ITEM No …8….

Dundee Health & Social Care Partnership

REPORT TO: **PERFORMANCE & AUDIT COMMITTEE – 24 SEPTEMBER 2019**

REPORT ON: **DUNDEE HEALTH AND SOCIAL CARE PARTNERSHIP PERFORMANCE REPORT – 2018/19 QUARTER 4**

REPORT BY: **CHIEF FINANCE OFFICER**

REPORT NO: **PAC30-2019**

1.0 PURPOSE OF REPORT

The purpose of this report is to update the Performance and Audit Committee on 2018/19 Quarter 4 performance against the National Health and Wellbeing Indicators and 'Measuring Performance Under Integration' interim targets.

2.0 RECOMMENDATIONS

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

2.1 Notes the content of this report.

2.2 Notes 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 and section 6.

2.3 Notes the performance of Dundee Health and Social Care Partnership against the 'Measuring Performance Under Integration' interim targets as summarised in Appendix 1 (table 2) and section 6.

3.0 FINANCIAL IMPLICATIONS

None.

4.0 BACKGROUND

4.1 In February 2019 the Performance and Audit Committee approved a revised approach to quarterly performance reporting; with summary reports being provided in Quarters 1 and 3 of each financial year and full reports in Quarters 2 and 4 (Article V of the minute of the meeting of the Dundee PAC held on 12 February 2019 refers).

4.2 The Quarter 4 Performance Report covers local performance against National Health and Wellbeing Indicators 1-23. Appendix 1 provides a summary of performance and Appendix 2 sets out analysis of what the data is telling us and a summary of improvement actions. 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 4.2). The Scottish Government and NSS ISD are working on the development of definitions and datasets to calculate these indicators nationally.

4.3   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 have been provided previously in 2018/19 Quarter 1 Performance Report (Article IV of the minute of the meeting of the Performance and Audit Committee held on 25 September 2018 refers). A summary of the published results from the 2017/18 survey is provided in Appendix 1 (table 1).

4.4   Appendix 1 also summarises performance against targets set in the Measuring Performance Under Integration (MPUI) submission (Article IX of the minute of meeting of the Dundee PAC held on 13 February 2018 refers) for four out of six high level service delivery areas – emergency admissions, emergency bed days, accident and emergency and delayed discharges. Detail is provided in Appendix 2. Please note that we are currently unable to provide analysis for balance of care and end of life as data is not provided by NSS ISD for these service areas.

5.0   DATA SOURCES USED FOR MEASURING PERFORMANCE

5.1   National data is provided to all partnerships, by NSS ISD, to assist with monitoring against targets set under Measuring Performance under Integration arrangements. This data shows rolling monthly performance for emergency admissions, emergency admissions from accident and emergency, accident and emergency attendances, emergency bed days and delayed discharges. Previously NSS ISD 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+. (Please refer to Appendix 1,Table 2.)

5.2   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. (Please refer to Appendix 1, Tables 3 and 4.)

5.3   Data provided by NHS Tayside differs from data provided by NSS ISD; the main differences being that NHS Tayside uses 'board of treatment' and NSS uses 'board of residence' and NHS Tayside uses an admissions based dataset whereas NSS uses a discharge based dataset (NHS Tayside records are more complete but less accurate as NSS data goes through a validation process). As NSS 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 NSS 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.

5.4   Recent guidance from NSS ISD has meant that other Partnerships can no longer be identified when benchmarking, until SMR submissions rates are acceptable and data has been formally published.

6.0   QUARTER 4 PERFORMANCE 2018/19

6.1   Rolling data from April 2018 to March 2019 demonstrates that performance exceeded 'Measuring Performance Under Integration' targets for emergency admissions, emergency bed days, accident and emergency attendances and delayed discharges. The target for emergency admissions as a rate per 1,000 of all accident and emergency attendances was not met. Please refer to Table 2 in Appendix 1.

6.2   For each of the six high level service delivery areas from the National Health and Wellbeing Indicators and MPUI for which data is currently available performance has been assessed against the:

a) 2015/16 pre–integration baseline

b) 2018/19 Measuring Performance under Integration (MPUI) target for Dundee
c) 2017/18 performance
d) previous quarter (Q3)
d) performance of other Partnerships and family group Partnerships in particular.

From this analysis areas of improving/good performance, of mixed performance and of declining/ poor performance have been identified. Appendix 2 provides details of planned improvement actions.

6.2.1 *Areas of improving / good performance*

Emergency Bed Days (Appendix 1:Tables 2-4 and Appendix 2:Charts 6-9 and Table 6)
- Both Emergency Bed Day Rate per 100,000 population (chart 1) and Emergency Bed Day Numbers (chart 2) have exceeded the 2018/19 target for acute specialties.
- Both the rate and numbers of emergency bed days have fallen by around 15% (table 2) for acute specialties and 9% (table 3) for all specialties compared to the pre-integration position.
- Improved rates for all specialties between 2018/19 Quarters 3 and 4 across five LCPPs. (table 5 & chart 5)
- Emergency Bed Day Rate for Dundee City is higher than the Scottish average – the eleventh highest in Scotland. However, the Dundee City rate was the third lowest of the 8 family group partnerships. (chart 4)

6.2.2 *Areas of mixed performance*

Delayed Discharges (Appendix 1:Tables 2-4 and Appendix 2:Charts 15-20 and Tables 9-11)
- Number of bed days lost (all reasons 18+) exceeded the 2018/19 target and is significantly better than MPUI projected position. (table 2, charts 15&16)
- Number of bed days lost per 1,000 population (all reasons 75+) is better than Scottish average and Dundee is performing better than all but two family group partnerships. (chart 17)
- Improvements of 47.3% (standard 75+) and 68.7% (Code 9 75+) from pre-integration position. (table 3)
- Over the last year there has been an improvement in the Dundee rate by 32.8% for Code 9 (75+) delays (table 10) but a deterioration of 30% for standard delays (75+). (table 9)
- Improvements from 2017/18 position in **all but one** LCPP for Code 9 delays (75+). (table 10)
- Improvement from 2017/18 position in **only one** LCPP for standard delays (75+). (table 9)
- No. of bed days lost (code 9, all ages) improved by 26.6% from pre-integration position.

Accident & Emergency Attendances (Appendix 1:Table 2 and Appendix 2:Chart 10)
- Exceeded the 2018/19 target. (table 2)
- Over the last year the number of attendances has been increasing, which is a deterioration in performance. (chart 10)

6.2.3 *Areas of declining / poor performance*

Emergency Admissions (Appendix 1:Tables 2-4 and Appendix 2:Charts 1-5 and Table 5)
- Emergency Admission Rate per 100,000 population and Emergency Admission Numbers both exceeded 2018/19 integration target. (table 2, charts 1&2)
- From the 2015/16 baseline, there has been an increase in the Dundee rate by 6.1%, which is a deterioration, and in all LCPPs except one (table 3). However, Dundee showed a small improvement compared to 2018/19 Quarter 3. (table 5)
- The rate of Emergency Admissions for Dundee City was higher than the Scottish average – the twelfth most poorly performing partnership in Scotland. However, Dundee City performed the best out of the eight family group partnerships. (chart 4)
- Emergency Admissions as a Rate per 1,000 of all A&E Attendances was significantly higher than MPUI projected position and the 2018/19 target was not met. (table 2 & chart 3)

Readmissions within 28 days of discharge (Appendix 1:Tables 3-4 and Appendix 2:Charts 11-12 and Table 7)

- 5.36% increase in rate per 1,000 admissions on pre-integration position, four LCPPs showing an improvement in performance and four a deterioration. (table 3)
- Six LCPPs showed a decreased rate per 1,000 admissions between 2018/19 Quarters 3 and 4, which is an improvement. (table 7)
- In 2018/19 Quarter 4 LCPP rates per 1,000 admissions vary significantly from 99 in The Ferry to 139 in Coldside. (table 7)
- The rate per 1,000 discharges for Dundee City is well above the Scottish average and poorest performing partnership in Scotland. (chart 11)

Falls Admissions (Appendix 1:Tables 3-4 and Appendix 2:Charts 13-14 and Table 8)
- 21.3% worse than pre-integration position and year on year deterioration in rate since 2015/16. (table 3)
- Using 2018 calendar year data, the rate for Dundee City is well above the Scottish average and poorest performing partnership in Scotland. (chart 13)
- Improvements from 2018/19 Quarter 3 in three LCPPs. (table 8)
- In 2018/19 Quarter 4 LCPP rates vary from 19.0 falls related admissions per 1,000 in North East to 37.4 in Coldside. (table 8)

7.0   POLICY IMPLICATIONS

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

8.0   RISK ASSESSMENT

Risk 1 Description	The risk of not meeting targets against national indicators could affect; outcomes for individuals and their carers, spend associated with poor performance and the reputation if the Partnership's performance is not good.
Risk Category	Financial, Governance, Political
Inherent Risk Level	15 – Extreme Risk (L=3 (possible), I=5 (extreme))
Mitigating Actions (including timescales and resources)	- Continue to develop a reporting framework which identifies performance against national and local indicators. - Continue to report data quarterly to the PAC to highlight areas of poor performance. - 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. - 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.
Residual Risk Level	9 – High Risk (L=3(possible), I=3 (moderate))
Planned Risk Level	6 – Moderate Risk (L=2(unlikely), I=3(moderate))
Approval recommendation	Given the moderate level of planned risk, this risk is deemed to be manageable.

9.0   CONSULTATIONS

The Chief Officer and the Clerk were consulted in the preparation of this report.

10.0   BACKGROUND PAPERS

None.

Dave Berry
Chief Finance Officer

Lynsey Webster
Senior Officer, Strategy and Performance

Kathryn Sharp
Senior Manager

DATE: 16 September 2019

DUNDEE LCPP PERFORMANCE REPORT 2018/19 QUARTER 4 – EXECUTIVE SUMMARY

- The Quarter 4 performance report assesses performance against the National Health and Wellbeing Indicators. 5 of the 23 indicators are health and wellbeing national performance indicators which are monitored quarterly (emergency admissions, emergency bed days, readmissions, falls admissions and delayed discharge bed days lost). Benchmarking analysis against other Partnerships, including those that are part of Dundee's Family Group, is also highlighted. Details are provided in Appendix 2.

- In order for quarterly data to be compared with financial years rolling quarterly data is presented for each quarter. This means that data for Quarter 4 shows the previous 12 months of data including the current quarter. Therefore, Quarter 4 data includes data from 1 April 2018 to 31 March 2019.

- Quarter 4 data regarding the 5 national health and wellbeing performance indicators was provided by the NHS Tayside Business Unit. Data provided by NHS Tayside differs from data provided by NSS ISD; the main difference being that NHS Tayside uses 'board of treatment' and NSS uses 'board of residence' and NHS Tayside uses an admissions based dataset whereas NSS uses a discharge based dataset (NHS Tayside records are more complete but less accurate as NSS data goes through a validation process). As NSS 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 NSS 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.

- This report should be assessed with regard to the demographic and socio economic context of Dundee; high rates of deprivation, an ageing population, frailty and age associated conditions being diagnosed earlier in life than in more affluent Partnerships and deprivation associated mental health illnesses and substance misuse problems.

