NHS
Eileanan Siar
Western Isles

Whole System Intelligence Report

Information Briefing in support of CRAG Meeting 22nd August 2024

15th August 2024

Contents

Background

As part of the Scottish Governments renewed focus on the area of 'Discharge without Delay' (DWD) via the Collaborative Response and Assurance Group (CRAG) Health Boards have been set new reduction targets to achieve a maximum of 34.6 delays per 100,00 population. In the Western Isles this will involve delivering a 53% reduction on baseline numbers to reach a maximum of 7 delayed discharges.

Recognising the complexity of this persistent issue across Health Boards the CRAG have stressed the importance of a whole system approach. Accordingly, the intelligence provided in this report seeks to share information not only on delayed discharges itself but on key areas that make up the whole patient journey from factors involved at pre-admission to those affecting patient flow upon admission through to the discharge planning process.

The data within these sections is drawn from a mix of local systems to give granularity of intelligence on local system flow and key national dashboards to provide benchmarked comparisons. In particular some intelligence is drawn from the [Scottish Governments Whole Systems Dashboard](#).

Purpose

The information shared in this report is intended to provide both a snapshot of latest position with respect areas identified above but to form basis of agreement on routine operational intelligence reporting going forward. This will take into account a balance of the need for comprehensive intelligence on whole system flow with the operational need for sufficient data to monitor and effect timely actions.

Existing Reporting

Below is provided information taken from existing reporting both national and local that relate either specifically to Delayed Discharges or the broader area of whole system patient flow.

Delayed Discharges (DD) Reporting

Below are the current routine reports national and local specifically produced relating to Delayed Discharge information.

Scottish Government HB DD and Acute Delivery Information Return (Weekly)

Below is the latest dataset submitted weekly to Scottish Government on range of indicators related to delayed discharges. For 28/07/24 this showed 22 total delayed discharges across all hospital sites in the Western Isles (for standard DD category

this was 18 acute and 3 in community and one additional code 9 AWI delayed discharge). These delayed discharges comprise 26.8% of all WI inpatients at this census point and have a median length of stay of 18 days or median length of delay period of 36 days within the latest reporting week.

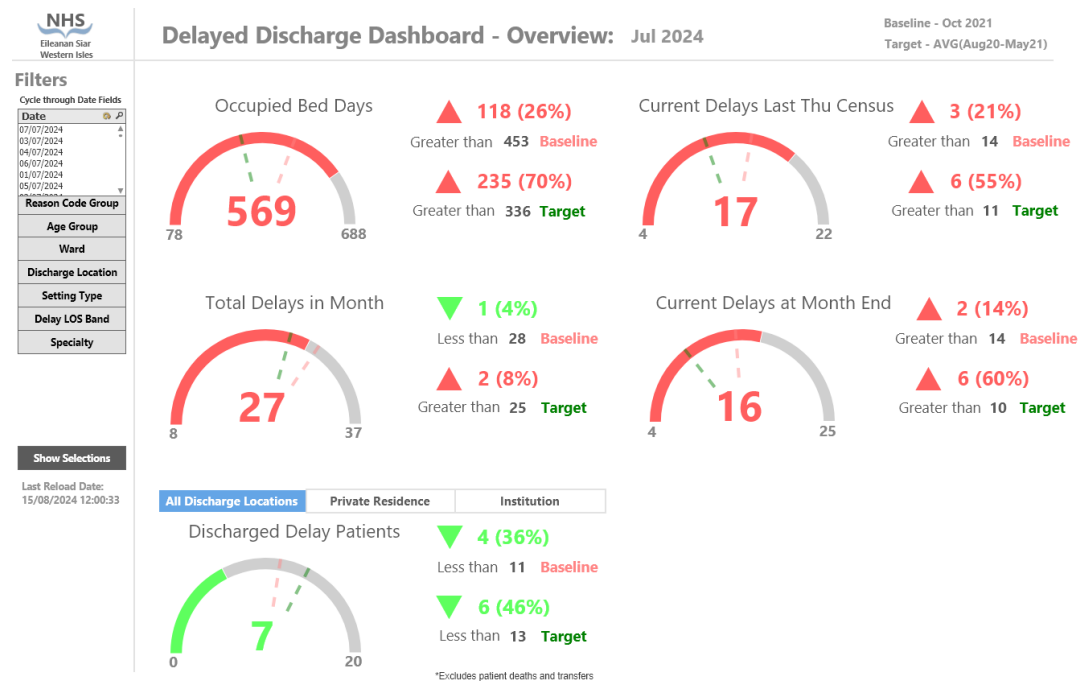*Table 1. NHS Western Isles Delayed Discharge position as at midnight on 11/08/24*

