



Item No. 12

Meeting Date Wednesday 7th February 2018

Glasgow City Integration Joint Board Finance and Audit Committee

Report By: Allison Eccles, Head of Business Development

Contact: Duncan Goldie, Performance Planning Manager

Tel: 0141 287 8751

HSCP PERFORMANCE REPORT Q2 (OLDER PEOPLE & UNSCHEDULED CARE)

Purpose of Report:

To present the Older People & Unscheduled Care sections of the Joint Performance Report for Quarter 2 of 2017/18.

Background/Engagement:

The Finance and Audit Committee have previously agreed that a Performance report would be produced and presented to them on a quarterly basis, with specific service areas focused upon at each meeting.

Recommendations:

The IJB Finance and Audit Committee is asked to:

- a) note the attached performance report; and
- b) review and discuss performance with the Strategic Lead for Older People & Unscheduled Care.

Please note that due to timing of meetings, there have been no changes to the data already presented to the IJB Finance and Audit Committee on the 6 December. As a result, only the above sections have been included in this report to support the review of performance across these services.

Relevance to Integration Joint Board Strategic Plan:

The report contributes to the ongoing requirement for the Integration Joint Board to provide scrutiny over HSCP operational performance, as outlined on page 47 of the Strategic Plan.

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	HSCP performance activity is mapped against the 9 national health and wellbeing outcomes, ensuring that performance management activity within the Partnership is outcomes focussed.
Personnel:	None
Carers:	None. Operational performance in respect to carers is outlined within the full version of the report which has already been submitted to the Finance & Audit Committee.
Provider Organisations:	None
Equalities:	No EQIA has been carried out as this report does not represent a new policy, plan, service or strategy.
Financial:	None
Legal:	The Integration Joint Board is required by statute to produce an Annual Performance Report within four months of the end of each financial year and to have routine performance management arrangements in place.
Economic Impact:	None
Sustainability:	None
Sustainable Procurement and Article 19:	None
Risk Implications:	None
Implications for Glasgow City Council:	The Integration Joint Board's performance framework includes performance indicators previously reported to the Council
Implications for NHS Greater Glasgow & Clyde:	The Integration Joint Board's performance framework includes performance indicators previously reported to the Health Board

1. Purpose

- 1.1 The purpose of this report is to present the Older People & Unscheduled Care sections of the Joint Performance Report for the Health and Social Care Partnership, for Quarter 2 of 2017/18.

2. Background

- 2.1 The first full Joint Performance report for 2016/17 was presented to the IJB Finance and Audit Committee on 12 September. It was agreed that this would be produced on a quarterly basis going forward. A subset of this report is reported to the Integration Joint Board, which focuses on the indicators of a more strategic nature and those which are more frequently updated.
- 2.2 The Finance and Audit Committee have indicated that they wish to focus upon a number of specific service areas at each meeting, in order to enable a more detailed scrutiny of performance. A reporting schedule has, therefore, been drawn up, and the Strategic Lead for Older People & Unscheduled Care has been invited to this meeting
- 2.3 It should also be noted that in addition to these quarterly performance reports, an Annual Performance Report - as required by the Public Bodies (Joint Working) (Scotland) Act 2014 – has now been published and is available on the Partnership website.
- 2.4 These reports are one component of the internal scrutiny arrangements which have been put in place across the Health and Social Care Partnership. Other processes have been established to oversee and scrutinise financial and budgetary performance, clinical and care governance, and the data quality improvement regime

3. Reporting Format

- 3.1 In the performance summary section of the attached report, a summary table is provided which for each care group, notes the numbers of indicators which were RED/AMBER/GREEN/GREY over the last two reporting periods and highlights those indicators which have changed status. A second table then lists all of the indicators and provides their current city wide RAG status and their direction of travel since the last reporting period.
- 3.2 Performance has been classified as GREEN when it is within 2.5% of the target; AMBER between 2.5% and 5% of the target; and RED when performance is 5% or more from the target. Performance has been classified as GREY when there is no current target and/or performance information to classify performance against.

- 3.3 In the main body of the report, detailed performance information for each indicator is then provided. For those indicators which are AMBER or RED at a city level, a more detailed analysis including locality information and status; performance trends; improvement actions; and timelines for improvement are provided. Narrative is also provided for those indicators which have changed their RAG status in a positive direction, noting steps which have resulted in this improved performance.
- 3.4 For all indicators, their purpose is described, along with an indication of which National Integration Outcome they most closely impact upon, and whether they have been defined at a local, corporate, or national level as outlined below:
- National Integration Indicators (specified nationally by the Scottish Government to provide a basis against which Health and Social Care Partnerships can measure their progress in relation to the National Health and Wellbeing outcomes).
 - NHS Local Development Plan Standards/Indicators (specified nationally which replaced the HEAT targets/standards from 2015/16).
 - Health Board/Council Indicators (specified by the parent organisations in respect to services which have been devolved to the Partnership)
 - Local Health and Social Work Indicators (specified locally by the Partnership)

4. Recommendations

- 4.1 The IJB Finance and Audit Committee is asked to:
- a) note the attached performance report; and
 - b) review and discuss performance with the Strategic Lead for Older People & Unscheduled Care.



CORPORATE PERFORMANCE REPORT

(IJB FINANCE & AUDIT COMMITTEE)

**QUARTER 2
2017/18**

**OLDER PEOPLE &
UNSCHEDULED CARE**





CONTENTS

SECTION	PAGE NUMBER
Performance Summary	3
Older People	10
Unscheduled Care	30

PERFORMANCE SUMMARY









1. Key to the Report

Outlined below is a key to the classifications used in this report.

Classification		Key to Performance Status	Direction of Travel - Relates to change between the last two quarters or last two reporting periods for which information is available	
	RED	Performance misses target by 5% or more	▲	Improving
	AMBER	Performance misses target by between 2.5% and 4.99%	▶	Maintaining
	GREEN	Performance is within 2.49% of target	▼	Worsening
	GREY	No current target and/or performance information to classify performance against.	N/A	This is shown when no comparable data is available to make trend comparisons










2a. Summary













The table below presents a summary of performance of the measures contained within the body of this Combined Performance Report. It reports changes in RAG rating between the 2 most recent quarters, or where the data is not reported quarterly, the last two reporting periods for which information is available.









