
To: Renfrewshire Integration Joint Board

On: 22 March 2019

Report by: Chief Officer

Subject: Performance Management Report: Unscheduled Care

1. Context

- 1.1 Performance information is presented at all Renfrewshire IJB meetings. This report covers unscheduled care with particular focus on the six Scottish Government Ministerial Strategy Group (MSG) targets and performance specifically related to older people aged 65+.
- 1.2 Unscheduled care is the unplanned treatment and care of a patient usually as a result of an emergency or urgent event. Most of the focus on unscheduled care is on accident and emergency attendances, and emergency admissions to hospital. Unscheduled care is an important area of focus for Renfrewshire HSCP, working in partnership with NHSGGC Acute and local primary care services. The IJB has had a 'set aside' budget for commissioning unscheduled care since 2016. That budget has had no scope to be used differently. That may change based on how the MSG led integration review proposals are implemented.
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2. Recommendation

It is recommended the IJB:

- Note the unscheduled care commissioning intentions for Renfrewshire HSCP;
 - Agree the Ministerial Strategy Group (MSG) targets for Renfrewshire HSCP for 2019/20; and
 - Note the additional data available for Renfrewshire patients aged over 65.
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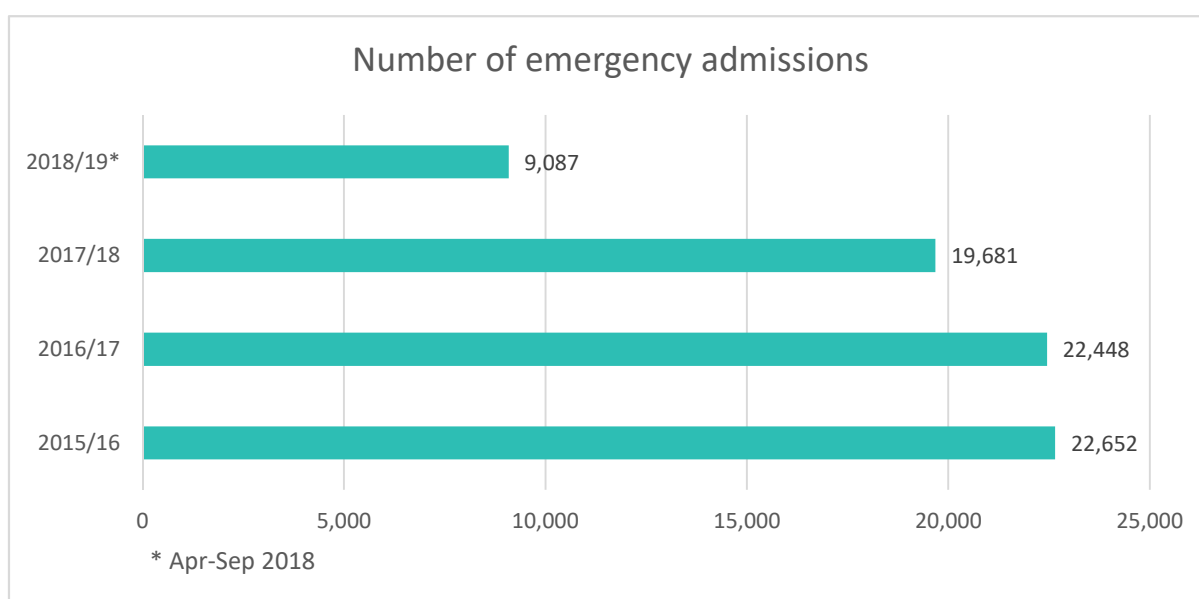
3. Scottish Government Ministerial Strategy Group (MSG) Targets

- 3.1 We have focused our attention in the last year on tracking progress and working to achieve the six MSG targets as part of our overall performance management process (please see Appendix 1). The targets focus on:

- Emergency admissions
- Unplanned bed days
- A&E attendances
- Delayed discharge bed days (18+)
- Percentage of last 6 months of life spent in the community (all ages)
- Proportion of 65+ population living at home (supported and unsupported)

The targets submitted to MSG for 2019/20 are for those aged over 18 only.