#	Indicator	HSCP of Residence	Value
1	Total Number of Inpatients (at census point)	Western Isles	82
2	Total Number of inpatients with a Planned Date of Discharge (PDD) Recorded (at census point)	Western Isles	81
3	Total number of inpatients with PDD breached (at census point)	Western Isles	13
4	Total number of Emergency Admissions within this reporting week	Western Isles	47
5	Total number of Planned Admissions within this reporting week	Western Isles	7
6	Total number of Emergency Discharges within this reporting week	Western Isles	25
7	Total number of Planned Discharges within this reporting week	Western Isles	18
8	Total number of inpatients discharged without delay within this reporting week	Western Isles	43
9	Total number of inpatients added to delayed discharge within this reporting week	Western Isles	3
10	Total number of patients discharged from an inpatient hospital stay who were in delay at the time of discharge, within this reporting week	Western Isles	0
11	Total number of patients who passed away whilst in delay within this reporting week	Western Isles	0
12	Total number of patients removed from delays list but remaining in hospital within this reporting week	Western Isles	0
13	Average (Median) length of stay (ALOS) within this reporting week	Western Isles	18
14	Average (Median) length of delay (ALOD) within this reporting week	Western Isles	36
15	Total number of Patients Readmitted within 7 days of discharge for patients discharged from delay within this reporting week	Western Isles	0
16	**Standard Delays: Acute (at census point)**	**Western Isles**	**18**
17	Standard Delays: Mental Health (at census point)	Western Isles	0
18	**Standard Delays: Community (at census point)**	**Western Isles**	**3**
19	**Code 9 (AWI) Delays: Acute (at census point)**	**Western Isles**	**1**
20	Code 9 (AWI) Delays: Mental Health (at census point)	Western Isles	0
21	Code 9 (AWI) Delays: Community (at census point)	Western Isles	0
22	Code 9 (non AWI) Delays: Acute (at census point)	Western Isles	0
23	Code 9 (non AWI) Delays: Mental Health (at census point)	Western Isles	0

24	Code 9 (non AWI) Delays: Community (at census point)	Western Isles	0
1	Total Number of Inpatients (at census point)	NHS WI Outside area	3
2	Total Number of inpatients with a Planned Date of Discharge (PDD) Recorded (at census point)	NHS WI Outside area	3
3	Total number of inpatients with PDD breached (at census point)	NHS WI Outside area	0
4	Total number of Emergency Admissions within this reporting week	NHS WI Outside area	5
5	Total number of Planned Admissions within this reporting week	NHS WI Outside area	0
6	Total number of Emergency Discharges within this reporting week	NHS WI Outside area	5
7	Total number of Planned Discharges within this reporting week	NHS WI Outside area	1
8	Total number of inpatients discharged without delay within this reporting week	NHS WI Outside area	6
9	Total number of inpatients added to delayed discharge within this reporting week	NHS WI Outside area	0
10	Total number of patients discharged from an inpatient hospital stay who were in delay at the time of discharge, within this reporting week	NHS WI Outside area	0
11	Total number of patients who passed away whilst in delay within this reporting week	NHS WI Outside area	0
12	Total number of patients removed from delays list but remaining in hospital within this reporting week	NHS WI Outside area	0
13	Average (Median) length of stay (ALOS) within this reporting week	NHS WI Outside area	
14	Average (Median) length of delay (ALOD) within this reporting week	NHS WI Outside area	
15	Total number of Patients Readmitted within 7 days of discharge for patients discharged from delay within this reporting week	NHS WI Outside area	0
16	Standard Delays: Acute (at census point)	NHS WI Outside area	0
17	Standard Delays: Mental Health (at census point)	NHS WI Outside area	0
18	Standard Delays: Community (at census point)	NHS WI Outside area	0
19	Code 9 (AWI) Delays: Acute (at census point)	NHS WI Outside area	0
20	Code 9 (AWI) Delays: Mental Health (at census point)	NHS WI Outside area	0
21	Code 9 (AWI) Delays: Community (at census point)	NHS WI Outside area	0
22	Code 9 (non AWI) Delays: Acute (at census point)	NHS WI Outside area	0
23	Code 9 (non AWI) Delays: Mental Health (at census point)	NHS WI Outside area	0
24	Code 9 (non AWI) Delays: Community (at census point)	NHS WI Outside area	0