  Performance:

- Between the baseline year 2015/16 and 2018/19 there was an improvement in the Emergency Bed Day Rate per 100,000 population (aged 18+) of 15.2% for acute (table 2) and 8.8% for all specialties (table 3). All LCPPs showed an improvement for all specialties except for Lochee which showed a deterioration of 5%. The biggest improvement was in East End (19.4%). (table 3)

- Between the baseline year 2015/16 and 2018/19 there were improvements in the rate of bed days lost to delayed discharges per 1,000 population (aged 75+) of 47.3% for Standard and 68.7% for Code 9 delays. (table 3)

- Between the baseline year 2015/16 and 2018/19 all LCPPs recorded improved rates in standard bed days lost to delayed discharges per 1,000 population (aged 75+) and these ranged from 22% in Strathmartine to 62% in Coldside. (table 3)

- Between the baseline year 2015/16 and 2018/19 improved rates of Code 9 bed days lost to delayed discharges per 1,000 population (aged 75+) ranged from 11.6% in Lochee to 100% in Maryfield. The only deterioration in rate noted was in The Ferry (2.4%). (table 3)

- Emergency admission rate per 100,000 population has increased by 6.1% in Dundee since 2015/16. A deterioration in rate was recorded in all LCPP areas except The Ferry which showed an improvement of 2.1%. The biggest deterioration was in West End (13.3%). (table 3)

- The rate of readmissions in Dundee per 1,000 Admissions has increased by 5.4% since 2015/16, which is a deterioration. The rate has increased in four LCPPs. The biggest increase was in Coldside (21.9%) and the biggest improvement was in Strathmartine (5.2%). (table 3)

- The rate of hospital admissions as a result of a fall for people aged 65+ in Dundee has increased by 21.3% since 2015/16, which is a deterioration. The rate increased in seven LCPPs, the only

improvement being recorded in North East (7.3%). The biggest increases were in The Ferry (44.3%) and West End (30.8%) (table 3).

APPENDIX 1 – Performance Summary

Table 1: National Health & Wellbeing Indicators 1 to 9

	National Health & Well Being Indicator	Scotland	Dundee	North Lanark-shire	Glasgow	North Ayrshire	Inver-clyde	Dunbart on - shire	East Ayrshire	Western Isles
1	% of adults able to look after their health very well or quite well	93	93	90	90	91	91	91	92	94
2	% of adults supported at home who agree that they are supported to live as independently as possible	81	84	75	82	80	80	81	80	79
3	% of adults supported at home who agree that they had a say in how their help, care or support was provided	76	78	71	80	70	77	80	74	66
4	% of adults supported at home who agree that their health and care services seemed to be well co-ordinated	74	81	70	76	74	79	79	74	64
5	% of adults receiving any care or support who rate it as excellent or good	80	82	75	79	78	83	81	81	85
6	% of people witth positive experience of the care provided by their GP practice	83	84	76	86	80	83	85	76	88
7	% of adults supported at home who agree that their service and support had an impact on improving or maintaining their quality of life	80	85	76	80	82	77	79	77	71
8	% of carers who feel supported to continue in their caring role	37	38	33	38	39	40	40	36	41
9	% of adults supported at home who agree they felt safe	83	87	80	85	80	84	89		86

Source: Scottish Health & Care Experience Survey 2017/18

Key points of note:

Best performing partnership in family is highlighted in green for each indicator

2017/18 results:

a All indicators show Dundee to be same or higher than Scottish average

b For indicators 2, 4 & 7 Dundee faired batter than all other family members

c Dundee is in top 3 for all indicators except indicators 6 & 8

d Indicator 8 returned a poor result for all family members

Compared to Scottish Health & Care Experience Survey 2015/16:

a All indicators showed a deterioration across Scotland as a whole

b Improvements for Dundee in indicators 4 & 9

c No change in indicator 1 for Dundee

d Deterioration for Dundee in indicators 2-3 & 5-8. Biggest deterioration (6%) in indicators 6 & 8.

Table 2 : Measuring Performance under Integration Summary

Integration Indicator (Annual 18+)	Target 18/19	Expected % Difference from 15/16 Baseline	Actual % Difference from 15/16 Baseline		Actual % Difference from 18/19 Target		Direction of Travel from Previous Quarter
			Q3	Q4	Q3	Q4	
Emergency Admission Rate per 100,000 Dundee Population	12,710	↑9.16	↑4.71	↑4.40	↓4.08	↓4.37	↓
Emergency Admission Numbers	15,464	↑9.46	↑5.20	↑4.89	↓3.89	↓4.18	↓
Emergency Admissions as a Rate per 1,000 of all Accident &Emergency Attendances	281	↑1.44	↑8.30	↑8.67	↑6.76	↑7.12	↑
Emergency Bed Day Rate for Acute Specialties per 100,000 Dundee Population	88,875	↓11.38	↓13.40	↓15.21	↓2.28	↓4.33	↓
Emergency Bed Days Numbers for Acute Specialties	108,129	↓11.14	↓12.99	↓14.82	↓2.08	↓4.14	↓
Accident & Emergency Attendances	26,562	↑13.33	↑4.80	↑5.48	↓7.50	↓6.93	↑
Number of Bed Days Lost to Delayed Discharges per 1,000 Population(All Reasons)	97	↓21.77	↓40.32	↓37.90	↓23.71	↓20.62	↑
Number of Bed Days Lost to Delayed Discharges (All Reasons)	11,856	↓21.22	↓40.40	↓37.70	↓24.34	↓20.92	↑

Source ISD: ISD MSG Indicators

Key Points of Note:

- Emergency Admissions Rate per 1,000 of all A&E Attendances is the only indicator that has not met the 2018/19 trajectory. There was a slight improvement between Q2 2017/18 and Q2 2018/19 but the last 2 quarters (quarters 3 and 4) have both shown an increase in the rate which is a deterioration in performance.
- Emergency Admissions and Emergency Bed Days are both currently showing a decreasing trend.
- Accident & Emergency Attendances, although meeting the 2018/19 trajectory, have been showing a steady increase.
- Number of Bed Days Lost to Delayed Discharges (All Reasons) have been decreasing steadily since the 2015/16 baseline.
- Published MSG data has been used to measure performance therefore there may be a discrepancy when comparing with the local performance data.
- Be aware – some of the differences show an increase which is positive and some show a decrease which is also positive

Table 3: Performance in Dundee's LCPPs - % change in 2018/19 Q4 against baseline year 2015/16

National Indicator	Dundee	Lochee	East End	Coldside	North East	Strathmartine	Mary field	West End	The Ferry
Emer Admissions rate per 100,000 18+	+6.1	+8.9	+5.8	+8.4	+9.1	+2.0	+7.2	+13.3	-2.1
Emer Bed Days rate per 100,000 18+	-8.8	+5.0	-19.4	-10.6	-17.3	-1.3	-3.2	-16.9	-9.6
Readmissions rate per 1,000 Admissions All	+5.4	+20.2	-4.8	+21.9	-0.9	-5.2	-4.1	+19.4	+1.0
Falls rate per 1,000 65+	+21.3	+2.3	+27.4	+25.1	-7.3	+12.3	+15.9	+30.8	+44.3
Delayed Discharge Bed Days Lost rate per 1,000 75+ (Standard)	-47.3	-26.0	-52.7	-62.0	-46.7	-22.0	-56.0	-51.5	-34.5
Delayed Discharge Bed Days Lost rate per 1,000 75+ (Code 9)	-68.7	-11.6	-83.7	-51.7	-88.6	-78.4	-100.0	-97.7	+2.4

Table 4: Performance in Dundee's LCPPs - LCPP Performance in 2018/19 Q4 compared to Dundee

National Indicator	Dundee	Lochee	East End	Coldside	North East	Strathmartine	Mary field	West End	The Ferry
Emer Admissions rate per 100,000 18+	12,665	14,980	16,735	14,866	12,693	13,357	10,626	9,063	10,714
Emer Bed days rate per 100,000 18+	121,246	170,215	146,865	145,778	93,202	122,255	103,247	81,529	114,138
Readmissions rate per 1,000 Admissions All	118	125	118	139	109	110	117	123	99
Falls rate per 1,000 65+	30.2	27.2	34.9	37.4	19.0	28.3	26.9	36.1	29.3
Delayed Discharge bed days lost rate per 1,000 75+ (standard)	277	450	308	210	252	225	262	330	205
Delayed Discharge bed days lost rate per 1,000 75+ (Code 9)	92	145	85	214	87	90	0	15	42