3.2 Emergency admissions



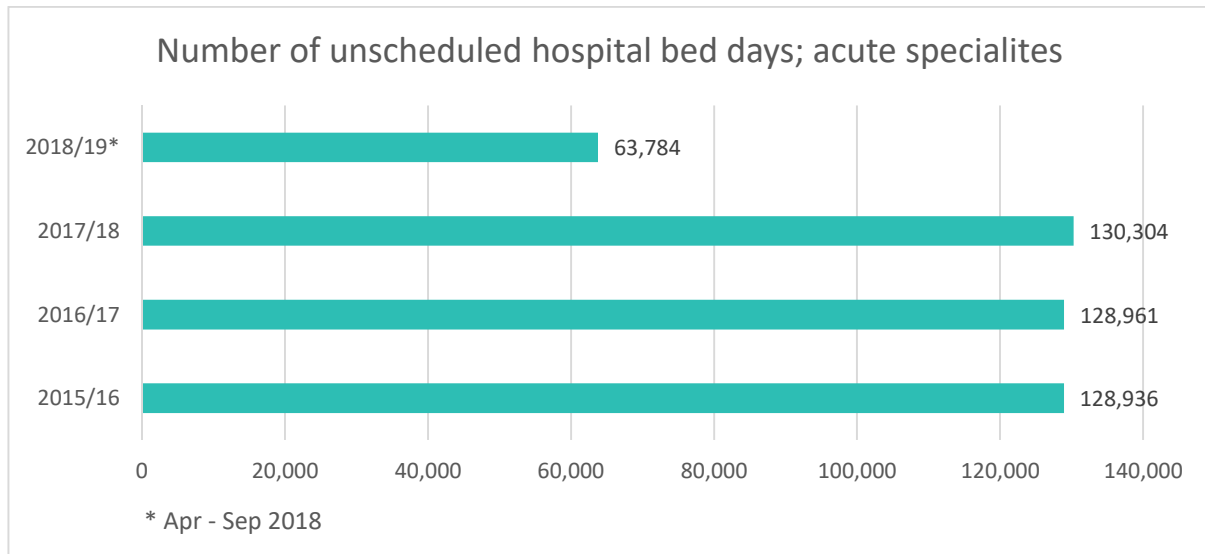
Target for 2018/19: 21,759

Proposed target for 2019/20: 19,302 (age 18+ 17,502)

Due to a change in the counting method and a significant focus on reducing emergency admissions, we have set a challenging target of 19,302 for 2019/20. This is a reduction of over 11% on the 2018/19 target.