Western Isles Delayed Discharge Dashboard

Below is overview page of local Delayed Discharge dashboard which provides monthly updates on range of delayed discharge indicators including numbers delayed at given census points and bed days utilised. The RAG targets are based on historic trajectories and not latest CAG reductions.

Figure 1: Western Isles Delayed Discharge Dashboard status as at July 2024

Bed Occupancy Reporting

Below are current routine reports produced in relation to national and local bed occupancy information.

Scottish Government Bed Occupancy Returns (Weekly)

Weekly snapshots of overall acute and mental health bed occupancy is sent to Scottish Government on weekly basis at Wednesday midnight census point as displayed below.

Table 2: Acute Bed Occupancy as at Midnight 14/08/24

Date	Board	Site	Unoccupied beds at midnight	Occupied beds at midnight	Total staffed beds at midnight

14/08/2024	NHS Western Isles	Western Isles Hospital	11	58	69

Table 3: Mental Health Bed Occupancy as at Midnight 12/08/24

Date	Board	Site	Type	Unoccupied beds at midnight	Occupied beds at midnight	Total staffed beds at midnight
14/08/2024	NHS Western Isles	APU	Mental health - Functional	1	4	5
14/08/2024	NHS Western Isles	Western Isles Hospital	Mental health - Organic	0	0	0

The above reports are based on bed complement recorded on TOPAS as 69 total acute beds (comprising Med1, Med2, Surgical, Erisort, HDU) and 5 mental health beds which is fixed and doesn't adjust for contingency beds becoming available staffed beds. This differs from reporting to/by PHS which takes into account the use of contingency beds but automatically adjusts the bed complement to include these in order that occupancy never exceeds 100% of available staffed beds.

The above data is used in the SG Whole Systems Pressure Dashboard described below.

Western Isles Local Bed Occupancy Report (Twice Daily)

Below is a daily extract that is emailed to selected recipients daily at 10am and midday from an online report that contains daily occupied bed information by ward with red flag status where this exceeds the allocated bed complement. Total are provided for acute occupied beds and the current acute capacity which is based on the acute bed complement total of 69 less the 17 Erisort beds. The exclusion of the Erisort beds from acute capacity was adjusted from August 2024 in response to operational reporting needs and is not reflected in both SG and PHS bed occupancy reporting.

Table 4: Daily Occupied Beds – Midday bed count

Note that Medical 1 figures have been split so that patients <18 are shown separately under 'children'

Click on Ward name in main table to view chart showing bed occupancy trend

Bed Comp at period end	AAU	APU	Children	Clisham	Erisort Ward	HDU	Maternity Ward	MAU	Medical 1	Medical 2	RAU	Surgical Ward	Uist and Barra	St Brendans	WIH Acute Adult Comp	Total
13/08/2024	0	5	3	0	17	4	6	0	8	22	0	18	16	3	69	102

Bed complement shown is allocated staffed beds at selected period end - as shown on Bed Complement - and does not include contingency beds

Dates where Bed Occupancy is higher than allocated bed complement are highlighted in **red** in the table below. On these dates, contingency beds are in use