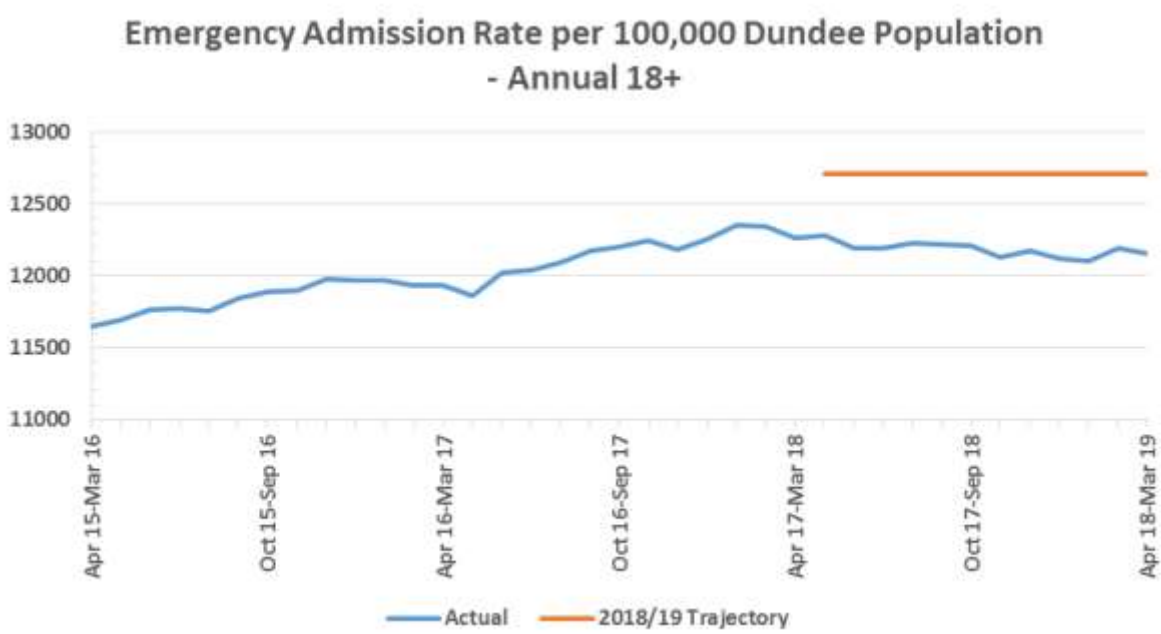Source: NHS Tayside data

Key: 🟩 Improved/Better 🟧 Stayed the same 🟥 Declined/Worse

APPENDIX 2 - Detailed Performance by Service Delivery Area

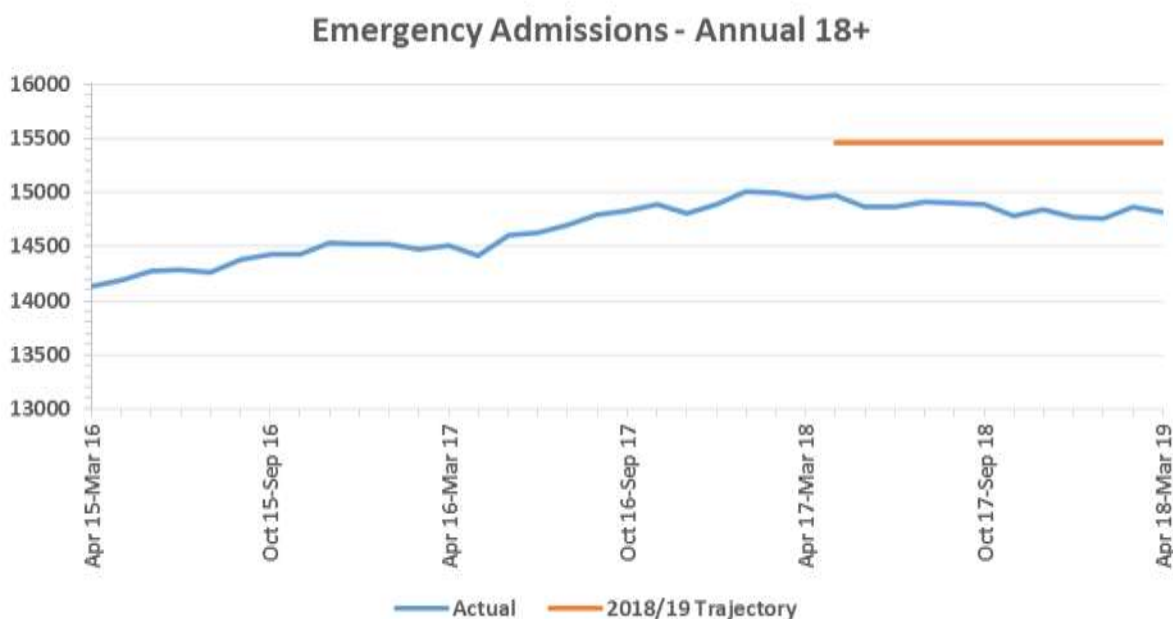**Service Delivery Area : Emergency Admissions**

Measuring Performance Under Integration

Chart 1: Emergency Admission Rate per 100,000 Dundee Population – Performance Against MPUI Target Trajectory
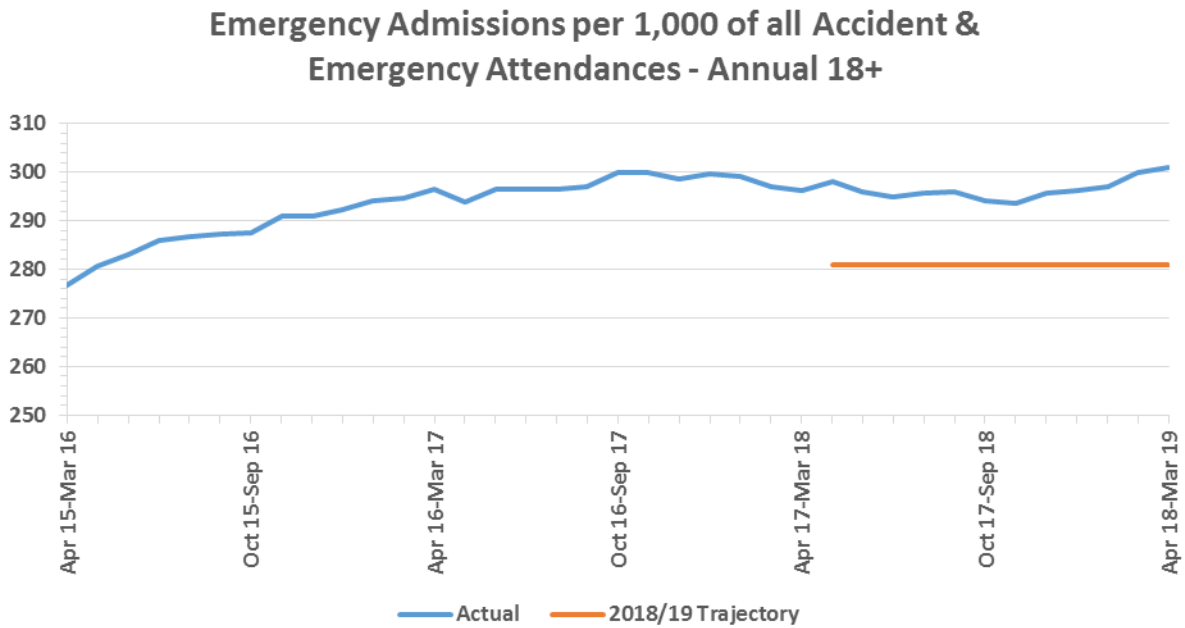

Source ISD: ISD MSG Indicators

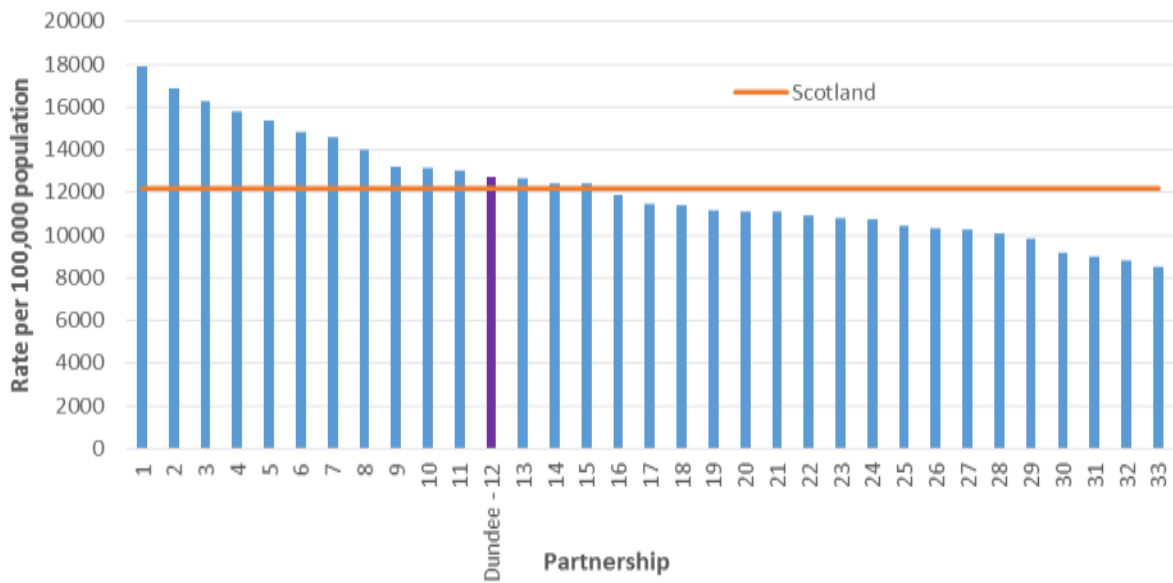**Chart 2:** Emergency Admission Numbers - Performance Against MPUI Target Trajectory

Chart 3: Emergency Admissions Rate per 1,000 of all Accident & Emergency Attendances - Performance Against MPUI Target Trajectory

Source ISD: ISD MSG Indicators

National Health and Wellbeing Indicator 12 – Emergency Admissions

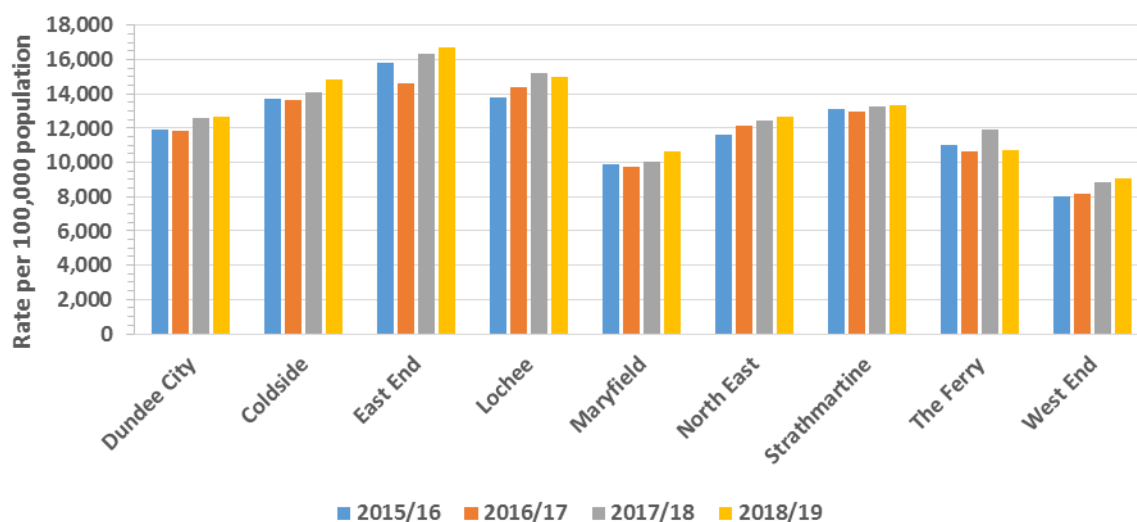**Chart 4:** Emergency Admission Rate 18+ Benchmarking 2018/19

Source ISD: ISD Core Suite of Integration Indicators

Table 5: 2018/19 Rate of Emergency Admissions per 100,000 Population – 18+ by LCPP

	2015/16	2016/17	2017/18	18/19Q1	18/19Q2	18/19Q3	18/19Q4
Dundee City	11,937	11,873	12,578	12,587	12,592	12,677	12,665
Coldside	13,713	13,682	14,099	14,232	14,365	14,758	14,866
East End	15,822	14,618	16,335	16,147	16,310	16,531	16,735
Lochee	13,760	14,407	15,200	15,135	14,993	14,941	14,980
Maryfield	9,914	9,753	10,037	10,235	10,180	10,514	10,626
North East	11,632	12,129	12,444	12,776	12,552	12,403	12,693
Strathmartine	13,091	12,989	13,252	13,442	13,449	13,475	13,357
The Ferry	11,022	10,620	11,957	11,330	11,258	10,905	10,714
West End	7,999	8,188	8,866	9,008	9,195	9,425	9,063

Source: NHS Tayside BSU

Chart 5: 2018/19 Rate of Emergency Admissions per 100,000 Population – 18+ by LCPP

Source: NHS Tayside BSU

Analysis

Benchmarking – ISD Core Suite of Integration Indicators
- The rate of emergency admissions was higher in Dundee (12,703) than the Scottish rate (12,195). (chart 4)
- 2018/19 Dundee performance (12,703) was slightly better than 2017/18 (12,825)
- Dundee performed better than all other family group Partnerships.

Difference from 2015/16 Baseline to 2018/19 - NHS Tayside BSU data
- 6.1% increase in Dundee rate. All LCPPs have shown an increase, which is a deterioration in performance, except for The Ferry which has shown an improvement of 2.1%. (table 3)
- The rate for Dundee increased from 11,937 per 100,000 in 2015/16 to 12,578 per 100,000 in 2017/18, improved slightly at the start of 18/19, then finished the year with a rate of 12,665 per 100,000 Dundee population aged 18+. (table 5)

Performance Trend between 2018/19 Q3 and 2018/19 Q4 - NHS Tayside BSU data (table 5)
- Overall improvement in Dundee rate (0.1%) with improved rates in Strathmartine (0.9%), West End (3.8%) and The Ferry (1.8%).
- Declining rates in Coldside (0.7%), East End (1.2%), Lochee (0.3%), Maryfield (1.1%) and North East (2.3%).