CARE GROUPS/AREAS	Quarter 1 RAG Rating				Quarter 2 RAG Rating				Changes in Status Q1 ⇌ Q2	New or Withdrawn Indicator at Q2
										
Older People (No. and %)	6 26%		12 56.6%	4 17.4%	7 31.8%	2 9.1%	9 40.9%	4 18.2%	<u>Green ⇌ Amber</u> 12. Intermediate Care: % Occupancy 15. Provided residential care : % Occupancy <u>Green ⇌ Red</u> 13. Intermediate Care: Average Length of Stay	No new or withdrawn indicators
Unscheduled Care (No. and %)	2 14.2%	1 7.2%		11 78.6%	1 7.1%	1 7.1%	1 7.1%	11 78.6%	<u>Red ⇌ Amber</u> 3. A&E Waits Less Than 4 Hours (%) - GRI <u>Amber ⇌ Green</u> 3. A&E Waits Less Than 4 Hours (%) - QEUH	No new or withdrawn indicators










2b. Performance at a Glance



The table below presents a summary of performance at a city wide level for the performance measures contained within the body of this Combined Performance Report. The main body of the performance report provides locality and trend information and summarises actions being taken to improve performance where relevant.

Indicator	Target	Latest Period Reported	Actual/Status (City Wide)	Direction of Travel in Last period
Older People				
1. Home Care: % of older people (65+) reviewed in the last 12 months.	85%	Q2	85% 	▶
2. Number of community service led Anticipatory Care Plans in Place.	720 for 2017/18	Q2	385 	▲
3. Number of people in supported living services.	650 by year end	Q2	599 	▲
4. Percentage of service users who receive a reablement service following referral for a home care service.	75%	Cordia Period 7	73.1% (Hosp)  83.2% (Comm) 	▼ Hospital ▲ Community
5. Percentage of service users leaving the service following reablement period with no further home care support.	>40%	Cordia Period 4	34.9% 	▼
6. Open occupational therapy (OT) activities at assessment stage assigned to a worker or team - % over one year.	0%	Q2	0% 	▶
7i. AHP Waiting Times – MSK Physio.	90% within 4 weeks	Sep 17	52% 	▲
7ii. AHP Waiting Times – Podiatry	90% within 4 weeks	Sep 17	98.7% 	▲

Indicator	Target	Latest Period Reported	Actual/Status (City Wide)	Direction of Travel in Last period
7iii. AHP Waiting Times – Dietetics.	100% within 4 weeks	Sep 17	100% 	▶
8. Continence Service – Waiting Times	Max. Wait 12 weeks	Q2	9 	▼
9. Day Care – Review Rates	95%	Q2	89% 	▼
10.i Referrals to Telecare: Basic	2,248	Q2	669 	▲
10.ii Referrals to Telecare: Advanced	304	Q2	278 	▲
11. Total number of Older People Mental Health patients breaching the 72 hour discharge target (including AWI patients).	0	2 Oct 17	17 	▲
12. Intermediate Care: Percentage Occupancy.	90%	Sep 17	86% 	▼
13. Intermediate Care: Average Length of stay (Days).	<30	Sep 17	33 days 	▼
14. Intermediate Care: Percentage of users transferred home.	>30%	Sep 17	20% 	▼
15. Provided Residential Care – Occupancy Rates	95%	Q2	92% 	▼
16. Provided Residential Care – Review Rates	95%	Q2	98% 	▲
17. % of last 6 months of life spent at home or in a community setting	TBC	Q4	87 	▲

Indicator	Target	Latest Period Reported	Actual/Status (City Wide)	Direction of Travel in Last period
18. Falls rate per 1,000 population aged 65+	TBC	Q4	7.8 	▲
19. Total number of patients who have been diagnosed with dementia in a given month	TBC	Q4	246 	▼
20. Percentage of patients who have their first contact with a Dementia Linkworker who have waited no longer than 12 weeks	TBC	Q4	53.5% 	▲
Unscheduled Care				
1. New Accident and Emergency (A&E) attendances for NHS Greater Glasgow and Clyde (NHSGG&C) locations - crude rate per 100,000 population.	Target TBC	Oct 16 - Sept 17	2,702 	▼
2. New Accident and Emergency (A&E) Attendances for NHS Greater Glasgow and Clyde (NHSGG&C) locations with a source of referral of a GP - crude rate per 100,000 population.	Target TBC	May 17	88 	▲
3. A&E Waits Less Than 4 Hours (%)	95%	Sep 17	91.6% (GRI)  95.6% (QEH) 	▲ (GRI) ▲ (QEH)
4i. Emergency Admissions – Numbers and Rates/1000 population by month (Aged 65+).	Target TBC	Aug 17	11,032/132 (Year to Date) 	▼
4ii. Emergency Admissions – Numbers and Rates/1000 population by month. (Aged 75+).	Target TBC	Aug 17	7,116/181 (Year to Date)	▼

Indicator	Target	Latest Period Reported	Actual/Status (City Wide)	Direction of Travel in Last period
				
5. Rate of emergency admissions per 100,000 population for adults.	Target TBC	Q4	14,305 (16/17) 	▲
6. Readmission to hospital within 28 days	Target TBC	Q4	101 (16/17) 	▲
7i. Emergency Acute Bed Days for Older People (Rate per 1000 population) (65+).	Target TBC	Aug 17	130,071 (Year to Date) 	▼
7ii. Emergency Acute Bed Days for Older People (Rate per 1000 population) (75+).	Target TBC	Aug 17	93,841 (Year to Date) 	▶
8. Rate of emergency bed day per 100,000 population for adults.	Target TBC	Q4	141,594 (16/17) 	▲
9. Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	Target TBC	Q4	25% 	▲
10. Adults and older people breaching the 72 hour discharge target. (excluding Learning Disability and Mental Health patients).	20	2 Oct 17	40 	▲
11. Total Number of Acute Bed Days Lost to Delayed Discharge (Older People 65+).	Target TBC	Aug 17	4,254 (Year to Date) 	▼

Indicator	Target	Latest Period Reported	Actual/Status (City Wide)	Direction of Travel in Last period
12. Number of Acute Bed Days lost to delayed discharge for Adults with Incapacity (AWI) (Older People 65+).	Target TBC	Aug 17	959 (Year to Date) 	▲
13. Number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population	Target TBC	Q4	84 	▲

