

Dumfries and Galloway Health and Social Care Partnership



MSG Improvement Objectives – DRAFT Proposal for 2019/20

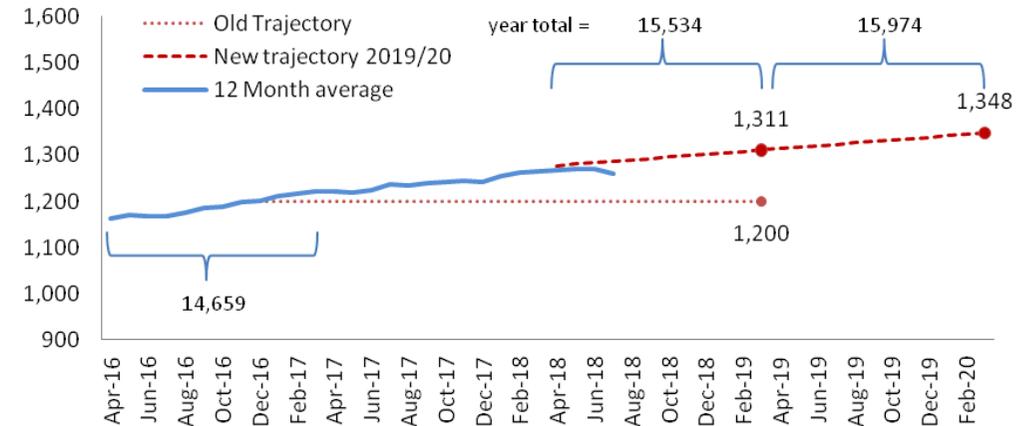
Based on ISD data v1.12

December 2018

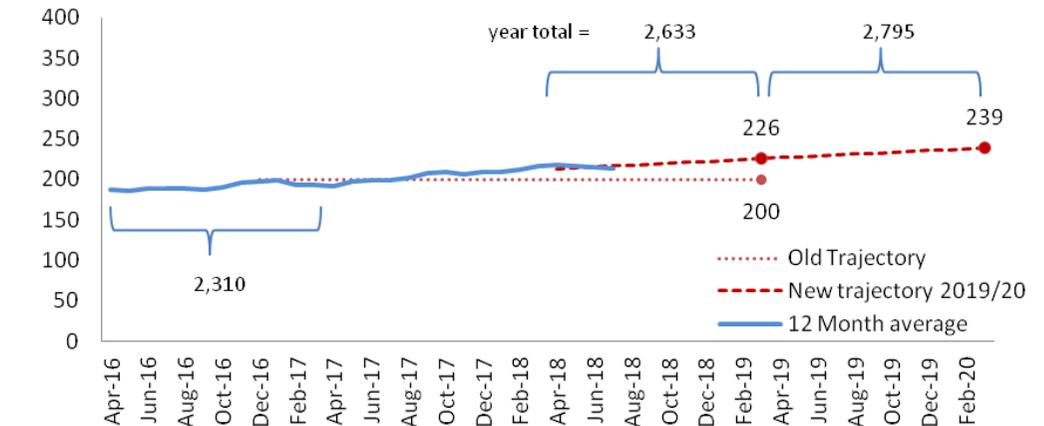
1. Unscheduled admissions; (continuous inpatient stays)

Objective	Baseline year	Baseline total	% change	Expected total
	People aged 18 or older	2016/17	14,659	+6.0%
	2016/17	14,659	+9.0%	2019/20: 15,974
People aged under 18	2016/17	2,310	+14.0%	2018/19: 2,633
	2016/17	2,310	+21.0%	2019/20: 2,795
How will it be achieved	Emergency Department referring to STARS to prevent admission, Nithsdale in Partnership community referrals, Rapid assessment test of change (by ANPs) in combined assessment unit, trolleys to chairs to combat 'pj paralysis', Frailty at the Front Door programme, New IT allows CAU to flex to accommodate ED pressures, Anticipatory Care Planning Partnership working to prevent social admissions, new community respiratory nurse.			
Notes	Revised trajectories have been proposed for 2018/19 in addition to 2019/20. <ul style="list-style-type: none"> Suggest that for people aged 18 or over, growth be checked at +3% per year. This equates to a total for 2018/19 of 15,538 admissions and for 2019/20 of 15,978 admissions. Suggest that for people under 18, growth be checked at +7% per year. This equates to a total for 2018/19 of 2,633 admissions and 2,795 for 2019/20. 			