Variation across LCPPs in 2018/19 Q4 - NHS Tayside BSU data (table 5)
- West End had the lowest rate with 9,063 emergency admissions per 100,000 people in 2018/19 Q4, followed by Maryfield and The Ferry.
- East End had the highest rate with a rate of 16,735 which is 84.7% higher than the West End rate.
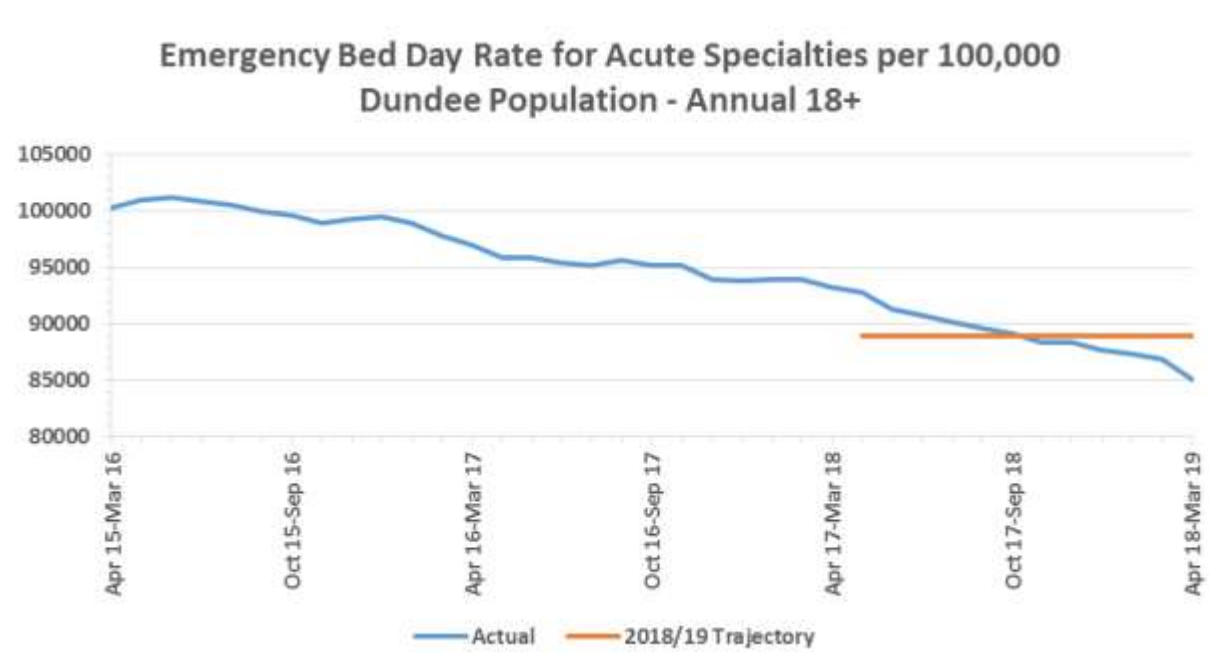
Actions to Improve Performance

Action	HSCP Operational Lead (s)	Timescale for Improvement
Continue to develop Enhanced Community Support (ECS) / Dundee Enhanced Community Support Acute (DESCA)	Mike Andrews	March 2020
Continue to develop Intermediate care options	Jenny Hill	September 2019
Continue to develop care home team model	Jenny Hill	March 2021
Implement urgent care actions in Primary Care Improvement Plan	Jenny Hill	March 2021
Continue to develop respite options	Jenny Hill	September 2019
Undertake care home quality improvement work as part of the Unsheduled Care Board workstream	Jenny Hill	April 2021
Test a rehabilitation facility for younger people with complex needs	Jenny Hill	April 2020
Implement the three ward model outlined in Reshaping Non Acute Care for older people with mental health needs	Jenny Hill	Complete
Development/extension of models for people under 65 with complex needs	Beth Hamilton/Naeema Pervaze	March 2020
Review pathways across the system	Jenny Hill/Beth Hamilton	March 2020

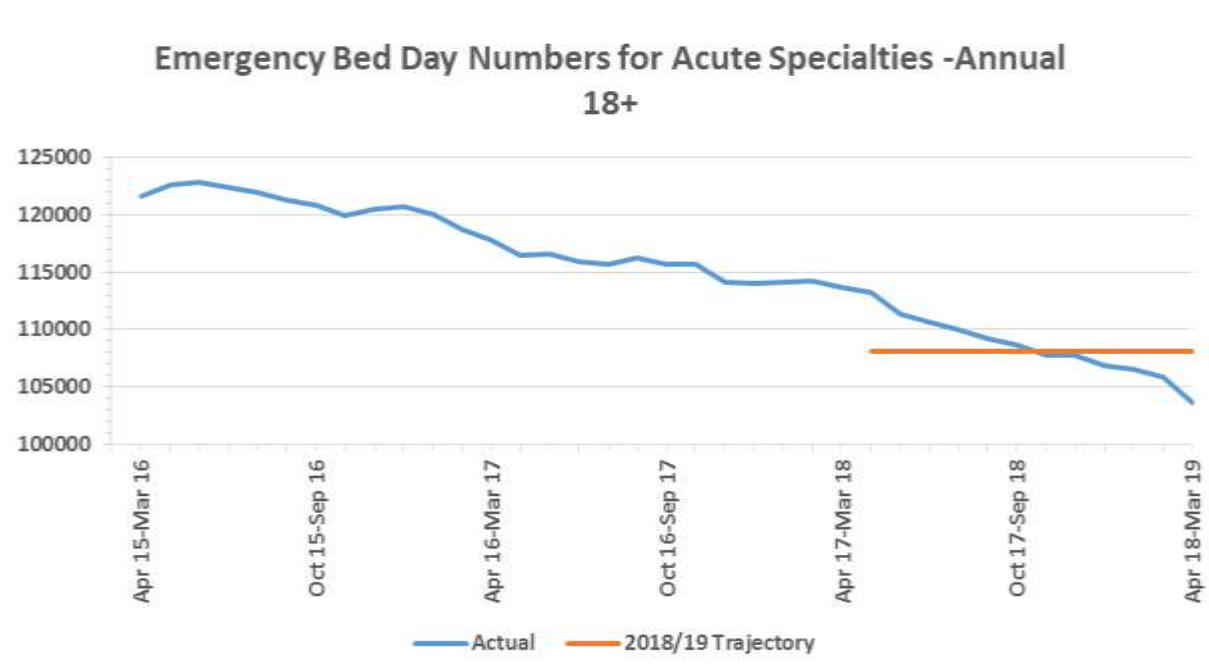## Service Delivery Area: Emergency Bed Days

Measuring Performance Under Integration

Chart 6 : Emergency Bed Day Rate per 100,000 Dundee Population - Performance Against MPUI Target Trajectory
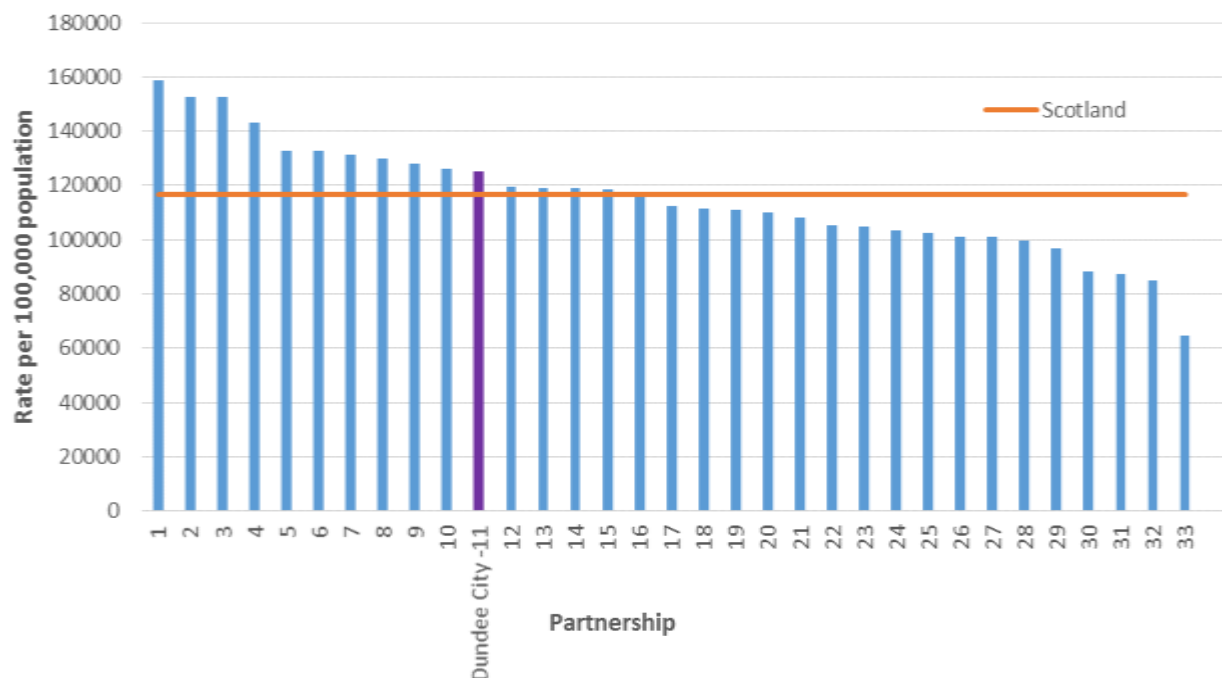

Emergency Bed Day Rate for Acute Specialties per 100,000 Dundee Population - Annual 18+

Source ISD: ISD MSG Indicators

Chart 7: Emergency Bed Day Numbers - Performance Against MPUI Target Trajectory

Emergency Bed Day Numbers for Acute Specialties -Annual 18+

Source ISD: ISD MSG Indicators

National Health and Wellbeing Indicator 13 – Emergency Bed Days

Chart 8: Rate of Emergency Bed Days 18+ Benchmarking 2018/19
(Emergency Bed Days include Acute, Geriatric Long Stay and Mental Health specialties)

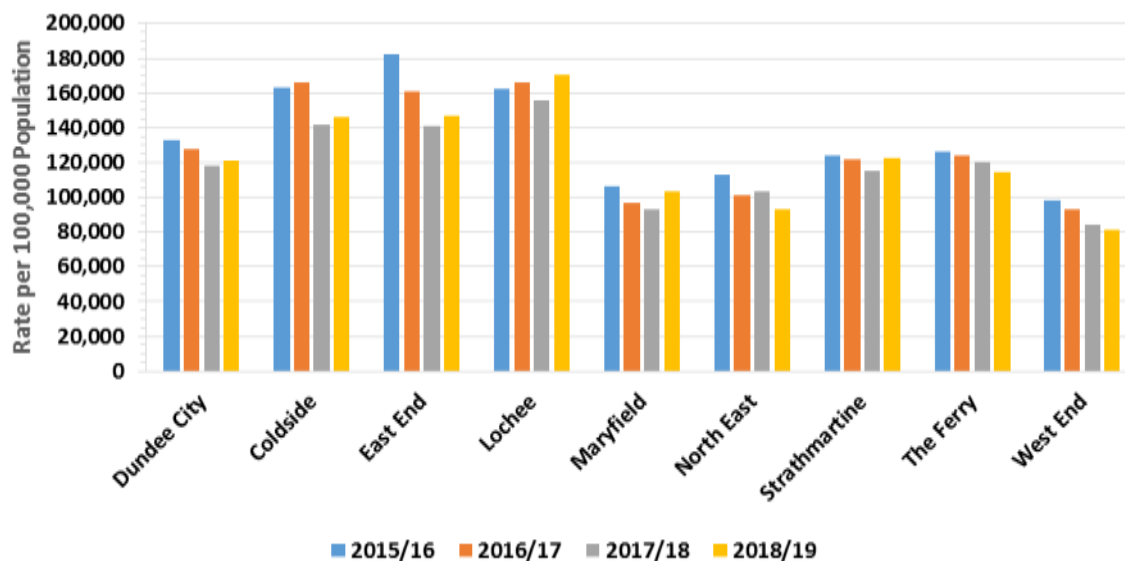Source : ISD Core Suite of Integration Indicators