1. OLDER PEOPLE

Proactive Care and Support at Home

Indicator	1. Home Care: Percentage of older people (65+) reviewed in the last 12 months
Purpose	To monitor the extent to which home care packages are reviewed. This should be at least annually to ensure that service users are receiving the right level and type of service. The calculation is based on service users in receipt of a home care service for more than a year, and who have had a review activity completed within the last 12 months. It should be noted that this function now lies with Cordia.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 4
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Target	Locality	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	17/18 Q2
85%	North East	91% (G)	91% (G)	92% (G)	92% (G)	93% (G)	92% (G)
85%	North West	79% (R)	77% (R)	81% (A)	85% (G)	83% (G)	85% (G)
85%	South	80% (R)	84% (G)	84% (G)	83% (G)	81% (A)	79% (R)
85%	Glasgow	83% (G)	84% (G)	85% (G)	86% (G)	85% (G)	85% (G)
Performance Trend							
Performance overall at the city level has been within target for the past 18 months. For the past three quarters all localities have consistently met the target with the exception of South where performance dipped from AMBER to RED between Q1 and Q2.							

Indicator	2. Number of Community Services led Anticipatory Care Plans (ACPs) in Place
------------------	---

Purpose	To monitor the extent to which services are introducing and rolling out the new community service led anticipatory care plans. It should be noted that these are separate from GP led anticipatory care plans which have been in place for longer but are not included here due to a lack of available information on their numbers.
National/ Corporate/ Local	Health Board Indicator
Integration Outcome	Outcome 2
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Target	16/17 Total	17/18 Q1	17/18 Q2	Year to date		
NE	N/A	136	69	65	134		
NW	N/A	180	67	60	127		
South	N/A	161	70	51	121		
Citywide	N/A	7	3	0	3		
Glasgow	720	484 (G)	209	176	385 (G)		
Performance Trend							
<p>This target will be reviewed for 2018/19 as new national guidance on ACPs was introduced in June 2017, and we are in the process of migrating our approach over towards the national approach. In future the emphasis will be inviting people to participate in developing an ACP which will then be a live document updated as appropriate according to people's changing needs and circumstances. Recording arrangements for the new form of ACPs is still being discussed. Meantime we continue to migrate to the new national approach for new patients / service users. The numbers reported here relate to those completed using the Glasgow approach, and performance to quarter 2 shows we are more than half way to achieving the annual target of 720 which is an increase on the 2016/17 target of 360.</p>							

Indicator	3. Number of people in supported living services
Purpose	To monitor the number of people receiving supporting living packages. These are expected to increase over the course of the year in line with the longer term accommodation based strategy. This strategy seeks to shift the balance of care by enabling greater numbers of older people to be supported at home and reduce the numbers going into residential or nursing care.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 2
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Target	17/18 Q1	17/18 Q2	17/18 Q3	17/18 Q4
North East	N/A	167	172		
North West	N/A	190	195		
South	N/A	221	232		
Glasgow	650 by year end	576 (R)	599 (R)		
Performance Trend					
More accurate information systems were introduced at Q1 so figures are only available for Quarters 1 and 2. There was an increase in the number of people receiving supported living services between Q1 and Q2.					
Actions to Improve Performance					
The Older People Supported Living internal working group continues to monitor and support the development of supported living services across the city. This has resulted in a small but sustained increase in numbers over the period. This work will continue for the remainder of the year.					
Timeline for Improvement					
The current level of performance improvement is anticipated to continue over the remaining periods of 17/18 and should deliver the performance target identified.					

Indicator	4. Percentage of service users who receive a reablement service following referral for home care.
Purpose	All service users who require a home care service are screened for suitability for reablement. This indicator reports the proportion of service users who go on to receive a reablement service following screening. It should be noted, however, that this function now lies with Cordia. Information is reported for 4 weekly financial periods by Cordia which has been mapped below to the HSCP quarterly reporting cycle.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 2
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Referral Source	Target	16/17	17/18				17/18		
			Q4	Q1				Q		
			Per 13b	Per 1&2	Per 3	Per 4	Per 5	Per 6	Per 7	
City-wide	Hospital Discharges	75%	73.4% (G)	75.6% (G)	75.0% (G)	75.4% (G)	67.5% (R)	75.4% (G)	73.1% (A)	
	Community Referrals	75%	76.5% (G)	82.5% (G)	77.4% (G)	76.5% (G)	71.3% (A)	79.7% (G)	83.2% (G)	
Performance Trend										
Performance fell at Period 5 for both hospital discharges (RED) and community referrals (AMBER). However by Period 6 and 7 performance had improved across both areas.										

Indicator	5. Percentage of service users leaving the service following reablement period with no further home care support
Purpose	The Reablement service provides tailored support to people in their own home for up to six weeks. It builds confidence by helping people to regain skills to do what they can and want to do for themselves at home. The two key objectives of the service are to promote independence and reduce dependency. Greater independence can be measured by a reduction in future home care requirement. The Reablement service is one of the strategies we are using to ensure that older people are able to live independently in their own homes. It should be noted, however, that this function now lies with Cordia. Information reported for 4 weekly financial periods by Cordia been mapped below to the HSCP quarterly reporting cycle.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 2
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

		2016/17 Q4	2017/18 Q1			2017/18 Q2		
Locality	Target	Per. 13b	Per 1/2	Per 3	Per 4	Per 5	Per 6	Per 7
North East	>40%	37% (R)	39% (A)	38% (R)	41% (G)	49.1% (G)	50.8% (G)	34.4% (R)
North West	>40%	33% (R)	47% (G)	32% (R)	36% (R)	39.7% (G)	38.3% (A)	37.0% (R)
South	>40%	39% (A)	29.5% (R)	30% (R)	36% (R)	37.1% (R)	27.0% (R)	33.3% (R)
Citywide	>40%	36% (R)	38% (R)	33% (R)	37% (R)	41.4% (G)	38.0% (R)	34.9% (R)
Performance Trend								
Performance varies across locality and over time. Performance slipped between the start of Quarter 2 (Period 5) where NE and NW were above target (GREEN) and the end of the quarter (Period 7) where all localities were outwith the target range (RED).								
Actions to Improve Performance								
The 40% target continues to be challenging to achieve on a consistent basis but remains for 2017/18. Monthly monitoring of the city wide reablement performance continues in conjunction with Cordia and operational areas.								
Timeline for Improvement								
The expectation continues to be that the target will be achieved in 2017/18.								