3.3

Unscheduled hospital bed days; acute specialties



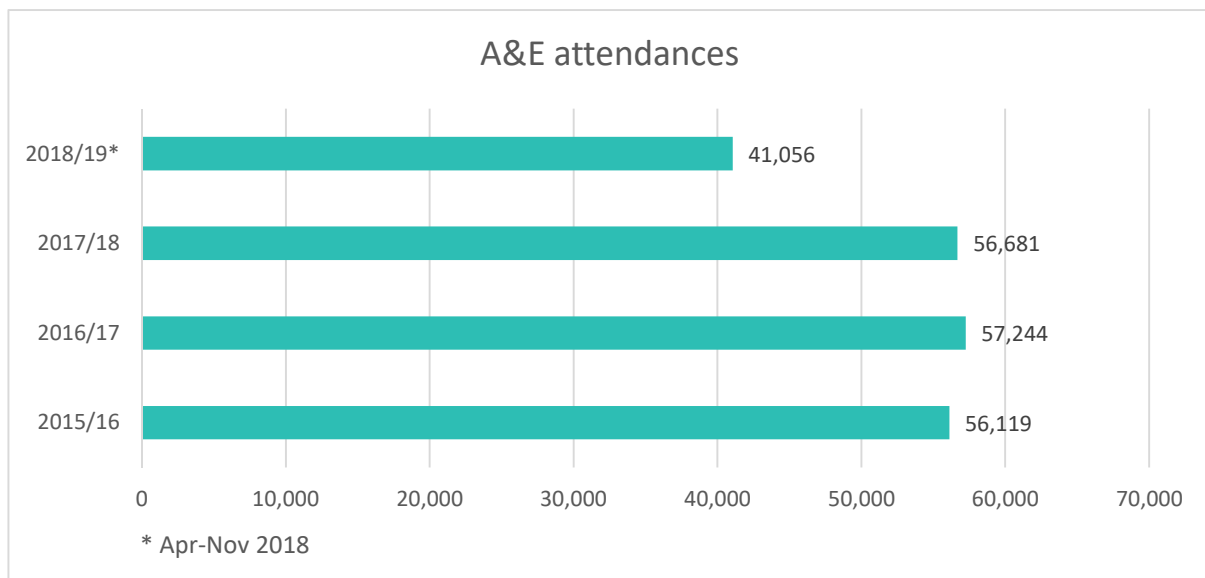
Target for 2018/19: 123,820

Proposed target for 2019/20: 126,477 (age 18+ 123,976)

Based on trends including the first six months of 2018/19, 126,477 is a realistic and achievable target without any additional resources to invest in community services.

3.4

A&E attendances



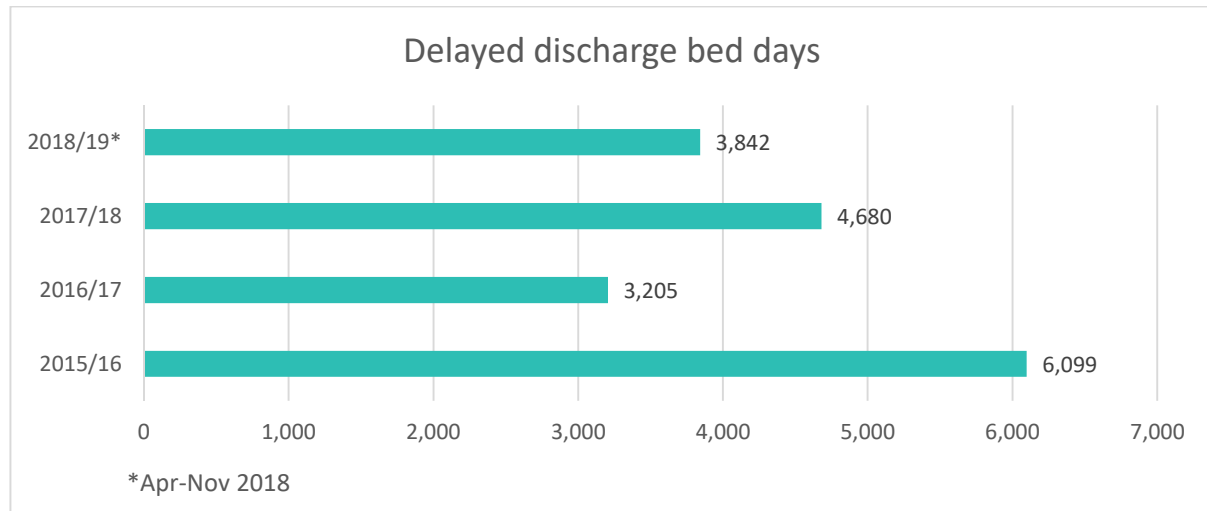
Target for 2018/19: 56,119

Proposed target for 2019/20: 56,119 (age 18+ 45,123)

A&E attendance activity across Scotland has grown in the past three years, however we have set a challenging target of 56,119 to try to return to 2015/16 levels of attendance. We are optimistic that our campaign to

support people to use the right service, and our focus on reducing frequent attenders at A&E, will help us achieve this target.

3.5 Delayed discharge bed days (18+)



Target for 2018/19: 3,200

Proposed target for 2019/20: 4,501

Although the target for 2019/20 is higher than the previous year, this is realistic based on the current six month position and still 26% below the figure for 2015/16.