Date	AAU	APU	Children	Clisham	Erisort Ward	HDU	Maternity Ward	MAU	Medical 1	Medical 2	RAU	Surgical Ward	Uist and Barra	St Brendans	WIH acute (adult)	Total	Occupied Non-Covid acute beds	Capacity Non-Covid acute beds
13/08/2024	0	4	2	0	2	3	3	0	12	26	0	18	11	1	61	82	59	52
12/08/2024	0	5	1	0	3	4	1	0	13	25	0	17	14	1	62	84	59	52
11/08/2024	0	5	0	0	3	3	1	0	14	24	0	17	13	1	61	81	58	52
10/08/2024	0	5	0	0	3	3	1	0	14	25	0	14	11	1	59	77	56	52
09/08/2024	0	4	1	0	4	4	1	0	15	26	0	19	11	1	68	86	64	52
08/08/2024	0	3	0	0	2	4	0	0	14	28	0	22	9	1	70	83	68	52
07/08/2024	0	3	0	0	0	2	3	0	15	28	0	23	10	2	68	86	68	52
06/08/2024	0	3	0	0	0	2	6	0	15	27	0	21	11	1	65	86	65	52
05/08/2024	0	3	0	0	0	3	8	0	15	27	0	22	10	1	67	89	67	52
04/08/2024	0	3	0	0	0	3	3	0	15	28	0	23	11	1	69	87	69	52
03/08/2024	0	4	0	0	0	4	3	0	15	26	0	17	13	1	62	83	62	52
02/08/2024	0	4	1	0	0	3	3	0	15	26	0	21	13	1	65	87	65	52
01/08/2024	0	3	0	0	0	3	4	0	13	28	0	20	12	1	64	84	64	52

The report shows activity for latest 30 days (restricted in Table 4 above for this report only) but can be viewed for any period from 01/01/2019 onwards in the online report version – link contained in emailed report.

This report gives a daily picture of bed use by ward and highlights daily pressures taking into account the use of additional contingency beds and compares overall acute bed use against capacity without inclusion of both Erisort bed complement and in use contingency beds to give a clearer sense of bed pressures on the regular bed capacity.

An amended version of the above report is in development which incorporates adjusted acute beds as HDU, Medical 1, Medical 2 and Surgical excluding Erisort. % Acute Occupancy is then based on usual bed complement (ex. contingency beds in use)