People aged 18 or older



People aged under 18

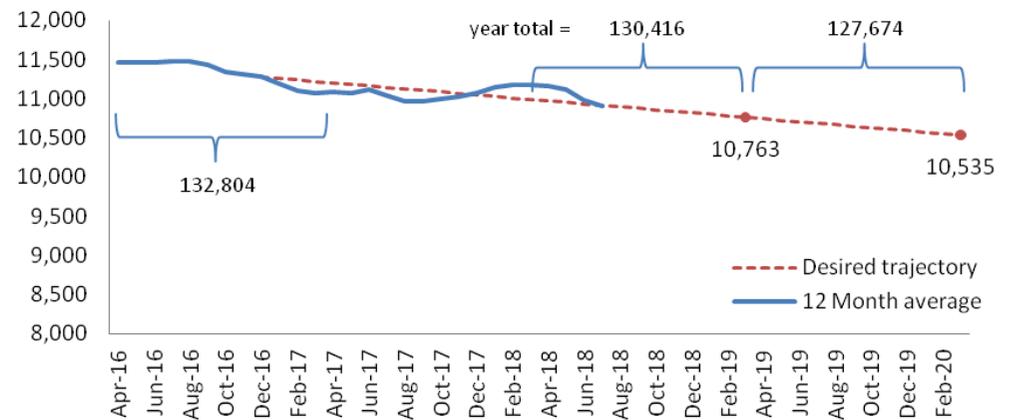


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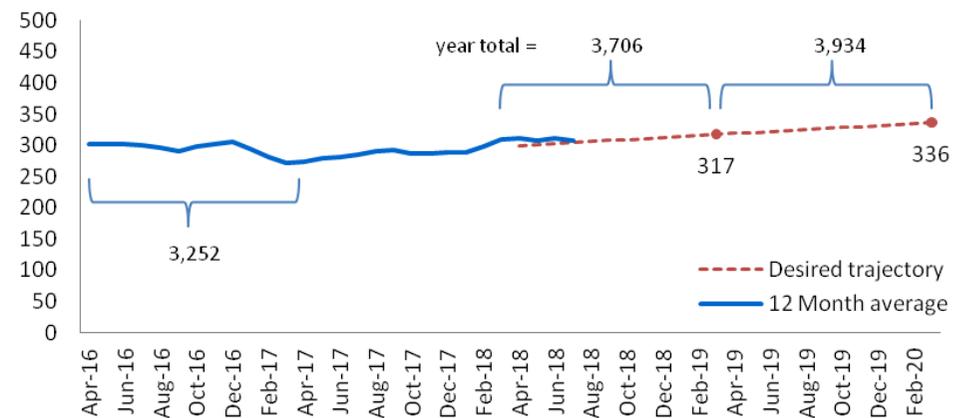
2a. Unscheduled bed days; acute specialties (continuous inpatient stays)

Objective	Baseline year	Baseline total	% change	Expected total 2019/20
	People aged 18 or older			
	2016/17	132,804	-3.9%	127,674
	People aged under 18			
2016/17	3,252	+21.0%	3,934	
How will it be achieved	Dynamic Daily Discharge, Locality Flow coordinators, Day of Care audits, Week of Care in Cottage Hospitals, Improved middle grade staffing rotas, STARS and Nithsdale in Partnership re-abling in the community Anticipatory Care Planning, 6 Essential Actions programme, Frailty at the Front Door programme, testing new discharge lounge model			
Notes	<p>Overall, bed days for unscheduled admissions have been falling. This pattern is different for people under 18 compared to those over 18.</p> <ul style="list-style-type: none"> • Unscheduled bed days for people aged 18 or older have been falling, and are projected to fall by 1.8% per year. Suggest continue to follow this 2% reduction per year. This equates to a total for 2019/20 of 127,674 bed days. • Unscheduled bed days for people under 18 have been rising and are projected to equate to 4,025 in 2019/20. Suggest growth be checked at +7% per year. This equates to a total for 2019/20 of 3,934 bed days. 			