Table 6: 2018/19 Rate of Emergency Bed Days per 100,000 Population - 18+ by LCPP

	2015/16	2016/17	2017/18	18/19Q1	18/19Q2	18/19Q3	18/19Q4
Dundee City	132,959	127,834	118,254	120,628	120,176	120,881	121,246
Coldside	162,998	165,823	141,442	139,977	144,370	143,800	145,778
East End	182,267	160,621	141,233	139,559	143,527	149,371	146,865
Lochee	162,113	165,775	155,378	164,487	170,267	171,964	170,215
Maryfield	106,639	97,080	93,247	95,254	93,643	97,162	103,247
North East	112,671	101,067	103,739	105,662	101,443	93,865	93,202
Strathmartine	123,877	122,113	114,824	120,461	117,927	120,238	122,255
The Ferry	126,326	124,067	120,221	120,490	114,700	114,819	114,138
West End	98,143	93,207	84,149	86,682	83,957	83,656	81,529

Source: NHS Tayside BSU

Note: Emergency Bed Days for 2018/19Q1 & Q2 has been updated to include Mental Health Beds.

Chart 9: 2018/19 Rate of Emergency Bed Days per 100,000 Population - 18+ by LCPP

Source: NHS Tayside BSU

Analysis

Benchmarking – ISD Core Suite of Integration Indicators
- The emergency bed day rate was higher in Dundee (125,377) than the Scottish rate (116,485). (chart 8)
- There was an improvement in the Dundee rate between 2017-18 (130,196) and 2018-19 (125,377).
- Dundee's rate was 11th highest in Scotland and was the 3rd best performing family group partnership.

Difference from 2015/16 Baseline to 2018/19 Q4 - NHS Tayside BSU data
- The rate for Dundee decreased by 8.8% (from 132,959 per 100,000 in 2015/16 to 121,246 per 100,000 in 2018/09 Q4), thus showing an improvement in performance. (table 3)
- The only LCPP to show a deterioration in performance was Lochee (5%). (table 3)

Performance Trend between 18/19 Q3 and 18/19 Q4 - NHS Tayside BSU data
- Deterioration in overall Dundee rate by 0.3%. (table 6)
- Improved rates between 2018/19 Q3 and Q4 across 5 LCPPs. (table 6)
- Deterioration in rates in Coldside (1.4%), Maryfield (6.3%) and Strathmartine (1.7%). (table 6)
- The LCPP showing the biggest improvement was West End (2.5%). (table 6)

Variation across LCPPs in 2018/19 Q4 - NHS Tayside BSU data
- Lochee (170,215), East End (146,865) and Coldside (145,778) had the highest emergency bed day rates. (table 6)
- West End (81,529) and North East (93,202) had the lowest emergency bed day rates. (table 6)
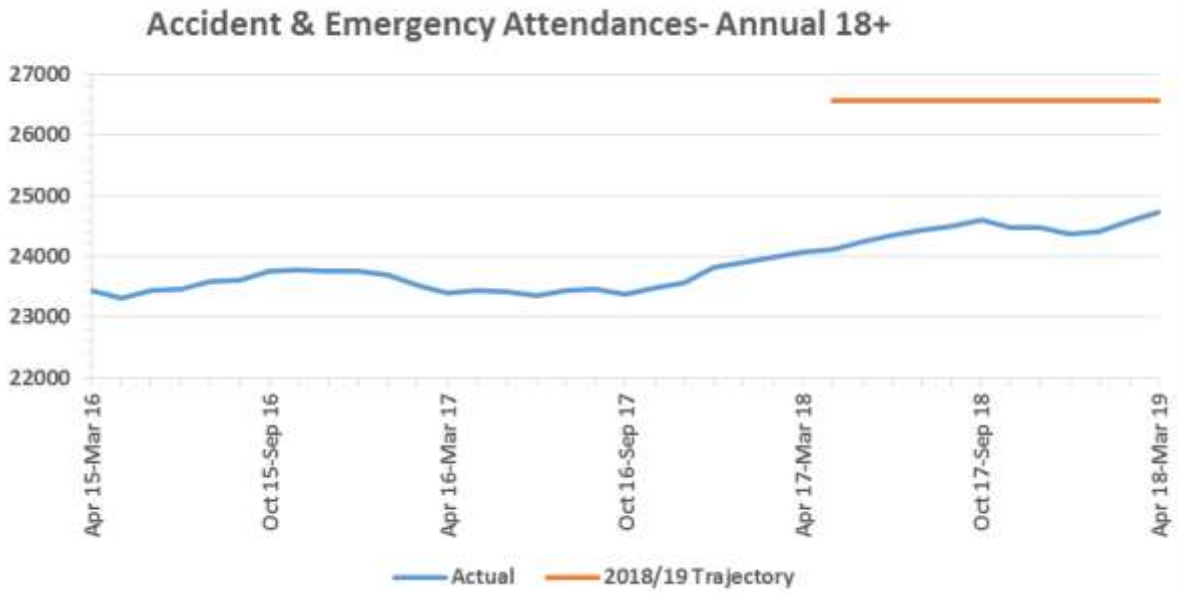
Actions to Improve Performance

Action	HSCP Operational Lead (s)	Timescale for Improvement
Develop Multi-disciplinary Locality Teams (MDT) - MDTs have been created in Community Mental Health Teams with senior practitioner role being trialled to support this	Mike Andrews/Jan Laing	March 2020
Reconfiguration of Medicine for the Elderly (MFE) rehab and assessment wards	Krista Reynolds	Complete
Review the way Stroke rehab is provided and develop Early Supported Discharge Service (ESDS) - two neuro Allied Health Professional (AHP) posts appointed to and initial discussions have taken place regarding how to join this up	Matt Lambert	March 2020
Develop ortho inreach	Jenny Hill	Complete
Develop Medicine For the Elderly (MFE) surgery interface	Jenny Hill	March 2020
Develop Emergency Department / Medicine for Elderly interface	Jenny Hill	March 2020
Develop care and treatment centres	Gail Andrews	March 2020

<u>Service Delivery Area: Accident & Emergency</u>

Measuring Performance Under Integration

Chart 10: Accident & Emergency Attendances - Performance Against MPUI Target Trajectory

Accident & Emergency Attendances- Annual 18+
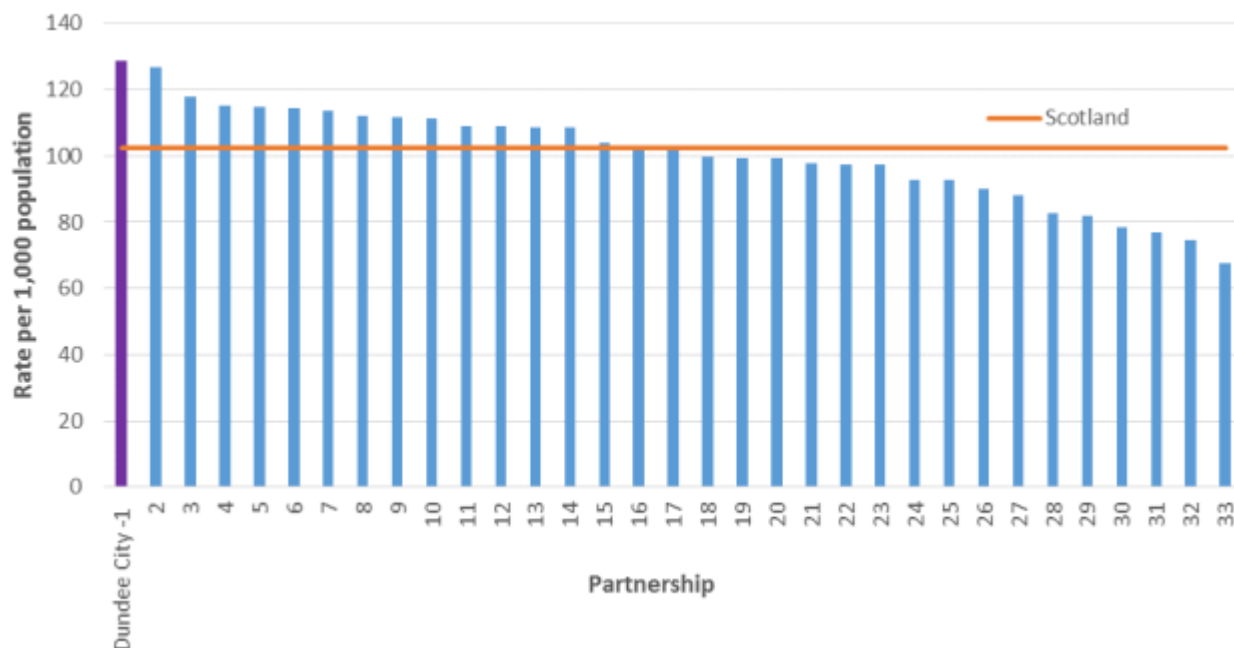
Source ISD: ISD MSG Indicators

Analysis

- 2018/19 data shows performance is significantly below the target set for 2018/19. However, the number of A&E attendances has been increasing over the last year.