Wider Whole System Reporting

Below are current reports routinely provided in relation to wider whole system information including areas such as unscheduled care pressures. This also includes a range of national and local dashboards that seek to bring together key indicators of system pressure.
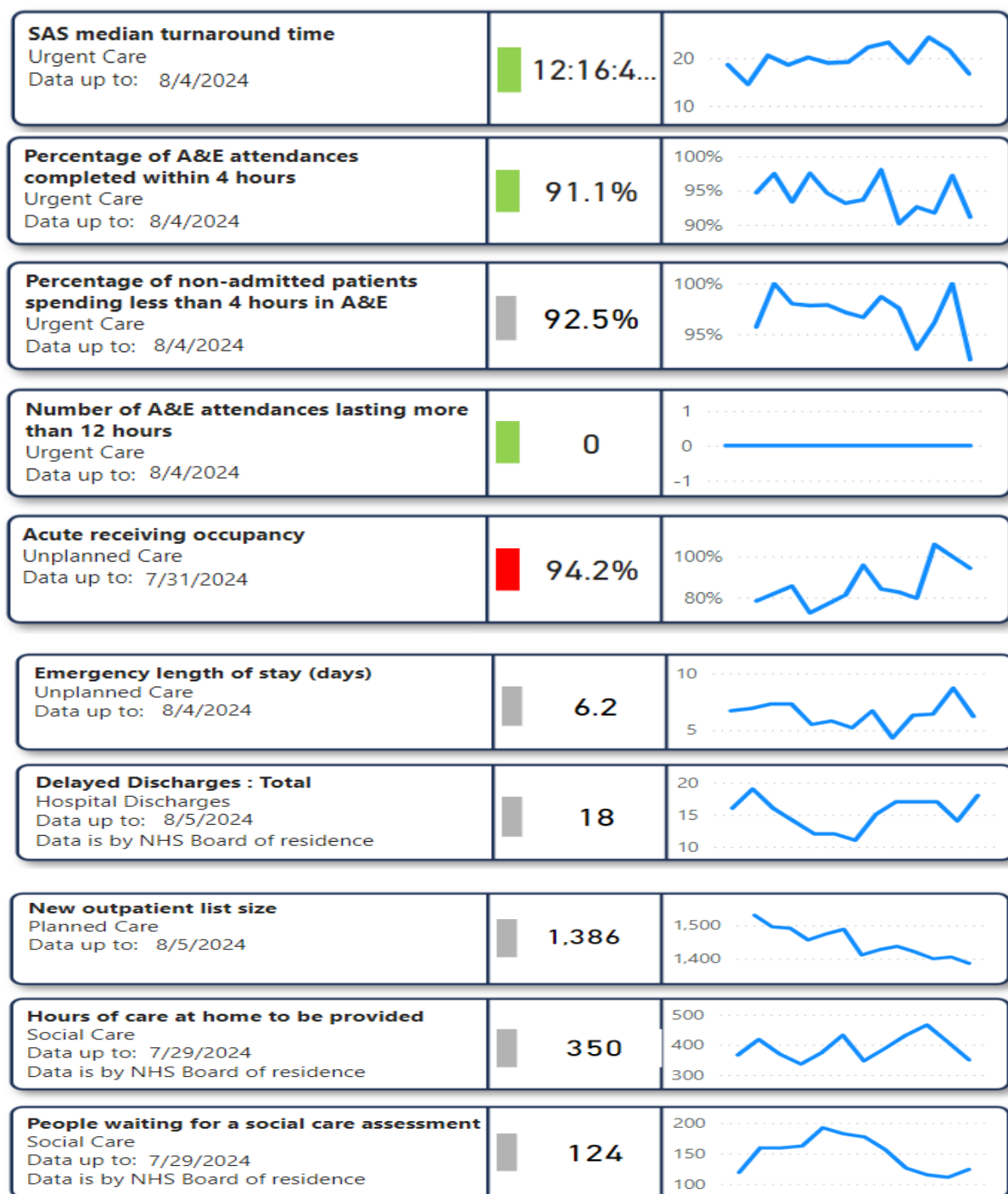
Scottish Government Whole System Dashboard

In support of the focus on whole system monitoring a Whole Systems Dashboard has been developed by Scottish Government, National Services Scotland and Public Health Scotland which provides a system overview based on 10 headline indicators at Heath Board level. Via these indicators a weekly system overview is provided of Health Board systems across urgent care, unplanned care, planned care, hospital discharges and social care with additional indicators within the dashboard for these areas and also primary care (out of hours activity), key seasonal pressures (e.g. staff absence levels and flu rates).

Latest Status:

Below is provided the latest system overview position for the 10 headline indicators for the Western Isles

Figure 2. Whole System Dashboard – System Overview Latest Week 3 Month Trend
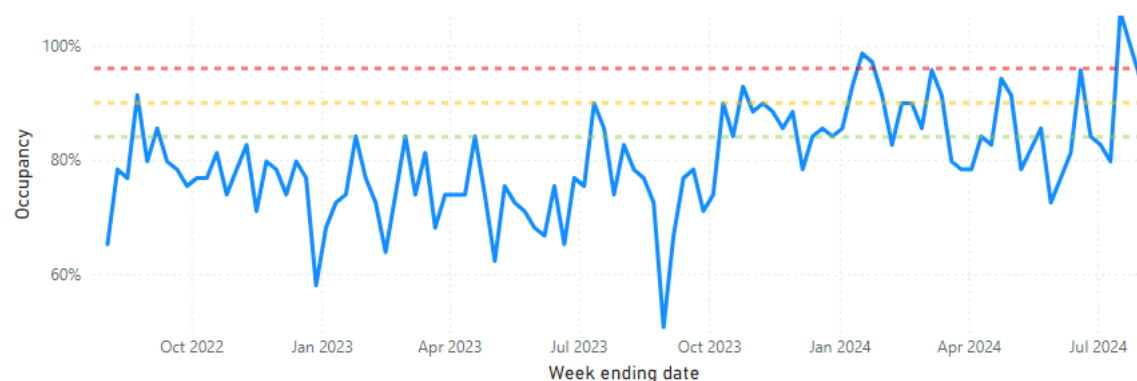

