Support Unit at NHS Tayside identified a data quality issue which they are currently working to resolve. Q2 data will be analysed and presented when it becomes available.</p>	 <p>41.6% more at Q1 2021/22 than 2015/16 (deterioration). Variation ranges from 24.6% in Coldside to 53.3% in East End*</p>			28 <sup>th</sup>	8 <sup>th</sup>	3 <sup>rd</sup>
<p><b>15. % of last 6 months of life spent at home or in a community setting</b></p>	Up by 2.8% between 2015/16 and 2020/21 (improvement)	Not Available	<p>Source: PHS National Data</p> 	11 <sup>th</sup>	1 <sup>st</sup>	2 <sup>nd</sup>

National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst
<b>16. Hospital admissions due to falls rate per 1,000 65+</b>	<p>Source: NHST BSU</p>  <p>31.3% more in 2021/22Q2 than 2015/16 (deterioration). Greatest increase (deterioration) was in Maryfield with 37% increase (deterioration).</p>	<p>Source: NHST BSU</p>  <p>Improvement between Q1 and Q2. Lochee, North East, The Ferry and West End saw improved performance between Q1 and Q2</p>	<p>Source: NHST BSU</p>  <p>Legend:  <span style="color: blue;">—</span> D  <span style="color: orange;">—</span> Highest at Q2 M  <span style="color: grey;">—</span> Lowest at Q2 NE  <span style="color: blue;">⋯</span> Linear (D)</p>	32 <sup>nd</sup>	8 <sup>th</sup>	3 <sup>d</sup>
<b>17. % care services graded 'good' (4) or better in Care Inspectorate inspections</b>	<p>10% less in 2020/21 than 2015/16 (deterioration)</p>	<p>Not Available</p>	<p>Source: PHS National Data</p> 	29 <sup>th</sup>	8 <sup>th</sup>	3 <sup>rd</sup>

National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst												
<b>18. % adults with intensive care needs receiving care at home</b>	5.5% more in 2020 than 2016 (improvement) (note calendar year)	Not Available	<p>Source: PHS SOURCE National Data</p>  <table border="1"> <caption>18. % adults with intensive care needs receiving care at home</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>53.5%</td> </tr> <tr> <td>2017</td> <td>54.0%</td> </tr> <tr> <td>2018</td> <td>58.5%</td> </tr> <tr> <td>2019</td> <td>57.5%</td> </tr> <tr> <td>2020</td> <td>59.0%</td> </tr> </tbody> </table>	Year	Percentage	2016	53.5%	2017	54.0%	2018	58.5%	2019	57.5%	2020	59.0%	22nd	7th	2nd
Year	Percentage																	
2016	53.5%																	
2017	54.0%																	
2018	58.5%																	
2019	57.5%																	
2020	59.0%																	
<b>19.1 Delayed Discharge bed days lost rate per 1,000 75+ (standard)</b>	<p>Source: PHS LIST</p>  <p>30.6% reduction (improvement) since 2015/16 with improvements across every LCPP except for The Ferry</p>	<p>Source: PHS LIST</p>  <p>Deteriorating trend over the last 3 quarters, although still 30.6% improvement since 2015/16</p>	<p>Source: PHS LIST</p> 	NA	NA	NA												

National Indicator	Difference From 15/16 Baseline	Dundee Short Term Trend (last 4 quarters)	Long Term Trend	Scotland Position 1= best, 32 = worst	Family Group Position 1= best, 8 = worst	Tayside Group Position 1= best, 3 = worst
<b>19.2 Delayed Discharge bed days lost rate per 1,000 75+ (Code 9)</b>	<p>Source: PHS LIST</p>  <p>Overall 36% improvement since 2015/16 Increase in Lochee 173%, West End 41% and The Ferry 71%</p>	<p>Source: PHS LIST</p>  <p>Deteriorating trend over the last 4 quarters, although still 36% improvement since 2015/16</p>	<p>Source: PHS LIST</p>  <p>D      Lowest at Q2 (S) Highest at Q2(L)      Linear (D)</p>	NA	NA	NA
<b>Delayed Discharge bed days lost rate per 1,000 18+ (All Reasons) (MSG)</b>	<p>2,624 less bed days lost in 2021/22 Q2 than 2015/16 (improvement)</p>	<p>Source: MSG National Data</p> 	<p>Source: MSG National Data</p> 	18th	3rd	3rd