Service Delivery Area: Readmissions

National Health and Wellbeing Indicator 14 – Readmissions

Chart 11: Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges) Benchmarking 2018/19
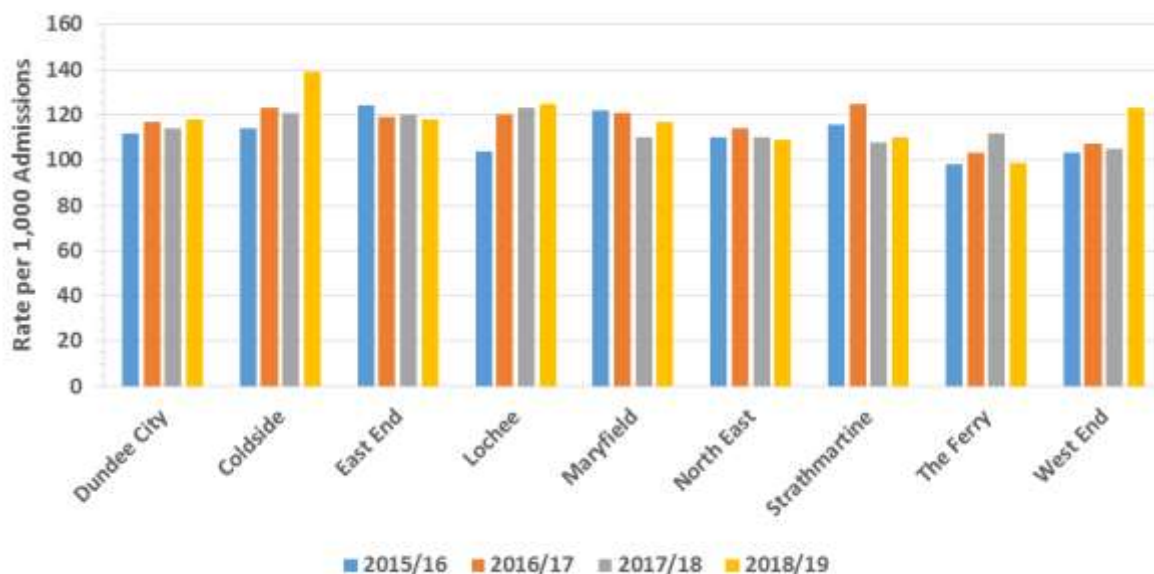

Source: Core Suite of Integration Indicators based on Discharges

Table 7: 2018/19 (Financial Year) Rate of Readmissions within 28 days of discharge per 1,000 admissions - All Ages by LCPP

	2015/16	2016/17	2017/18	18/19Q1	18/19Q2	18/19Q3	18/19Q4
Dundee City	112	117	114	116	127	121	118
Coldside	114	123	121	129	143	139	139
East End	124	119	120	121	131	127	118
Lochee	104	120	123	124	131	120	125
Maryfield	122	121	110	109	126	124	117
North East	110	114	110	113	120	107	109
Strathmartine	116	125	108	112	121	116	110
The Ferry	98	103	112	101	108	104	99
West End	103	107	105	118	132	131	123

Source: NHS Tayside BSU data based on Admissions

Chart 12: 2018/19 (Financial Year) Rate of Readmissions within 28 days of discharge per 1,000 admissions - All Ages by LCPP

Source: NHS Tayside BSU

Analysis

Benchmarking – ISD Core Suite of Integration Indicators
- The rate of readmissions per 1,000 discharges was higher in Dundee (129) than the Scottish rate (103). (chart 11)
- Dundee was the poorest performing Partnership in Scotland. (chart 11)
- Dundee's rate deteriorated slightly from 2017/18 (127) to 2018/19 (129).

Difference from 2015/16 Baseline to 2018/19 - NHS Tayside BSU data
- 5.36% increase in Dundee rate per 1,000 admissions, which is a deterioration in performance. (table 3)
- Three LCPPs have shown a large increase in readmission rates – Coldside (21.9%), Lochee (20.2%) and West End (19.4%). The other LCPPs have not shown any great change. (table 3)

Performance trend between 18/19 Q3 and 18/19 Q4 - NHS Tayside BSU data
- Increased Rates of Readmission per 1,000 admissions between 2018/19 Q3 and Q4 in Lochee (4.2%) and North East (1.9%), which is a deterioration in performance. (table 7)
- No change in Coldside rate. (table 7)
- The LCPP showing the greatest improvement was East End (7.1%). (table 7)

Variation across LCPPs in 2018/19 Q4 - NHS Tayside BSU data
- The highest readmission rate per 1,000 admissions was in Coldside (139).(table 7)
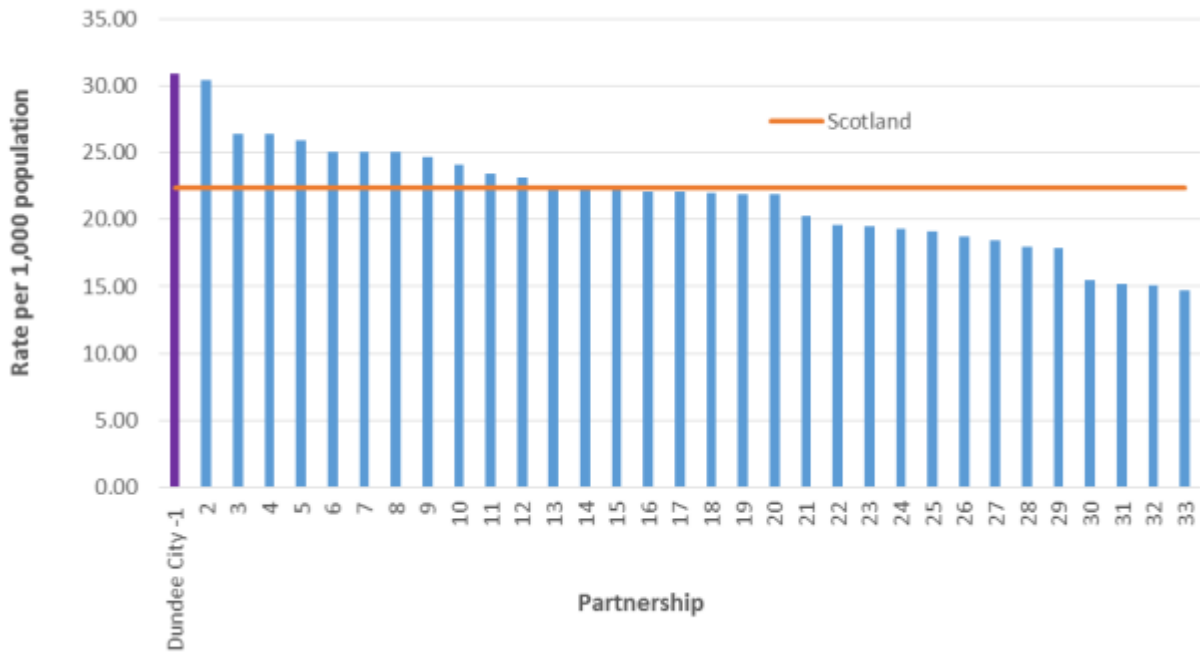- The lowest readmission rate per 1,000 admissions was in The Ferry (99). (table 7)

Actions to Improve Performance

Action	HSCP Operational Lead (s)	Timescale for Improvement
Development of locality teams	Jenny Hill / Beth Hamilton	March 2020
Continue to develop moving assessment to community	Jenny Hill	March 2021
Assessment / review process to ensure appropriate package of support	Beth Hamilton	March 2020

Service Delivery Area: Falls

National Health and Wellbeing Indicator 14 – Falls

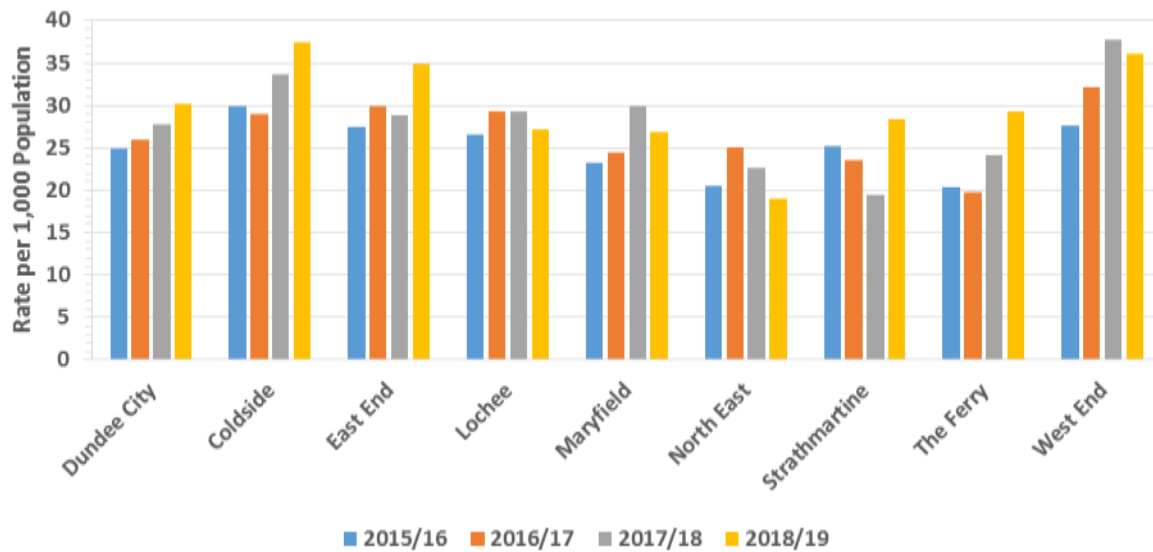**Chart 13:** Falls Admissions Rate 65+ Benchmarking 2018/19

Source: Core Suite of Integration Indicators (NSS ISD)

Table 8: 2018/19 Rate of Falls Admissions per 1,000 Population – 65+ by LCPP

	2015/16	2016/17	2017/18	18/19Q1	18/19Q2	18/19Q3	18/19Q4
Dundee City	24.9	26.0	27.8	29.2	29.3	29.5	30.2
Coldside	29.9	28.9	33.6	36.0	34.4	36.3	37.4
East End	27.4	29.8	28.8	29.1	32.2	30.8	34.9
Lochee	26.6	29.2	29.2	29.8	30.9	30.4	27.2
Maryfield	23.2	24.4	29.9	32.4	29.4	29.4	26.9
North East	20.5	25.1	22.7	25.1	22.3	19.0	19.0
Strathmartine	25.2	23.5	19.5	20.4	20.4	22.6	28.3
The Ferry	20.3	19.7	24.2	25.9	28.1	27.8	29.3
West End	27.6	32.1	37.7	38.9	37.7	37.7	36.1

Source: NHS Tayside BSU

Chart 14: 2018/19 Rate of Falls Admissions per 1,000 Population – 65+ by LCPP

Source: NHS TAYSIDE BSU

Analysis

Benchmarking – ISD Core Suite of Integration Indicators
- The rate of hospital admissions due to a fall in Dundee (31) was higher than the Scottish rate (22). (chart 13)
- Dundee was the poorest performing partnership in Scotland. (chart 13)
- The Dundee 2018/19 rate (31) was a deterioration from the 2017/18 rate (29).