People aged 18 or older



People aged under 18

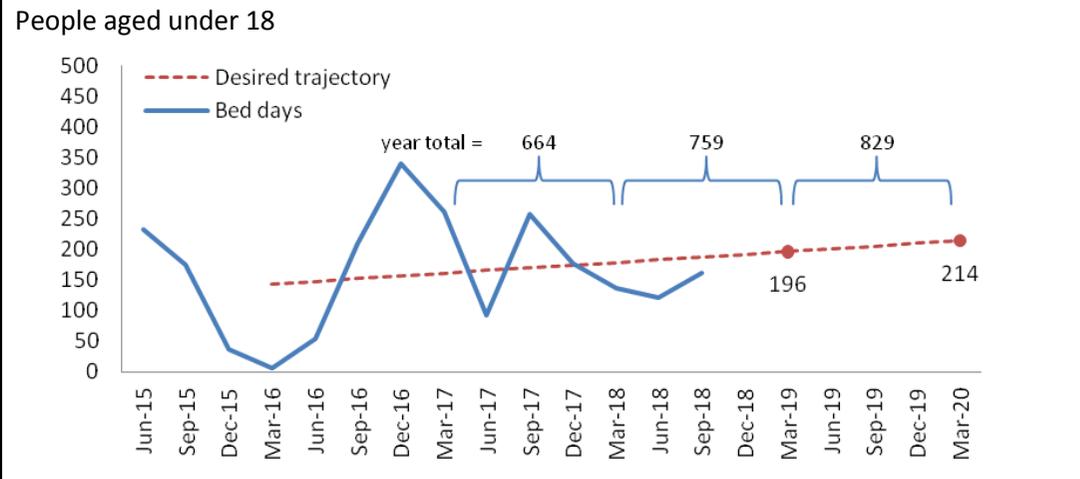
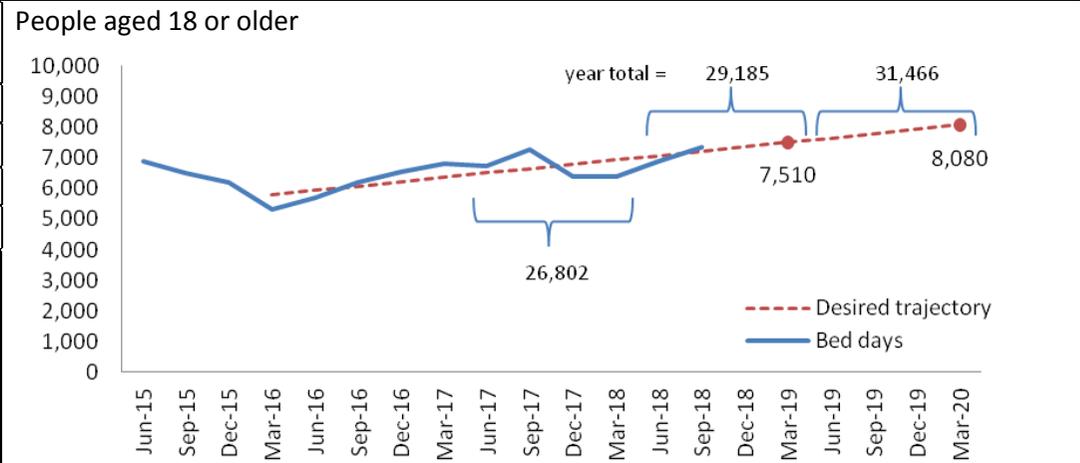


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2b. Unscheduled bed days; geriatric long stay [NOT APPLICABLE]