Target/Ref	6. Open occupational therapy (OT) activities at assessment stage assigned to worker or team: % over one year
Purpose	To monitor the length of time that OT assessment activities have been outstanding. The aim is to ensure that there are no outstanding activities over 12 months.
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 9
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Target	Locality	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	17/18 Q2
0%	North East	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)
0%	North West	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)	1% (A)	0% (G)
0%	South	1% (A)	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)
0%	Glasgow	1% (A)	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)	0% (G)
Performance Trend								
At the end of Q2 there were 1,407 open OT assessment activities; none of these activities had been open for more than 12 months.								

Target/Ref	7. AHP Waiting Times
Purpose	To monitor the waiting times performance in relation to AHP services. These services are hosted across NHSGGC with Renfrewshire having managerial responsibility for Podiatry; West Dunbartonshire for MSK Physio; and Acute for Dietetics.
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 9
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Service	Target	Apr 16	Apr 17	May 17	Jun 17	Jul 17	Aug 17	Sep 17
MSK Physio	90% seen within 4 weeks	45% (R)	48% (R)	47% (R)	42% (R)	44% (R)	53% (R)	52% (R)
Podiatry	90% seen within 4 weeks	91.9% (G)	98.1% (G)	98.5% (G)	97.8% (G)	96.8% (G)	98.5% (G)	98.7% (G)
Dietetics	100% within 12 weeks	100% (G)	100% (G)	100% (G)	100% (G)	100% (G)	100% (G)	100% (G)

Performance Trend

- MSK physio target not being met but all patients requiring an urgent MSK appointment are seen within the target timescales.
- Target being consistently met by podiatry.
- Target being met consistently by dietetics.

Actions to Improve Performance

These services are managed by other HSCPs on behalf of Glasgow City HSCP, and we have a process to raise any performance issues with the host HSCP. The performance of the MSK physio service has been a concern for some time as illustrated by the waiting time data above, and waiting times have increased in recent months. We are in direct discussion with West Dunbartonshire HSCP who manage this service to seek improvements.

Timeline for Improvement

It is expected that waiting times will improve on the current position in the months ahead.

Target/Ref	8. Continence Service – Waiting Times
Purpose	To monitor waiting times performance for Continence Services. This service is hosted by Glasgow. The service is reported by North and South areas. The North area includes North East and North West Glasgow, and East and West Dunbartonshire. The South area includes Glasgow South, Inverclyde, East Renfrewshire and Renfrewshire
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 9
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Target	Maximum Wait in Weeks			
	Q3 16/17	Q4 16/17	Q1 17/18	Q2 17/18
Maximum Wait 12 weeks	6.25 (G)	5.4 (G)	7 (G)	9 (G)
Performance Trend				
Maximum waiting times across all clinics shown above. Waiting time targets continue to be met.				

Target/Ref	9. Day Care (provided) - Review Rates
Purpose	To monitor the extent to which reviews for day care service users are being undertaken within the target 6 month period. This indicator reports on review rates for service users in receipt of day care provided by our own local authority run units.
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 4
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

	2016/17		2017/18	
Target	Q2 - Q3	Q4	Q1	Q2
95%	96% (G)	95% (G)	90% (R)	89% (R)
Performance Trend				
Performance was outwith the target range (RED) in both Quarter 1 and 2.				
Actions to Improve Performance				
This has been discussed with managers in accountability meetings and we would expect to see improved performance going forward.				
Timeline for Improvement				
Improvements are expected by Quarter 3.				

Target/Ref	10. Referrals to Telecare
Purpose	To monitor the number of Telecare referrals received on a quarterly basis for the Basic and Advanced Telecare Services. Expanding the uptake of Telecare is a central aim of the national Technology Enabled Care (TEC) Programme.
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 2
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Telecare Referrals	Agreed Scottish Govt Target	2016/17 Total (Apr – Mar)	17/18 Q1	17/18 Q2	17/18 Mid-year Total
Basic	2,248 (annual)	2,581 (G)	617 (G)	669 (G)	1,286 (G)
Advanced	304 (annual)	835 (G)	271 (G)	278 (G)	549 (G)

Performance Trend

Please note revised figure of 271 in respect of Advanced Telecare at Q1; this was reported previously in error as 521.

The number of referrals to both the Basic and Advanced Telecare Services exceed what may be expected on a pro-rata basis at the mid-year point.

Care at Times of Transition

Indicator	11. Total number of Older People Mental Health patients breaching the 72 hour discharge target (including AWI patients).
Purpose	To monitor the extent to which Older Mental Health patients are being unnecessarily delayed in hospital with the aim that these are reduced. The figures shown relate to the dates on which a census has been undertaken. These relate to patients coded to 'G4' - the psychiatry of old age. Figures for patients coded G1 – general psychiatry – are in the adult mental health section later in this report.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

TARGET	AREA	4 Apr 16	3 Apr 17	5 Jun 17	3 Jul 17	7 Aug 17	4 Sep 17	2 Oct 17
Over 65s Target = 0	NE	5 (R)	2 (R)	2 (R)	7 (R)	8 (R)	3 (R)	1 (R)
	NW	14 (R)	5 (R)	6 (R)	7 (R)	7 (R)	8 (R)	5 (R)
	South	4 (R)	12 (R)	12 (R)	12 (R)	7 (R)	8 (R)	11 (R)
	City	23 (R)	19 (R)	20 (R)	26 (R)	22 (R)	19 (R)	17 (R)

Performance Trend

Numbers vary across localities and over time and have remained RED. Overall delays have reduced over the last 3 months. South has had the highest number of delays and North East the lowest over the period shown.

Actions to Improve Performance

Our performance in this area remains a concern and revised improvement plans are being developed and implemented as part of the HSCPs transformation and financial efficiency programmes. There is a regular and robust scrutiny process in place for all cases involving clinicians, hospital managers, bed managers and both health and social work service managers. While this is a complex client group there has been significant progress towards meeting this target since July and work will continue to ensure the downward trajectory continues.