Difference from 2015/16 Baseline to 2018/19 Q4 - NHS Tayside BSU data
- 21.3% increase in Dundee rate, which is a deterioration in performance. (table 3)
- The Dundee rate has shown an increase year on year since the 2015/16 baseline. (table 8)
- Increases were shown in all LCPPs except North East. The biggest increase was in The Ferry (44.3%). (table 3)

Performance trend between 2018/19 Q3 and 2018/19 Q4 - NHS Tayside BSU data
- 2.4% increase in Dundee rate, which is a deterioration in performance. (table 8 & chart 14)
- Improved rates in Lochee (10.5%), Maryfield (8.5%) & West End (4.2%). (table 8 & chart 14)
- No change in North East. (table 8 & chart 14)
- Worsening rates in Coldside (3.0%), East End (13.3%), Strathmartine (25.2%) & The Ferry (5.4%). (table 8 & chart 14)

Variation across LCPPs in 2018/19 Q4 - NHS Tayside BSU data
- Coldside had the highest rate of falls in Dundee with 37.4 falls related hospital admissions per 1,000 population. (table 8)
- For the second quarter running, North East had the lowest rate with 19.0 falls related hospital admissions per 1,000 population. (table 8)
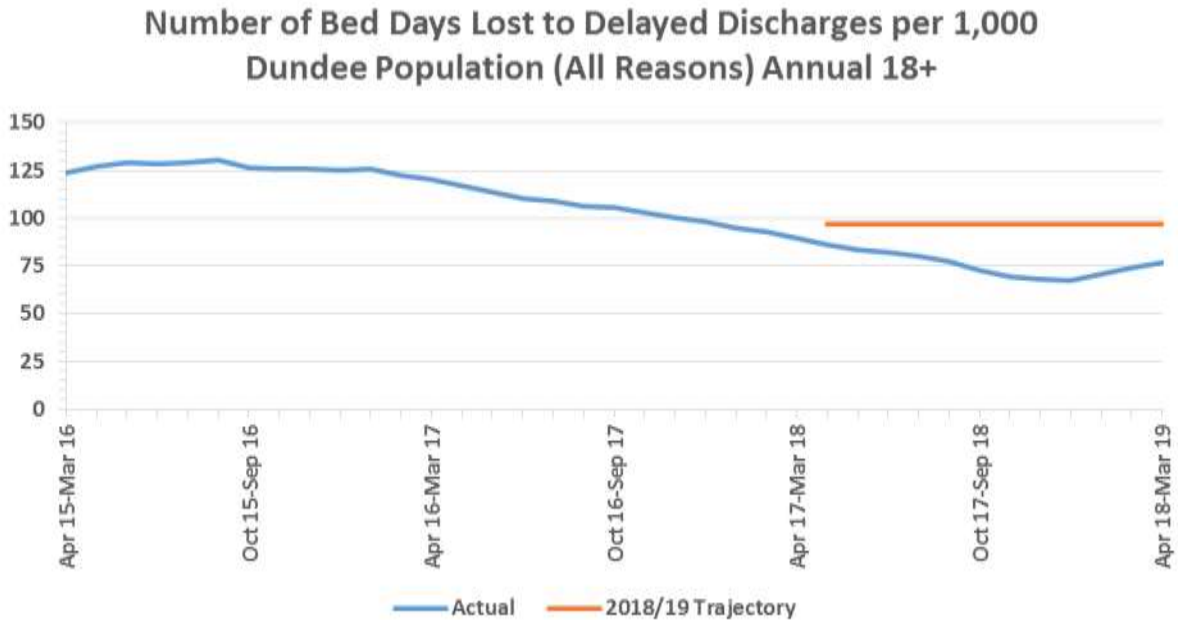
Actions to Improve Performance

Action	HSCP Operational Lead (s)	Timescale for Improvement
Supporting the Scottish Ambulance Service Falls and Frailty Pathways in developing non-conveyance to hospital options, supporting patients remaining in their own homes. Pilots across other areas of the UK have proved positive and we are exploring the feasibility of commencing similar projects in Dundee.	Matthew Kendall	March 2020
The early identification of people at high risk of falls through having a level 1 conversation and/or completion of a level 1 falls referral tool continues to be delivered by an increasing number of partner agencies, and this will be further consolidated across Dundee to support identification of those at risk of falls and appropriate onward signposting to relevant services / activities.	Matthew Kendall	December 2019
Opportunities are created for individuals to participate in regular and life-long exercise programmes that include strength and balance to minimise falls risk and prevent further falls and frailty. In developing appropriate programmes, links with local leisure services, volunteer services, walking groups and local exercise groups will be considered as well as training volunteers and staff working with older people including care at home, care homes, day care and sheltered housing.	Matthew Kendall	March 2020
Review of data available to support targeted approach of falls prevention work (NHS, Council, Scottish Ambulance Service (SAS), Fire & Rescue). Explore neighbourhood level data to direct resources to areas most in need. A Tayside Falls Data Group has been established to share good practice and further understand the data and the links between the data and clinical and care delivery.	Matthew Kendall	December 2019

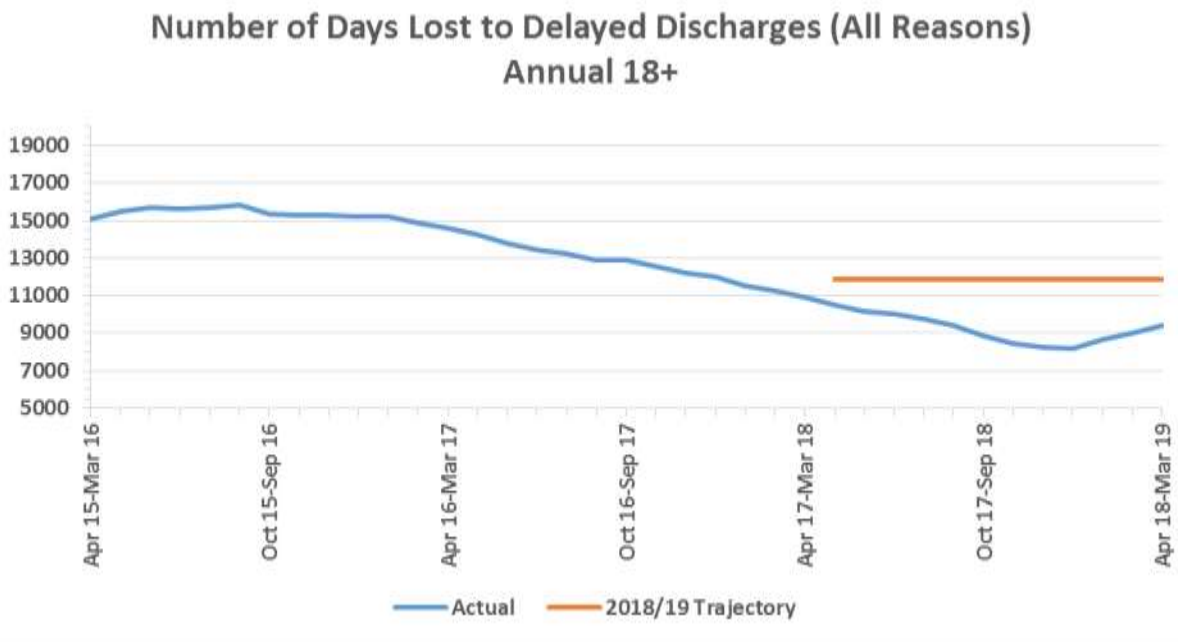**Service Delivery Area : Delayed Discharges**

Measuring Performance Under Integration

Chart 15: Bed Days Lost to Delayed Discharges (All Reasons) per 1,000 Dundee Population –
Performance against MPUI Target Trajectory
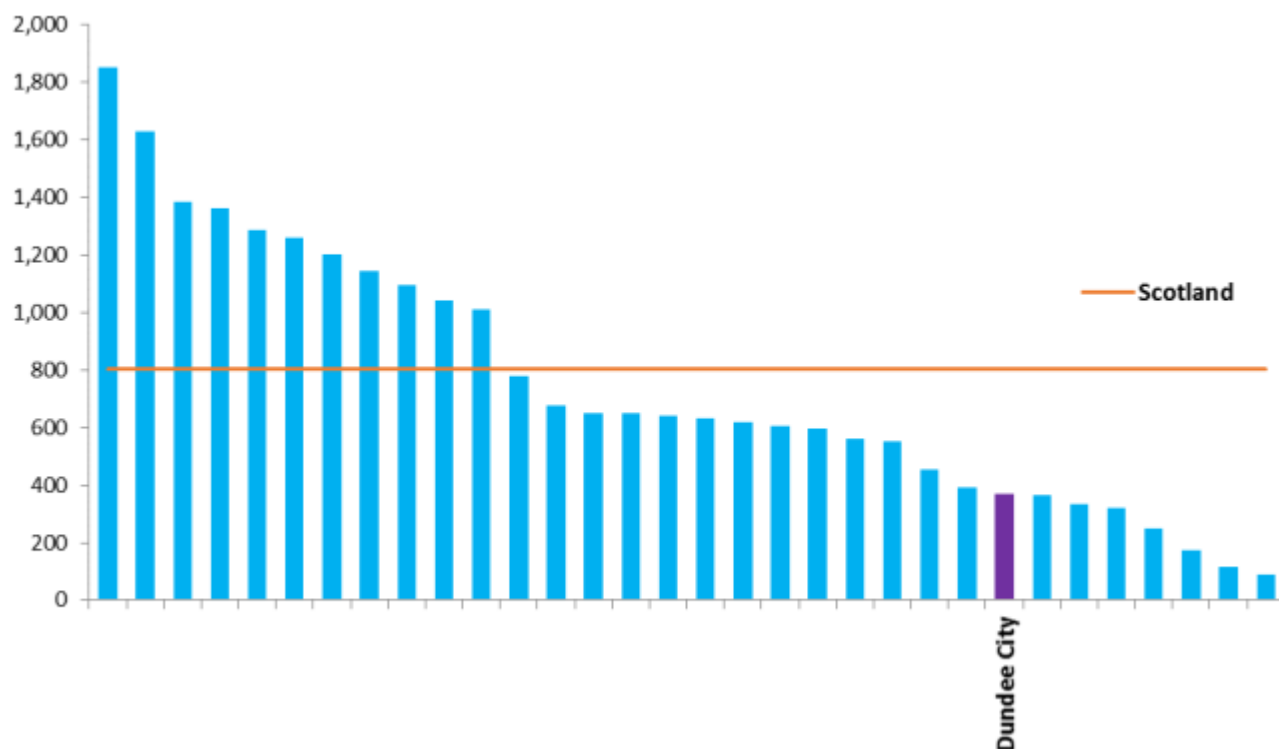

Source ISD: ISD MSG Indicators

Chart 16: Bed Days Lost to Delayed Discharges (All Reasons) – Performance against MPUI
Target Trajectory

Source ISD: ISD MSG Indicators

National Health and Wellbeing Indicator 19 – Bed Days Lost

Chart 17: Number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population Benchmarking 2018/19
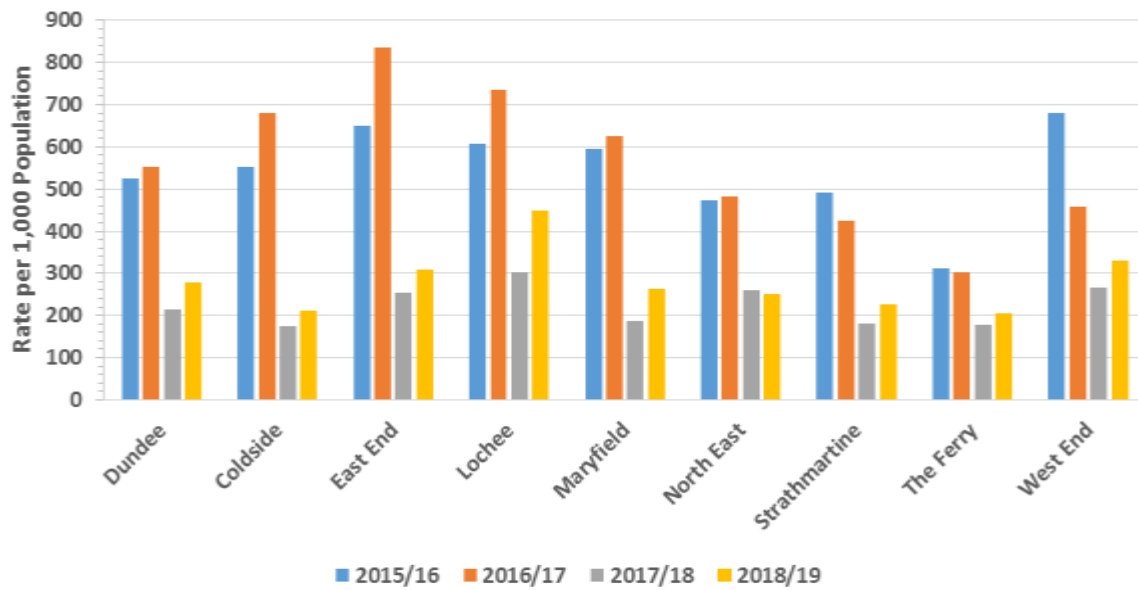