2c. Unscheduled bed days; mental health specialties ***NEW***

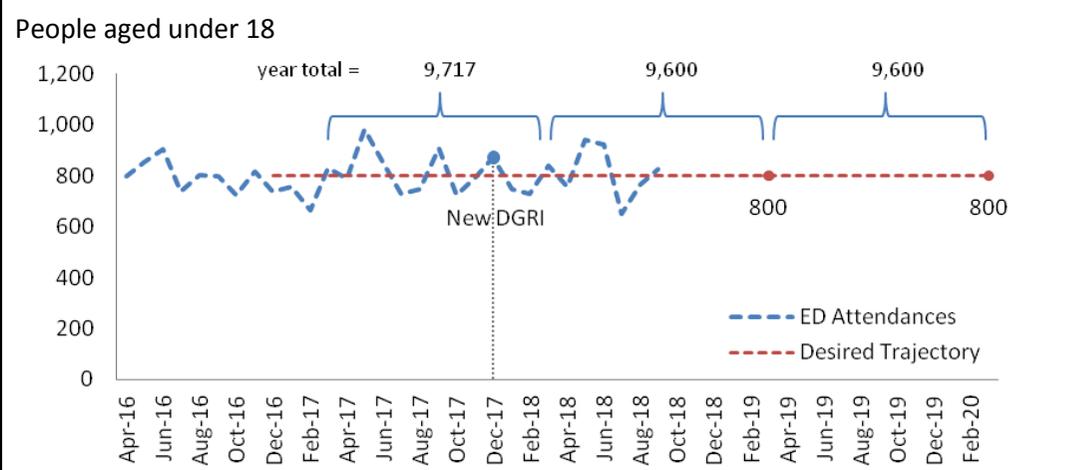
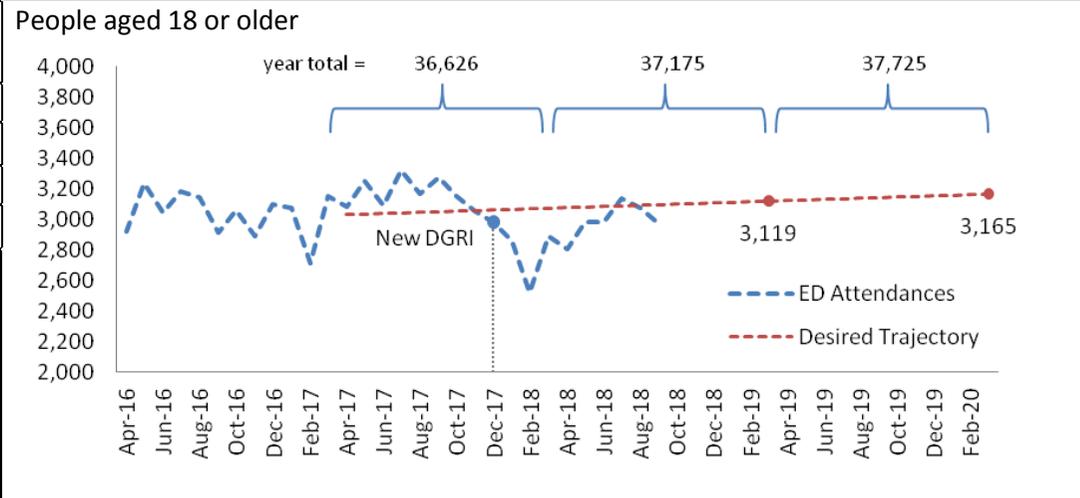
Objective	Baseline year	Baseline total	% change	Expected total 2019/20
	People aged 18 or older			
	2017/18	26,802	+17.4%	31,466
	People aged under 18			
2017/18	664	24.9%	829	
How will it be achieved	Bed modelling of Midpark hospital, Community mental health workers in GP practice setting			
Notes	<p>Dumfries and Galloway has not previously set an objective for unscheduled mental health bed days.</p> <ul style="list-style-type: none"> • Unscheduled bed days for people aged 18 or older have been rising, and are projected to equate to a total for 2019/20 of 31,466 bed days. • Unscheduled bed days for people under 18 are more unpredictable and the trend line drawn through historic activity is a very poor fit. If activity did follow the historic trend we might expect to see a total of 829 bed days 2019/20. 			