Timeline for Improvement

Further improvements towards meeting the target are anticipated by the end of Quarter 3.

Indicator	12. Intermediate Care : Percentage Occupancy
Purpose	To monitor the utilisation of intermediate care beds. The aim is to ensure occupancy rates are high to ensure efficiency and value for money.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Target	Apr 2016	Apr 17	Jun 17	Jul 17	Aug 17	Sep 17
Glasgow	90%	88% (G)	82% (R)	87% (G)	82% (R)	90% (G)	86% (A)
North East	90%	94% (G)	74% (R)	84% (R)	90% (G)	85% (A)	90% (G)
North West	90%	75% (R)	89% (G)	92% (G)	73% (R)	94% (G)	79% (R)
South	90%	94% (G)	83% (R)	85% (A)	84% (R)	92% (G)	90% (G)
Performance Trend							
Variations across areas and over time. Performance reduced slightly in Quarter 2 and is AMBER at a city level in September as a result of North West moving to RED.							
Actions to Improve Performance							
An agreed improvement programme is underway looking at a range of factors that influence occupancy such as weekend admissions, turnover of room by provider and any delays in transfer from acute to intermediate care.							
Timeline for Improvement							
Although further scrutiny will be immediately established, sustainable improvements would be sought from March 2018. More recent operational data suggests improved performance which should be reflected in the next quarterly report.							

Indicator	13. Intermediate Care : Average length of stay (Days)
Purpose	To monitor whether people are staying within intermediate care beds for appropriate period of time. The intention is to ensure that people are moving onto appropriate destinations and are not staying for longer than required.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Target	Apr 2016	Apr 17	Jun 17	Jul 17	Aug 17	Sep 17
Glasgow	<30	41 (R)	33 (R)	30.5 (G)	36 (R)	36 (R)	33 (R)
North East	<30	36 (R)	36 (R)	33 (R)	41 (R)	33 (R)	30 (G)
North West	<30	38 (R)	32 (R)	32 (R)	31 (A)	32 (R)	40 (R)
South	<30	44 (R)	31 (A)	27 (G)	36 (R)	34 (R)	34 (R)
Performance Trend							
Average lengths of stay vary over time and between localities. Performance moved to RED at a city level in September, with the target being met in the North East and exceeded in the other localities.							
Actions to Improve Performance							
A revised scrutiny system has been established within intermediate care at individual patient level. This is part of an overall improvement programme to increase efficiency of use of intermediate care and to remove delays in the system. There is a longer term programme of activity to enable review directly into Carefirst which will provide more operational scrutiny.							
Timeline for Improvement							
Although further scrutiny will be immediately established, sustainable improvements would be sought from March 2018.							

Indicator	14. Percentage of intermediate care users transferred home compared to those transferred to a residential or nursing home.
Purpose	To monitor the destinations of people leaving intermediate care with the aim of increasing the percentages returning home.
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 2
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality		Targets	Apr 16	Apr 17	Jun 17	Jul 17	Aug 17	Sep 17
Glasgow	Home	30%	21% (R)	25% (R)	24% (R)	35% (G)	24% (R)	20% (R)
	Res/Nursing	N/A	52%	62%	54%	48%	55%	57%
	Readmissions	N/A	25%	10%	19%	17%	20%	21%
	Deceased	N/A	2%	1%	3%	0%	2%	3%
NE	Home	30%	22% (R)	30% (G)	29% (G)	22% (R)	27% (R)	11% (R)
	Res/Nursing	N/A	39%	59%	59%	44%	50%	63%
	Readmissions	N/A	33%	7%	12%	33%	23%	26%
	Deceased	N/A	6%	0%	0%North West	0%	0%	0%
NW	Home	30%	21% (R)	22% (R)	13% (R)	35% (G)	24% (R)	21% (R)
	Res/Nursing	N/A	57%	57%	54%	52%	60%	58%
	Readmissions	N/A	21%	17%	25%	13%	16%	17%
	Deceased	N/A	0%	4%	8%	0%	0%	4%
South	Home	30%	21% (R)	22% (R)	30% (G)	46% (G)	20% (R)	28% (A)
	Res/Nursing	N/A	58%	70%	52%	46%	53%	48%
	Readmissions	N/A	21%	7%	19%	8%	20%	20%
	Deceased	N/A	0%	0%	0%	0%	7%	4%

Performance Trend

Variations across localities and over time. The city, North East and North West all RED in September with the South AMBER.

Actions to Improve Performance

A number of actions are underway including the implementation of the Home is Best model as well as an overall service improvement programme which will aim to maintain and increase the level of patients returning home.

Timeline for Improvement

Although further scrutiny will be immediately established, sustainable improvements would be sought from March 2018. More recent operational data suggests improved performance which should be reflected in the next quarterly report.

Hospitals and Care Homes

Target/Ref	15. Provided Residential Care Homes – Occupancy Rates
Purpose	To monitor occupancy rates within our own local authority run residential care homes (provided).
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 9
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

	2016/17		2017/18	
Target	Q2-Q3	Q4	Q1	Q2
95%	100% (G)	94% (G)	96% (G)	92% (G)
Performance Trend				
The occupancy rate fell slightly in the last quarter but remains within the target range.				

Target/Ref	16. Residential Care (Provided) – Review Rates
Purpose	To monitor the extent to which reviews for care home residents are being undertaken within the target 6 month period. This indicator reports on the review of residents in our own local authority residential care homes by care home staff.
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 4
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

	2016/17		2017/18	
Target	Q2 - Q3	Q4	Q1	Q2
95%	97% (G)	94% (G)	97% (G)	98% (G)
Performance Trend				
Review rates remain GREEN at quarter 2.				

Target/Ref	17. Proportion of last 6 months of life spent at home or in a community setting
Purpose	This indicator measures the percentage of time spent by people in the last 6 months of life at home or in a community setting. It is derived by linking recorded deaths data with acute hospital bed day data to calculate the percentage of time spent outside acute hospitals in the 6 months at the end of people's lives. Accidental deaths are excluded.
National/ Corporate/ Local	National Integration Indicator 15
Integration Outcome	Outcome 3
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Area	14/15	15/16	Target	16/17					17/18	
				Q1	Q2	Q3	Q4	Total	Q1	Q2
Glasgow City	84	85	TBC	85	86	86	87	86		
Scotland	86	87	N/A	N/A	N/A	N/A	N/A	87		

Performance Trend
National integration indicator. Performance has been increasing slightly over the last three years Proportions remain slightly below the Scottish average, though the gap has narrowed to only 1% this year. Target to be confirmed.