3.6 Percentage of last six months of life spent in the community (all ages)

	2015/16	2016/17	2017/18
Renfrewshire	87.4%	87.0%	88.5%
Scotland	87.0%	87.0%	88.0%

Over the last four year period, the percentage of people spending the last six months of life in a community setting has been consistent, averaging at 87.6%. Our target for 2018/19 and 2019/20 is to maintain the rate of 87.4% from the baseline year of 2015/16.

3.7 Proportion of 65+ population living at home (supported and unsupported)

In 2015/16 (for those aged 75+), 81.6% lived at home unsupported (possibly with unpaid carers); 9.5% were supported to stay in their own homes (i.e. received care at home services); 7.0% resided in a care home; and 1.9% were in hospital. In three years, there has been an increase in over 75s living at home (supported) and a reduction in the percentage living in a care home.

	Setting	2015-16	2016-17	2017-18
Renfrewshire Aged 75+	Home (unsupported)	81.4%	82.4%	82.6%
	Home (supported)	9.5%	8.7%	8.6%
	Care Home	7.2%	7.0%	6.9%
	Hospice/Palliative Care Unit	0.0%	0.0%	0.0%
	Community Hospital	0.0%	0.0%	0.0%
	Large Hospital	1.9%	1.8%	1.8%

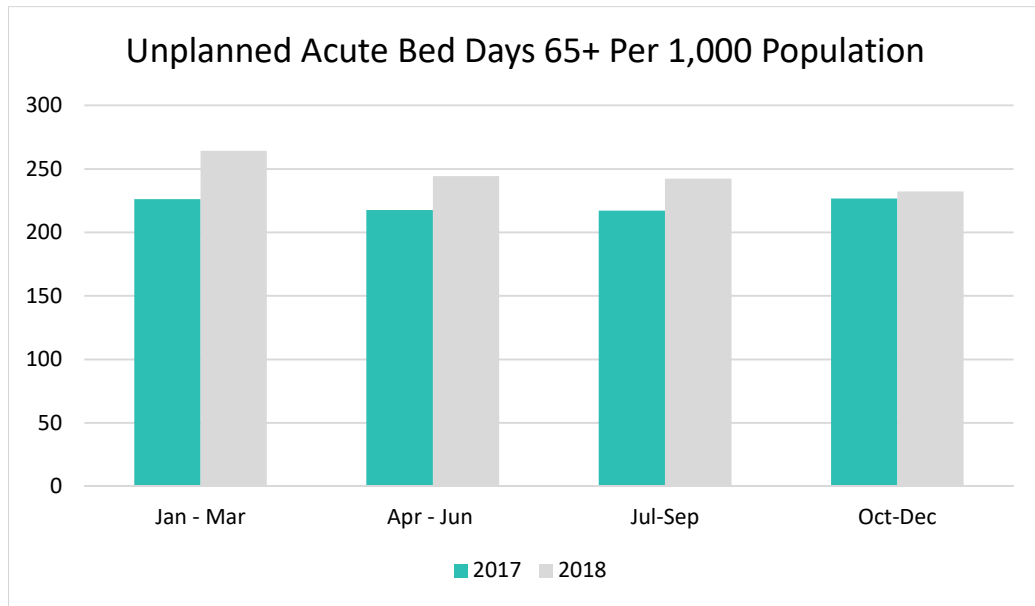
3.8 To reduce our reliance on unscheduled care we have prioritised the following activities:

- A social media and communications plan to educate our population to use the most appropriate health and care services
- Increasing the use of consistent Anticipatory Care Plans (ACPs)
- Agreeing service improvements in specialty areas where usage of unscheduled bed days is high and sharing these across the system
- Supporting care homes to reduce avoidable admissions to hospital by targeting work with homes that have higher admission rates to understand what is driving this. In addition, encouraging the use of ACPs and providing support to homes through our Care Home Liaison Nurses
- Rolling out the 'red bag' initiative in all nursing homes. The red bag contains important information about a care home resident's health in one place so they can receive quick and effective treatment by ambulance and hospital staff, with the aim of reducing residents' length of stay in hospital
- Focusing attention on frequent users at Emergency Departments (ED) with GPs to try a preventative approach with these patients
- Use of a common frailty tool to be used across the NHS Board area to identify people at risk of hospital admission and support them and their families to manage their conditions.
- Work is ongoing to reduce delayed discharges in Renfrewshire. In a small number of cases there have been difficulties with Care at Home provision due to levels of demand in particular areas, but steps are being taken to address this. The remainder are awaiting care home places and either in the process of assessment or looking at their second or third choices due to unavailability of their first choice option.