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3. Emergency Department Attendances

Objective	Baseline year	Baseline total	% change	Expected total 2019/20
	People aged 18 or older			
	2017/18	36,626	+3.0%	37,725
	People aged under 18			
2017/18	9,717	-1.2%	9,600	
How will it be achieved	Extended GP practice support teams, ANPs, Mental Health, Prescribing Support, Physios. Review of Out of Hours services. Meet ED campaign, and social media about ED pressures. Anticipatory Care Planning Flu vaccine programme, Community infection control support, Vital Signs training in nursing homes Frailty at the front door initiative			
Notes	<p>Overall, emergency department attendances have been rising. However, the move to the new DGRI has included a different arrangement for managing people at the front door.</p> <ul style="list-style-type: none"> Patterns of attendance to the emergency department for people aged 18 or older have been rising since February 2018. It is difficult to ascertain how this pattern will settle down, but the attendance pattern for Scotland is +1.5% per year. Suggest aim to check growth to 1.5% per year. This equates to a total for 2019/20 of 37,725 attendances. Emergency department attendances for people aged under 18 have been relatively static at about 9,600 per year. The move the new DGRI appears to have had little impact on pattern of attendance. Suggest objective should be to maintain or reduce the current activity at a total for 2019/20 of 9,600 attendances. 			



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4. Delayed discharge bed days (Aged 18+ only)

Objective	Baseline year	Baseline total	% change	Expected total 2018/19 2019/20
	People aged 18 or older			
	2016/17	12,815	-5.4%	12,119
	2016/17	12,815	-9.8%	11,556

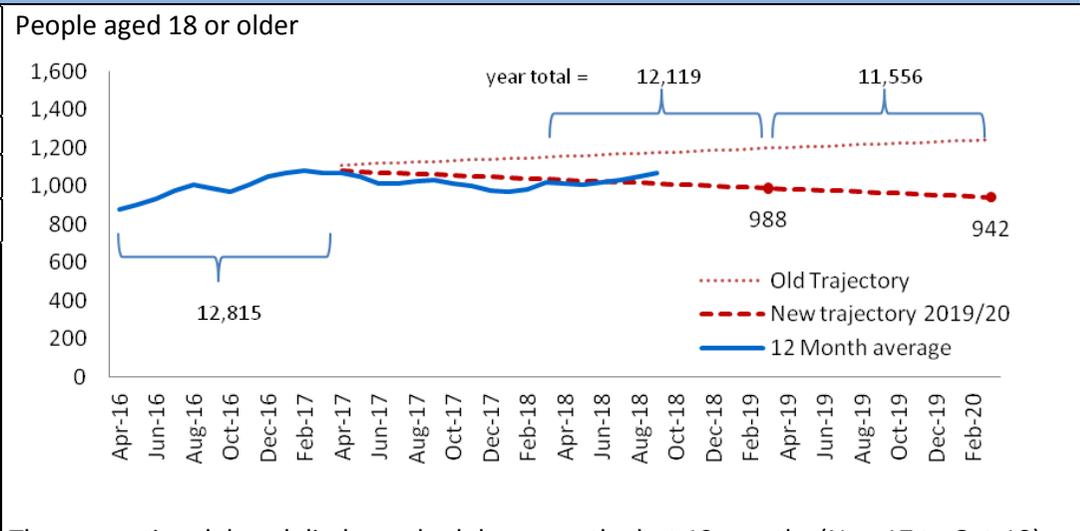
How will it be achieved

Dynamic Daily Discharge, 6 Essential Actions Programme, Locality Flow coordinators, Day of Care audits, Week of Care in Cottage Hospitals, Improved middle grade staffing rotas, Anticipatory Care Planning, Promotion of guardianship and power of attorney, testing new discharge lounge model

Notes

The target for delayed discharge bed days is currently only reported for people aged 18 and older. The Integration Joint Board agreed to set a stretch target for delayed bed days, following a sustained period of meeting the previous target.

- Suggest the current stretch target is extended on the same trajectory until March 2020. This equates to a total for 2019/20 of 11,556 delayed discharge bed days.
- Note that delayed discharge bed days have risen in June and July. November 2018 day of care audit showed proportion of people not meeting criteria has fallen to 14% in DGRI, and has fallen to 34% in cottage hospitals.