Target/Ref	18. Falls rate per 1,000 population aged 65+
Purpose	Falls can have a significant impact on an older person's independence and quality of life, impeding a person's mobility and confidence. Well-organised services, delivering recommended and evidence based practices can prevent many falls and fractures in older people in the community setting and prevent repeat falls. This indicator is based upon data gathered by Information Services Division (ISD) on the number of patients aged 65 plus who are discharged from hospital with an emergency admission code related to falls
National/ Corporate/ Local	National Integration Indicator 16
Integration Outcome	Outcome 7
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Area	14/15	15/16	Target	16/17					17/18	
				Q1	Q2	Q3	Q4	Total	Q1	Q2
Glasgow City	27	29	TBC	7.6	7.4	8.0	7.8	31		
Scotland	21	21	N/A	N/A	N/A	N/A	N/A	22		

Performance Trend

National integration indicator. There has been a slight increase in the number of falls during the last year, both locally and at a national level. Target to be confirmed.

Target/Ref	19. Total number of patients who have been diagnosed with dementia in a given month
Purpose	To monitor the numbers of people being diagnosed with dementia. This gives an indication of whether dementia is being effectively diagnosed in order to enable appropriate interventions to be delivered.
National/ Corporate/ Local	HSCP Local Indicator. Also reportable nationally.
Integration Outcome	Outcome 4
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

		2016/17		2017/18			
Locality	Target	Q3	Q4	Q1	Q2	Q3	Q4
Glasgow	TBC	331	246				
North East	TBC	82	43				
North West	TBC	115	103				
South	TBC	134	100				

Performance Trend
New indicator and there is a timelag in the production of data. Targets to be confirmed. The difference between Q1 and Q2 performance can be explained by the gap in Team Lead post in NE and the small drop in numbers in NW and South are likely to be simply natural variation.

Target/Ref	20. Percentage of patients who have their first contact with a Dementia Linkworker who have waited no longer than 12 weeks.
Purpose	To monitor the waiting times for people who have been diagnosed with dementia to be seen by a Post Diagnostic Support Linkworker. This gives an indication of whether interventions are being delivered in a timeous manner.
National/ Corporate/ Local	HSCP Local Indicator.
Integration Outcome	Outcome 9
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

		2016/17		2017/18			
Locality	Target	Q3	Q4	Q1	Q2	Q3	Q4
Glasgow	TBC	47.5%	53.5%				
North East	TBC	100%	100%				
North West	TBC	37.2%	56%				
South	TBC	64.3%	50%				

Performance Trend

This is a new indicator and there is a time lag in the production of data so it is too early to draw conclusions about performance over only two quarters. Targets to be confirmed.

UNSCHEDULED CARE

A&E Activity

Indicator	1. New Accident and Emergency (A&E) attendances for NHS Greater Glasgow and Clyde (NHSGG&C) locations - crude rate per 100,000 population
Purpose	To monitor attendance at Accident and Emergency units. Partners are working together to reduce these over time and shift the balance of care towards the community. As these are not standardised for age/sex/SIMD etc, they cannot be used to compare areas but allow for comparisons over time within areas.
National/ Corporate/ Local	Health Board Indicator
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Target	Apr 15 - Mar 16	Apr 16- Mar 17	Jul 16 - Jun 17	Aug 16 - Jul 17	Sep 16 – Aug 17	Oct 16- Sep 17
Glasgow	TBC	2284	2307	2329	2337	2338	2353
North East	TBC	2632	2709	2708	2709	2699	2702
North West	TBC	1992	2044	2106	2119	2132	2159
South	TBC	2265	2217	2222	2231	2231	2244
Performance Trend							
Variations across areas and over time. Slight increase at a city wide level and in the North West and South so far in 2017/18, with the North West decreasing slightly. North East consistently highest and North West consistently lowest over the period shown. All outstanding unscheduled care targets will be determined through the process of developing the Unscheduled Care Commissioning Plan.							

Indicator	2. New and Unplanned Return Attendances at Accident and Emergency (A&E) Departments with a source of referral of a GP
Purpose	To monitor attendance at Accident and Emergency units where the patients have been directly referred by a GP. Partners are working together to reduce these over time and shift the balance of care towards the community. As these are not standardised for age/sex/SIMD etc, they cannot be used to compare areas but allow for comparisons over time within areas.
National/ Corporate/ Local	HSCP Local Indicator
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Target	16/17	April	July	Aug	Sep	Year to date
Glasgow	TBC	5752	421	324	315	454	2560
North East	TBC	2033	152	125	132	145	867
North West	TBC	1620	160	100	132	166	856
South	TBC	2099	109	99	151	143	837
Performance Trend							
Variations across areas and over time. All outstanding unscheduled care targets will be determined through the process of developing the Unscheduled Care Commissioning Plan.							

Target/Ref	3. A&E Waits Less Than 4 Hours (%)
Purpose	To monitor waiting times at the main AE units in Glasgow City. This will related to all patients who attend these units, irrespective of their home location.
National/ Corporate/ Local	NHS LDP Standard
Integration Outcome	Outcome 9
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Locality	Target	Mar 16	Mar 17	May 17	Jun 17	July 17	Aug 17	Sep 17
Glasgow Royal Infirmary (GRI)	95%	82.8% (R)	86.3% (R)	84.5% (R)	87.1% (R)	92.6% (G)	94.8% (G)	91.6% (A)
Queen Elizabeth University Hospital (QEU)	95%	85.1% (R)	81.9% (R)	84.3% (R)	90.8% (A)	92.2% (A)	92.1% (A)	95.6% (G)

Performance Trend
New indicator. Performance fluctuates over time and is below target in September at the GRI, with the QEU meeting the target. Performance has improved, however in both hospitals during 2017/18.
Actions to Improve Performance
Both hospitals have plans in place to deliver the target as part of the Board wide unscheduled care programme supported by resources from the Scottish Government. A Board-wide unscheduled care improvement programme is now in place designed to improve performance across GG&C.
Timeline for Improvement
Timeline for delivery is to be confirmed.