Source: ISD Core Suite of Integration Indicators

Table 9: Number of Days People Aged 75+ Spend in Hospital when they are ready to be Discharged as a Rate per 1,000 Population <u>Standard Delays</u> by LCPP

	2015/16	2016/17	2017/18	2018/19
Dundee	526	551	213	277
Coldside	553	681	174	210
East End	651	836	253	308
Lochee	608	736	304	450
Maryfield	596	626	186	262
North East	473	482	260	252
Strathmartine	491	425	182	225
The Ferry	313	303	177	205
West End	681	457	266	330

Source: 2015/16 & 2016/17 - Edison (excludes codes 100, 42T, ESDS and ICF).
        2017/18 & 2018/19 – ISD National Delayed Discharge Data

Chart 18: Number of Days People Aged 75+ Spend in Hospital when they are ready to be Discharged as a Rate per 1,000 Population <u>Standard Delays</u> by LCPP
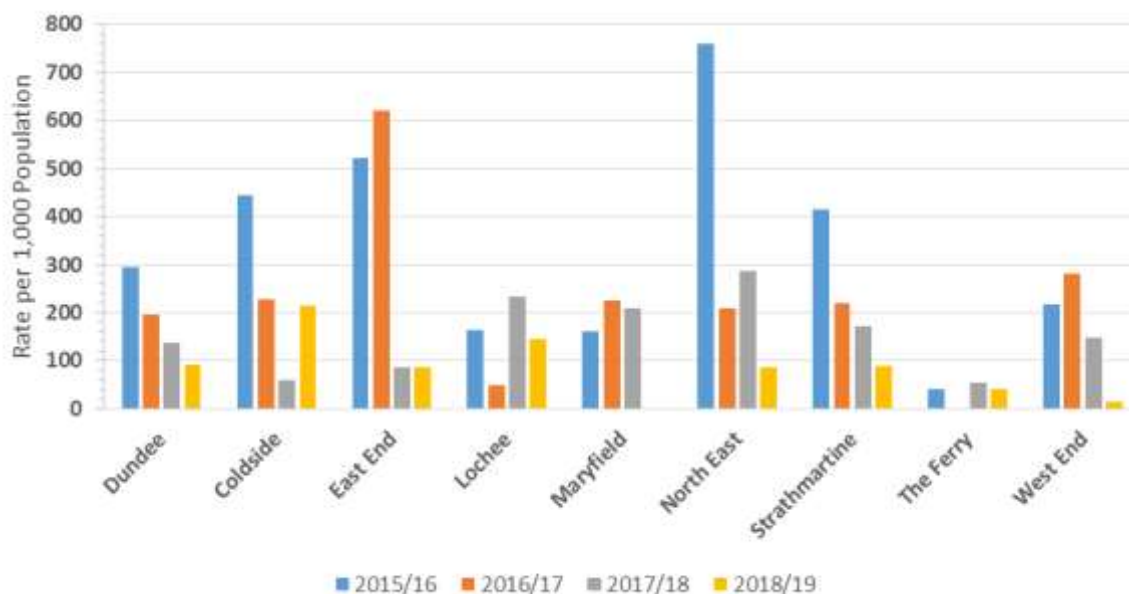

Source: 2015/16 & 2016/17 - Edison (excludes codes 100, 42T, ESDS and ICF).
      2017/18 & 2018/19 – ISD National Delayed Discharge Data

Table 10: Number of Days People Aged 75+ Spend in Hospital when they are ready to be Discharged as a Rate per 1,000 Population <u>Code 9 Delays</u> by LCPP

	2015/16	2016/17	2017/18	2018/19
Dundee	294	197	137	92
Coldside	443	229	60	214
East End	523	620	86	85
Lochee	164	49	232	145
Maryfield	162	226	209	0
North East	760	209	287	87
Strathmartine	416	221	173	90
The Ferry	41	0	53	42
West End	217	282	147	15

Source: 2015/16 & 2016/17 - Edison (excludes codes 100, 42T, ESDS and ICF).
      2017/18 & 2018/19 – ISD National Delayed Discharge Data

Chart 19: Number of Days People Aged 75+ Spend in Hospital when they are ready to be Discharged as a Rate per 1,000 Population Code 9 Delays by LCPP

Source: 2015/16 & 2016/17 - Edison (excludes codes 100, 42T, ESDS and ICF).
2017/18 & 2018/19 – ISD National Delayed Discharge Data

Analysis – All, Standard and Code 9 Delays age 75+

Benchmarking (All delays 75+) – ISD Core Suite of Integration Indicators
- The rate of bed days lost due to a delayed discharge in Dundee (369) was considerably lower than the Scottish rate (805). (chart 17)
- Dundee rate deteriorated between 2017/18 (349) and 2018/19 (369).
- Dundee is 8th best performing partnership in Scotland. (chart 17)
- At the end of 2018/19, 2 of the family partnerships performed better than Dundee. (chart 17)

Difference from 2015/16 Baseline to 2018/19
- For All Reasons, the Dundee rate per 1,000 population aged 75+ has fallen by 37.9%, which is a significant improvement.
- All LCPPs have shown a decrease in the rate of bed days lost per 1,000 population to both Standard and Code 9 Delays for those aged 75+ apart from The Ferry which showed a small increase from 41 to 42 per 1,000 in Code 9 delays. (table 3)

Performance Trend between 2017/18 and 2018/19
- Overall deterioration in Dundee rate by 30% for Standard Delays (table 9) but an improvement of 32.8% for Code 9 Delays (table 10) for those aged 75+.
- Improved rate for Standard Delays in North East (3.1%) but a deterioration in rates for Coldside (20.7%), East End (21.7%), Lochee (48.0%), Maryfield (40.9%), Strathmartine (23.6%), The Ferry (15.8%) and West End (24.1%) for those aged 75+. (table 9)
- Improved rates for Code 9 Delays in East End (1.2%), Lochee (37.5%), Maryfield (100%), North East (69.7%), Strathmartine (48%), West End (89.8%) and The Ferry (20.8%) but a deterioration in Coldside (256%) for those aged 75+. (table 10)

Variation across LCPPs in 2018/19
- Lochee (450) had the highest rate of Standard Delays for those aged 75+. The Ferry (205) and Coldside (210) have the lowest rates. (table 9)
- Coldside (214) had the highest rates of Code 9 Delays for those aged 75+. Maryfield has the lowest rate at 0, followed by West End at 15. (table 10)
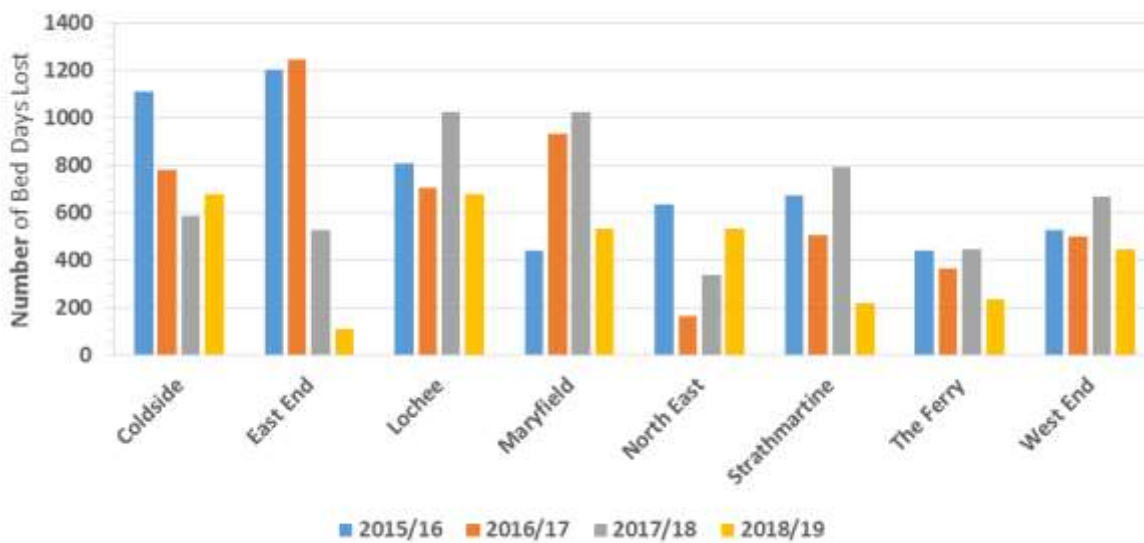
- Overall, Lochee (595) had the highest rate of delays for All Reasons for those aged 75+. The Ferry has the lowest rate at 248 followed by Maryfield at 262.

Table 11: Number of Bed Days Lost to Code 9 Delayed Discharges - All Ages by LCPP

	2015/16	2016/17	2017/18	2018/19
Dundee	6573	5971	7027	4825
Coldside	1112	780	584	676
East End	1204	1246	525	111
Lochee	809	708	1025	676
Maryfield	438	933	1025	532
North East	638	164	339	533
Strathmartine	675	507	792	216
The Ferry	440	365	447	235
West End	529	500	666	444

Source: 2015/16 & 2016/17 - Edison (excludes codes 100, 42T, ESDS and ICF).
        2017/18 & 2018/19 – ISD National Delayed Discharge Data

Chart 20: Number of Bed Days Lost to Code 9 Delayed Discharges - All Ages by LCPP

Source: 2015/16 & 2016/17 - Edison (excludes codes 100, 42T, ESDS and ICF).
        2017/18 & 2018/19 – ISD National Delayed Discharge Data

Analysis – Code 9 (Complex) Delays All Ages

Difference from 2015/16 baseline to 2018/19
- 26.6% improvement in bed days lost in Dundee 2018/19 from 2015/16 baseline. (table 11)
- All LCPPs have shown an improvement except for Maryfield who showed a deterioration of 21.5%. (table 11, chart 20)

Performance trend between 2017/18 and 2018/19
- The number of bed days lost to complex delayed discharges for people all ages in Dundee dropped 31.3% over the last year which is an improvement. (table 11)
- There were fewer complex days lost in 2018/19 in East End (78.9%), Lochee (34%), Maryfield (48.1%), Strathmartine (72.7%) The Ferry (47.4%) and West End (33.3%). (table 11)
- There were more days lost in 2018/19 in Coldside (15.8%) and North East (57.2%). (table 11)

Variation across LCPPs in 2018/19
- Lochee and Coldside both had the highest number of complex bed days lost for people all ages in Dundee at 676. (table 11)
- East End had the lowest number at 111. (table 11)

Actions to Improve Performance

Action	HSCP Operational Lead (s)	Timescale for Improvement
Develop intermediate care for older people with mental health difficulties	Angie Smith	September 2019
Continue to develop Enhanced Community Support (ECS) / Dundee Enhanced Community Support Acute (DECSA)	Mike Andrews/Louise Burton	March 2020
Develop locality teams	Jenny Hill / Beth Hamilton	March 2021
Assessment in the community	Beth Hamilton / Jacqueline Thomson	March 2020
Implementation of Eligibility Criteria	Jenny Hill /Beth Hamilton	March 2020
Develop community rehab model	Jenny Hill/Beth Hamilton	July 2020
Continue to develop Discharge to Assess Model through ongoing development of social care and step down resources	Lynne Morman	March 2020