<b>20. % of health and social care resource spent on hospital stays where the patient was admitted as an emergency</b>	5.8% less in 2020/21 than 2015/16 (improvement)	Not Available	<table border="1"> <caption>Line Graph Data: % of health and social care resource spent on hospital stays where the patient was admitted as an emergency</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2015/16</td> <td>25.8%</td> </tr> <tr> <td>2016/17</td> <td>24.8%</td> </tr> <tr> <td>2017/18</td> <td>24.2%</td> </tr> <tr> <td>2018/19</td> <td>23.8%</td> </tr> <tr> <td>2019/20</td> <td>20.5%</td> </tr> <tr> <td>2020/21</td> <td>19.8%</td> </tr> </tbody> </table>	Year	Percentage	2015/16	25.8%	2016/17	24.8%	2017/18	24.2%	2018/19	23.8%	2019/20	20.5%	2020/21	19.8%	18th	3rd	3rd
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2015/16	25.8%																			
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2020/21	19.8%																			

## APPENDIX 2 – DATA SOURCES USED FOR MEASURING PERFORMANCE

The Quarterly Performance Report analyses performance against National Health and Wellbeing Indicators 1-23 and Measuring Performance Under Integration (MPUI) indicators. 5 of the 23 National Health and Wellbeing Indicators are monitored quarterly (emergency admissions, emergency bed days, readmissions, falls admissions and delayed discharge bed days lost. Data is provided both at Dundee and Local Community Planning Partnership (LCPP) level (where available). Data is currently not available for eight out of the 13 National Indicators which are not reported using The Health and Social Care Experience Survey (see section 4.3). The Scottish Government and Public Health Scotland are working on the development of definitions and datasets to calculate these indicators nationally.

The National Health and Wellbeing Indicators 1-9 are reported from The Health and Social Care Experience Survey administered by the Scottish Government which is conducted biennially. Full details were provided to the PAC in February 2021 (Article V of the minute of the Dundee Performance and Audit Committee held on 3 February 2021 refers). The Scottish Government changed the methodology used to filter responses to reflect people who receive services from the Partnership and therefore it is not possible to longitudinally compare results for National Indicators 1-7 and 9.

The quarterly performance report also summarises performance against indicators in the Measuring Performance Under Integration (MPUI) suite of indicators for four out of six high level service delivery areas – emergency admissions, emergency bed days, accident and emergency and delayed discharges, end of life and balance of care. In November 2020 the Performance and Audit Committee agreed that targets should not be set for 2020/21 for these indicators, however that the indicators should continue to be monitored in quarterly performance reports submitted to the PAC (Article VI of the minute of the Dundee Performance and Audit Committee held on 24 November 2020 refers).

National data is provided to all partnerships, by Public Health Scotland. This data shows rolling<sup>1</sup> monthly performance for emergency admissions, emergency admissions from accident and emergency, accident and emergency attendances, emergency bed days and delayed discharges. Previously Public Health Scotland were only able to provide data for all ages, however following feedback from Dundee and other Partnerships they have now provided data for people age 18+.

It was agreed at the PAC held on 19 July 2017 (Article VIII of the minute of the meeting refers) that local data, provided by the NHS Tayside Business Unit will be used to produce more timeous quarterly performance reports against the National Health and Wellbeing Indicators. NHS Tayside Business Unit has provided data for emergency admissions, emergency bed days, readmissions, delayed discharges and falls. From quarter 1 2020/21 the NHS Tayside Business Unit has been providing breakdowns of covid and non covid admission reasons for emergency admissions and emergency bed days.

Data provided by NHS Tayside differs from data provided by Public Health Scotland (PHS); the main differences being that NHS Tayside uses 'board of treatment' and PHS uses 'board of residence' and NHS Tayside uses an admissions based dataset whereas PHS uses a discharge based dataset (NHS Tayside records are more complete but less accurate as PHS data goes through a validation process). As PHS data is discharge based, numbers for one quarter will have been updated the following quarter as records get submitted for those admitted one quarter and discharged a subsequent quarter. By the time PHS release their data, records are (in most cases) 99% complete. The data provided by NHS Tayside Business Unit is provisional and figures should be treated with caution.

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<sup>1</sup> Rolling data is used so that quarterly data can be compared with financial years. This means that data for Quarter 2 shows the previous 12 months of data including the current quarter. Therefore, Quarter 2 data includes data from 1 October 2020 to 30 September 2021.