Emergency Admissions

Indicator	4. Emergency Admissions (Aged 65+ and 75+) – Numbers and Rates per 1000 population.
Purpose	To monitor the extent to which older people are being admitted to hospital in emergency situations. Partners are working together to reduce these over time and shift the balance of care towards the community. As these are not standardised for age/sex/SIMD etc, they cannot be used to compare areas but allow for comparisons over time within areas.
National/ Corporate/ Local	HSCP Local Indicator.
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Indicator	Target	14/15	15/16	16/17	Jul 17	Aug 17	Sep 17	Year to date
i. 65+ Numbers	TBC	26,237	27,891	28,557	2163	2259	2240	13,272
ii. 65+ Rates/ 1000 pop	TBC	315	334	342	26	27	27	159
i. 75+ Numbers	TBC	16,530	17,844	18,123	1415	1490	1444	8560
ii. 75+ Rates/ 1000 pop	TBC	416	450	460	30	38	37	217
Performance Trend								
Numbers for 65+ and 75+ have been increasing slightly over the last two years. Year to date monthly averages for both age groups slightly below 16/17 monthly averages so far. All outstanding unscheduled care targets will be determined through the process of developing the Unscheduled Care Commissioning Plan.								

Target/Ref	5. Rate of emergency admissions per 100,000 population for adults.
Purpose	To monitor the extent to which adults are being admitted to hospital in emergency situations. Partners are working together to reduce these over time and shift the balance of care towards the community. As these are not standardised for age/sex/SIMD etc, they cannot be used to compare areas but allow for comparisons over time within areas
National/ Corporate/ Local	National Integration Indicator 12
Integration Outcome	Outcome 3
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Area	14/15	15/16	Target	16/17					17/18	
				Q1	Q2	Q3	Q4	Total	Q1	Q2
Glasgow City	13,669	14,785	TBC	3852	3701	3557	3195	14,305		
Scotland	12,083	12,342	N/A	N/A	N/A	N/A	N/A	12,265		

Performance Trend

National integration indicator. Numbers fallen slightly over 2016/17 but remain above the Scottish average. Target to be confirmed.

Target/Ref	6. Readmission to hospital within 28 days
Purpose	Based on Acute hospital (SMR01) activity data, this rate is calculated from number of re-admissions to an acute hospital within 28 days of discharge per 1,000 admissions.
National/ Corporate/ Local	National Integration Indicator 14
Integration Outcome	Outcome 3
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Area	14/15	15/16	Target	16/17					17/18	
				Q1	Q2	Q3	Q4	Total	Q1	Q2
Glasgow City	91	97	TBC	103	107	101	92	101		
Scotland	96	96	N/A	N/A	N/A	N/A	N/A	99		

Performance Trend
National integration indicator. Rate increased for 2016/17 and remained slightly above the Scottish average. Target to be confirmed.

Indicator	7. Emergency Acute Bed Days for Older People (Aged 65+ and 75+)
Purpose	To monitor the extent to which older people are occupying acute beds after being admitted to hospital as emergencies. Partners are working together to reduce these over time, reducing unnecessary hospital stays and shifting the balance of care towards the community.
National/ Corporate/ Local	HSCP Local Indicator.
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Indicator	Target	2014/15	2015/16	2016/17	Jul 17	Aug 17	Sep 17	Year to date
i. 65+ Numbers	TBC	325,545	304,322	323,126	26,113	25,751	24,173	154,244
ii. 65+ Rates/10 00 pop	TBC	3913	3643	3870	313	308	289	1,847
i. 75+ Numbers	TBC	235,488	223,070	235,835	18,851	19,041	17,847	111,688
ii. 75+ Rates/10 00 pop	TBC	5930	5619	5990	479	484	453	2,837
Performance Trend								
Having been on a downward trend since 2010/11, there was an increase last year both for those aged 65+ and 75+. Year to date monthly averages slightly below 16/17 monthly averages for both age categories so far. All outstanding unscheduled care targets will be determined as part of the process of developing the Unscheduled Care Commissioning Plan.								

Target/Ref	8. Rate of emergency bed day per 100,000 population for adults.
-------------------	---

Purpose	To monitor the extent to which adults are occupying acute beds after being admitted to hospital as emergencies. Partners are working together to reduce these over time, reducing unnecessary hospital stays and shifting the balance of care towards the community
National/ Corporate/ Local	National Integration Indicator 13
Integration Outcome	Outcome 3
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Area	14/15	15/16	16/17					17/18	
			Q1	Q2	Q3	Q4	Total	Q1	Q2
Glasgow City	149,601	141,890	36,665	35,802	35,260	33,867	141,594		
Scotland	127,959	127,725	N/A	N/A	N/A	N/A	124,663		

Performance Trend
National integration indicator. Numbers have reduced over the last year but remain above the Scottish average. Target to be confirmed.

Target/Ref	9. Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency
Purpose	To monitor the costs associated with emergency care. The aim is to reduce this over time in line with emergency admissions.
National/ Corporate/ Local	National Integration Indicator 20
Integration Outcome	Outcome 9
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Area	14/15	15/16	Target	16/17					17/18	
				Q1	Q2	Q3	Q4	Total	Q1	Q2
Glasgow City	23%	25%	TBC	28%	27%	27%	25%	27%		
Scotland	24%	25%	N/A	N/A	N/A	N/A	N/A	25%		

Performance Trend

National integration indicator. Percentage has increased over the last year and is above the Scottish figure.