The proportion delayed discharge bed days over the last 12 months (Nov-17 to Oct-18) by location:

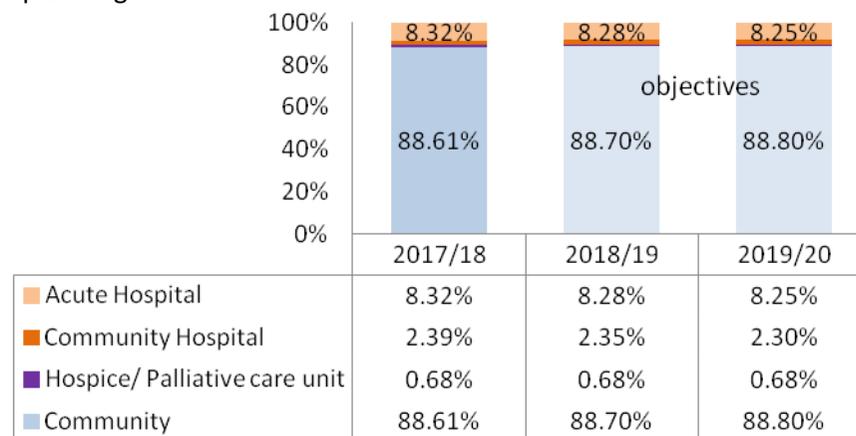
	DGRI	Cottage Hospitals	Midpark
Complex delay	9%	59%	32%
Standard delay	4%	79%	17%
Both	5%	76%	19%

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5. Percentage of last six months of life by setting (all ages)

Objective	Baseline year	Baseline total	% change	Expected total
	Community setting			
	2016/17	88.61%	+1.2%	2018/19: 88.7%
	2016/17	88.61%	+1.3%	2019/20: 88.8%
	Acute hospital setting			
	2016/17	9.11%	-9.1%	2018/19: 8.28%
	2016/17	9.11%	-9.4%	2019/20: 8.25%
How will it be achieved	Recruitment to new palliative care consultant with community model, New palliative care strategy under development, 23 month scoping project in partnership with Macmillan cancer support, Anticipatory Care Planning			
Notes	<p>The partnership is interested not only in the time people spend in the last 6 months of life in community settings. We are also interested in the amount of time spent in large acute hospital settings.</p> <ul style="list-style-type: none"> Propose to continue to focus on maintaining or exceeding the best performance of the last 3 years, increasing time in community settings and decreasing time spent in acute hospital. This equates to meeting or increasing 88.61% of people's time spent in the community and meeting or decreasing 8.3% of people's time spent in large acute hospitals. 			

People all ages



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6. Balance of care: Percentage of population in community or institutional settings (Aged 65+)

Objective	Baseline year	Baseline total	% change	Expected total 2018/19 2019/20
	Community supported or unsupported			
	2016/17	96.32%	+0.03%	96.41%
	2016/17	96.32%	+0.13%	96.42%
	Acute hospital setting			
2016/17	0.79%	-5.17%	0.75%	
2016/17	0.79%	-6.43%	0.74%	
How will it be achieved	Extended GP practice support teams, ANPs, Mental Health, Prescribing Support, Physios. STARS and Nithsdale in Partnership re-abling in the community, SAS falls initiative, Telecare/TEC programme development, SDS training, Supporting Carers through Anticipatory Care Planning			
Notes	<p>It is difficult to calculate the balance of care between institutional settings and being unsupported in the community.</p> <p>There is very little change seen from 2016/17 to 2017/18p. However, figures for people aged 65 and older show that time spent in acute hospitals has reduced modestly.</p> <p>Propose to continue to focus on maintaining or exceeding the best performance of the last 3 years.</p> <ul style="list-style-type: none"> • This equates to meeting or increasing 96.41% of people aged 65 or older's time spent in the community supported or unsupported • And meeting or decreasing 0.76% of people aged 65 or older's time spent in acute hospital settings. 			

People aged 65 or older