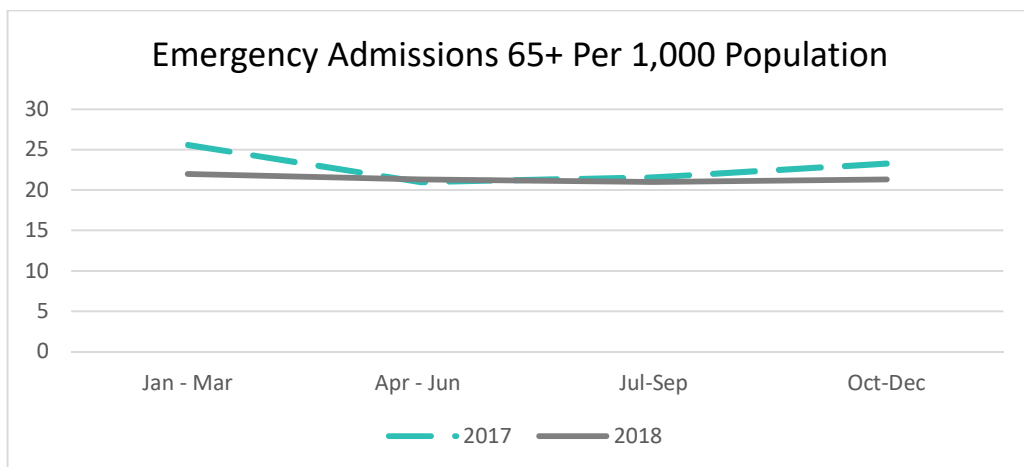
4. **Unscheduled Care Indicators for those aged 65+**

As an HSCP, we monitor closely unscheduled care activity for those aged over 65.

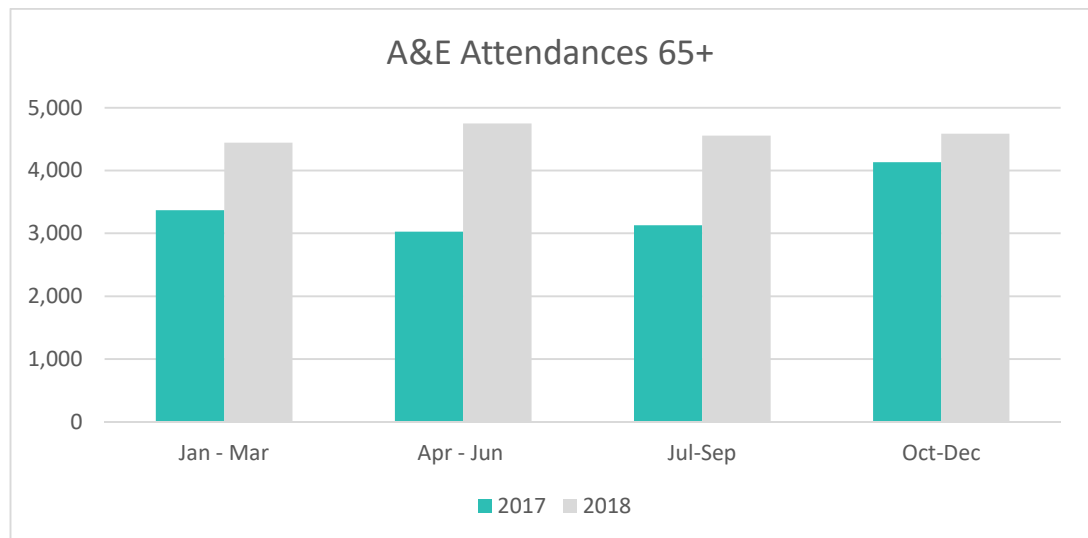
2018 has seen an increase in unplanned acute bed days for those aged 65+ per 1,000 population, however levels are now similar to 2017 at quarter 3 (Oct-Dec 2018).