Delayed Discharges

Indicator	10. Total number of adults and older people breaching the 72 hour discharge target
Purpose	To monitor the extent to which adults and older people are being unnecessarily delayed in acute hospital beds, with the aim that these are reduced. The figures shown relate to the dates on which a census has been undertaken and are for a number of patient categories. The target for 2017/18 is to have a maximum of 20 delays over 72 hours at any given time during the year across these categories
National/ Corporate/ Local	Local HSCP Indicator
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

3 April 2017

CATEGORY	NE	NW	S	Total	Target
Over 65s classed as Adults with Incapacity (AWI) (Excluding Learning Disability and Mental Health)	0	2	0	2	N/A
Over 65s (Excluding AWI, Learning Disability and Mental Health)	12	7	5	24	N/A
Under 65s (Excluding Mental Health)	6	9	4	19	N/A
Total				45 (R)	20

5 June 2017

CATEGORY	NE	NW	S	Total	Target
Over 65s classed as Adults with Incapacity (AWI) (Excluding Learning Disability and Mental Health)	1	1	1	3	N/A
Over 65s (Excluding AWI, Learning Disability and Mental Health)	7	4	8	19	N/A
Under 65s (Excluding Mental Health)	3	4	4	11	N/A
Total				33 (R)	20

3 July 2017

CATEGORY	NE	NW	S	Total	Target
Over 65s classed as Adults with Incapacity (AWI) (Excluding Learning Disability and Mental Health)	0	4	3	7	N/A
Over 65s (Excluding AWI, Learning Disability and Mental Health)	4	6	6	16	N/A
Under 65s (Excluding Mental Health)	5	9	6	20	N/A
Total				43 (R)	20

7 Aug 2017

CATEGORY	NE	NW	S	Total	Target
Over 65s classed as Adults with Incapacity (AWI) (Excluding Learning Disability and Mental Health)	0	4	2	6	N/A
Over 65s (Excluding AWI, Learning Disability and Mental Health)	1	9	6	16	N/A
Under 65s (Excluding Mental Health)	8	12	4	24	N/A
Total				46 (R)	20

4 Sep 2017

CATEGORY	NE	NW	S	Total	Target
Over 65s classed as Adults with Incapacity (AWI) (Excluding Learning Disability and Mental Health)	0	2	0	2	N/A
Over 65s (Excluding AWI, Learning Disability and Mental Health)	7	7	9	23	N/A
Under 65s (Excluding Mental Health)	6	13	6	25	N/A
Total				50 (R)	20

2 Oct 2017

CATEGORY	NE	NW	S	Total	Target
Over 65s classed as Adults with Incapacity (AWI) (Excluding Learning Disability and Mental Health)	0	0	2	2	N/A
Over 65s (Excluding AWI, Learning Disability and Mental Health)	2	5	5	12	N/A
Under 65s (Excluding Mental Health)	9	12	5	26	N/A
Total				40 (R)	20

Performance Trend

Numbers vary across localities and over time. The total number of delays have risen from the last reported figure in June.

Actions to Improve Performance

An improvement programme has been commissioned through the Older People's Core Leadership to provide further scrutiny to these delays. This is in addition to the weekly operational meeting and locality scrutiny throughout the week

June reflected the lowest point during the last two quarters, with numbers increasing since, hence the variance of more than 10% between June 2017 and October 2017. However, October did represent a reduced level following significant scrutiny and the improvement programme, along with additional scrutiny will aim to continue this reduction.

Timescale for Improvement

Further scrutiny will be immediately established as described above and sustainable improvements will be sought from March 2018. Performance is constantly monitored to ensure performance is maintained as close as possible to the target.

Bed Days lost to Delayed Discharge

Indicator	11. Total number of Acute Bed Days Lost to Delayed Discharge (Older People 65 +)
Purpose	To monitor the extent to which acute beds are occupied unnecessarily by people medically fit for discharge, with the aim being that these are reduced. This relates to beds occupied by older people only and includes those occupied by older people who are classified as AWI under the requirements of the Adults with Incapacity Act 2000.
National/ Corporate/ Local	Health Board
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

AREA	14/15 Total	15/16 Total	16/17 Total	Target	Jul 17	Aug 17	Sep 17	Year to Date
HSCP	38,152	21,288	15,557	TBC	930	901	979	5233
NE	8048	5777	4058	N/A	182	235	289	1361
NW	15,884	8034	6406	N/A	403	336	299	1891
S	14,220	7477	5093	N/A	345	330	391	1981
Performance Trend								
<p>For the city as a whole, there was a significant reduction in 2015/16. During 2016/17, this continued in all localities, with a further reduction of 26% over the course of the year, which was contributed to by the reclassification of AWI beds (see indicator 12 below). 2017/18 monthly average also below 16/17 monthly average so far.</p> <p>All outstanding unscheduled care targets will be determined as part of the process of developing the Unscheduled Care Commissioning Plan.</p>								

Indicator	12. Total number of Acute Bed Days lost to Delayed Discharge for Adults with Incapacity (Older People 65+).
Purpose	To monitor the extent to which acute beds are occupied unnecessarily by older people who are medically fit for discharge and who are classified as Adults with Incapacity (AWI) under the terms of the Adults with Incapacity Act 2000. This indicator is a subset of indicator 11 above.
National/ Corporate/ Local	Health Board Local Indicator
Integration Outcome	Outcome 9
HSCP Leads	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

AREA	14/15 Total	15/16 Total	16/17 Total	Target	Jul 17	Aug 17	Sep 17	16/17
HSCP	8987	10,715	6050	TBC	282	132	135	1094
NE	1971	3590	1647	N/A	58	25	42	212
NW	3806	3558	2995	N/A	139	41	43	496
S	3210	3910	1408	N/A	85	66	50	386
Performance Trend								
<p>Variations across localities, though all experienced reductions in 2016/17. The total for 2016/17 fell by 43% since 2015/16. This has been contributed to by the fact that the AWI beds which the HSCP commission in community settings at Darnley and Quayside were reclassified in line with national guidance and are no longer included. Further reductions are occurring in 2017/18 with monthly average below 16/17 monthly average so far.</p> <p>All outstanding unscheduled care targets will be determined as part of the process of developing the Unscheduled Care Commissioning Plan.</p>								

Target/Ref	13. Number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population
Purpose	The number of bed days due to delay discharge that have been recorded for people aged 75+ resident within the Local Authority area, per 1,000 population in the area. The aim is that these are reduced.
National/ Corporate/ Local	National Integration Indicator 19
Integration Outcome	Outcome 3
HSCP Lead	Stephen Fitzpatrick, Head of Strategy and Operations (Older People)

Area	14/15	15/16	Target	16/17					17/18	
				Q1	Q2	Q3	Q4	Total	Q1	Q2
Glasgow City	1031	627	TBC	172	103	103	86	464	84	
Scotland	1044	915	N/A	N/A	N/A	N/A	N/A	842		

Performance Trend
New indicator. Numbers have fallen over the last year and remain below the Scottish average.