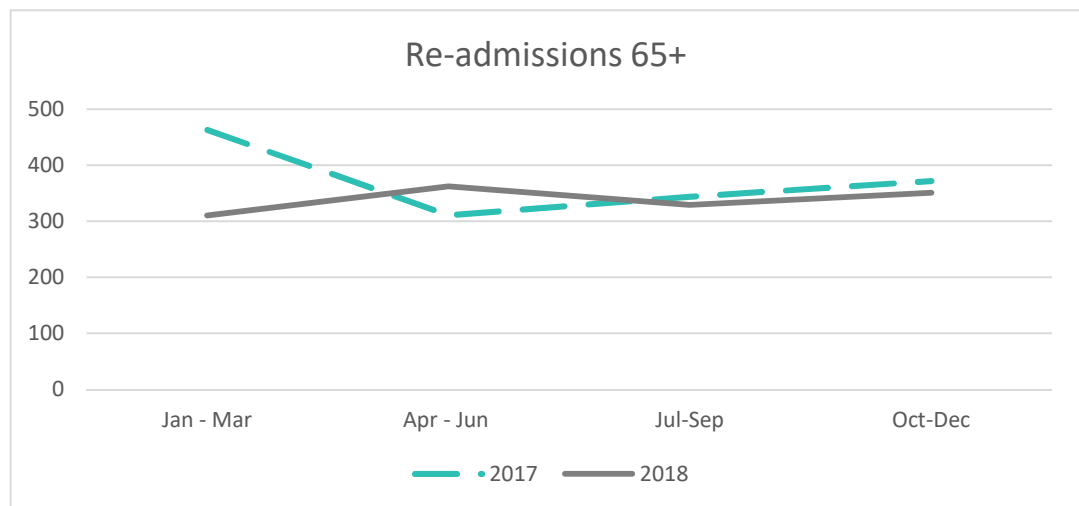
Emergency admissions for those aged 65+ per 1,000 population show a slight improvement in 2018 and have remained fairly static throughout the year.



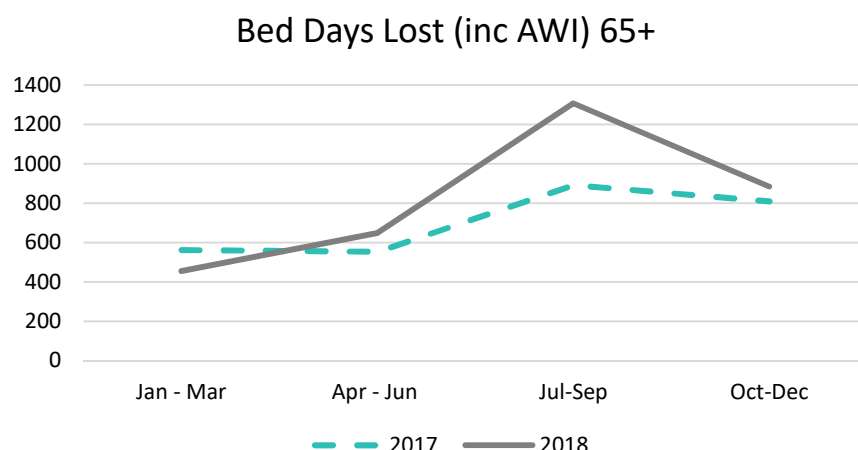
A&E attendances have seen an increase year on year, with levels reducing slightly between July and September 2018, and remaining stable in quarter 3 (October-December 2018).



2017 saw a dip in readmissions to hospital for those aged over 65 in Renfrewshire. The rate has remained similar throughout 2018 with a slight increase at quarter 3 (October-December).



Bed days lost due to delayed discharge (inc AWI), show an upward trend in quarter 2 (July-September) in both 2017 and 2018, with numbers reducing in quarter 3.



Implications of the Report

1. **Financial** – None
2. **HR & Organisational Development** – None
3. **Community Planning** – None
4. **Legal** – Meets the obligations under clause 4/4 of the Integration Scheme.
5. **Property/Assets** – None
6. **Information Technology** – None
7. **Equality & Human Rights** – The recommendations contained within this report have been assessed in relation to their impact on equalities and human rights. No negative impacts on equality groups or potential for infringement have been identified arising from the recommendations contained in the report.
8. **Health & Safety** – None
9. **Procurement** – None
10. **Risk** – None
11. **Privacy Impact** – None

List of Background Papers – None.

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MSG 2019/20 Objectives

Health and Social Care Partnership: Renfrewshire

Age Group for indicators 1 to 3: 18+

	1. Emergency admissions				2. Unplanned bed days				
Objective	Baseline year	Baseline total	% change	Expected 2019/20 total	Acute	Baseline year	Baseline total	% change	Expected 2019/20 total
	2015/16	19,534	-10.4	17,502		2015/16	125,482	-1.2	123,976
					Geriatric Long Stay	Baseline year	Baseline total	% change	Expected 2019/20 total
						2015/16	6,932	-35.1	4,499
					Mental Health	Baseline year	Baseline total	% change	Expected 2019/20 total
						2015/16	49,296	-2.2	48,211
How will it be achieved	<div>* Bespoke GP section on HSCP website with referral information for Hot Clinics and other community support services</div> <div>* Advising Acute Consultants of services available in the community as alternatives to admission</div> <div>* Standardised Anticipatory Care Planning</div> <div>* In reach support for chronic conditions e.g. COPD</div> <div>* Respiratory Pathways Group is improving pathways and processes to reduce COPD admissions and unplanned bed days</div> <div>* Boardwide service re-design programme underway focusing on six areas with Renfrewshire leading on Heart Failure services</div> <div>* Implementation of red bag scheme to support quicker discharge and improved hospital experience for care home residents</div> <div>* Frailty identification and pathway management</div> <div>* Local falls group has worked closely with Scottish Ambulance Service to implement pathway. Shadowing and training ongoing.</div>								
Notes	Early data for 2018/19 shows a small reduction in admissions. Until validated, we have been realistic in our trajectory. Maintaining this level of performance will be challenging with continued budget reductions.								

	3. A&E attendances				4. Delayed discharge bed days (18+)				
Objective	Baseline year	Baseline total	% change	Expected 2019/20 total	All reasons	Baseline year	Baseline total	% change	Expected 2019/20 total
	2015/16	45,123	0	45,123		2015/16	6,099	-26.2	4,501
					H&SC/patient and family related	Baseline year	Baseline total	% change	Expected 2019/20 total
					Code 9	Baseline year	Baseline total	% change	Expected 2019/20 total
How will it be achieved	* Use social media * Continue to publicise and promote Know Who To Turn To campaign * Boardwide advertising campaign to reduce inappropriate attendance at A&E * A&E Survey carried out and Action Plan is being prepared * Identify frequent attenders by GP practice to enable the primary care team to work proactively with these patients.				* Additional investment in Care at Home services to address increase in demand * Access issue to AWI beds has been resolved * Rehabilitation and Enablement Services Team * Care at Home Team				
Notes	Working with Acute colleagues, we aim to return to 2015/16 A&E attendance levels in 2019/20.				Early 2018/19 data shows an increase in delayed discharges. Our aim is to see a reduction in 2019/20 with a target of 4,500.				

	5. Percentage of last 6 months of life spent in				6. Proportion of 65+ population living at home			
Objective	Baseline year	Baseline percentage	Percentage point change	Expected 2019/20 %	Baseline year	Baseline percentage	Percentage point change	Expected 2019/20 %
	2015/16	87.4%	0	87.4%	2015/16	95.3%	0	95.3%
How will it be achieved	Palliative Care Action Plan				Market Position Statement in place for the care home sector to influence the commissioning of services and increase specialised provision.			
Notes								