The above provides a snapshot overview across the whole system with BRAG status where available. Latest week position indicates where BRAG is provided that the Western Isles system pressures with significant impact are in the area of acute

hospital receiving capacity with very high occupancy levels (94.2% for latest position at 31st July 2024). Ability exists on the dashboard to drill down into selected headline indicators for further analysis. This shows that for the same week the Scottish occupancy was running at similar levels of 94.6%. Trends are also available which show occupancy over time against BRAG levels set in 'SG capacity and pressure reporting' (see below from Oct. 22 to current)

Figure 3. Western Isles weekly acute receiving bed occupancy trends

Longer trend, with BRAG thresholds where available^

Data as of 08/08/24, 15:59

The above occupancy analysis in SG dashboard is based on weekly acute and mental health bed occupancy return sent by HI (see Section 'SG Weekly Occupancy Return' in report). This return is drawn from the position on the TOPAS system at weekly snapshot point and the **current recorded system bed complement of 69 acute beds including Erisort and is fixed excluding contingency beds that come into use and therefore can exceed 100%** as occurred on 17th July 24. This differs from the formal reported occupancy using Public Health Scotland definitions which include contingency beds in bed complement as these become available staffed beds and also forms basis of daily local reporting (see section WI Local Daily bed occupancy report)

There are a range of other indicators with the SG dashboard supporting the system overview and below is just a selection of these where there are rates and able to compare with Scottish position.

Table 5. Average weekly position for selected indicators over latest 3 months where WI and Scotland comparisons

Indicator	Western Isles	Scotland	BRAG
SAS Median turnaround times	19.9 minutes	45.9 minutes	n/a
SAS % Total Conveyed	69.5%	55.2%	n/a
% A&E <4hrs	94.2%	66.8%	
% A&E non-admitted < 4hrs	97.2%	75.1%	n/a

A&E % admitted	24.4%	25.5%	n/a
Acute Receiving Occupancy	87.1%	94.9%	
Mental Health acute occupancy	68.3%	94.3%	n/a
Delayed Discharge Total	15	1,966	n/a
% discharges pre-noon	15.2%	15.9%	n/a
% Total Staff sickness	5.7%	5.5%	n/a
% total staff absent	17.6%	16.3%	n/a
Flu rates/100,000	0.6	1.0	n/a
RSV rates/100,000	0.0	0.2	n/a
People waiting SC assessment	151	6,363	n/a
People assessed and waiting care at home package	40	3,141	n/a

Scottish Government Unscheduled Care Sitrep (Weekly)

The full Unschedulced Care Sitrep requests information across range of areas including   As many of these are not directly available from system to support automation of the return agreement was reached with SG that NHSWI is required to only submit the delayed discharge section recognising that other areas are not currently a concern in NHSWI system e.g. A&E waits, SAS handover time, planned care cancelations/postponements. **This report relates only to acute hospitals and therefore excludes OUAB/St. Brendan's hospitals**.

Latest Status

Table 6. NHS Western Isles Delayed Discharge position as at midnight Sunday 28/07/24

Delayed Discharges		
Site Level	Number	
Please provide the number of Delayed Discharges <u>at the site.</u>	Standard	11
	AWI	1
	Complex	0
Further to this, please include the level of bed days lost as a result.	84	

Scottish Government Daily Operational Information Report

A further daily report is automatically generated for SG which began during the covid pandemic and continues to be submitted twice daily at 10am and 4pm. This includes information of ED, acute, covid, CCU and ITU bed availability.

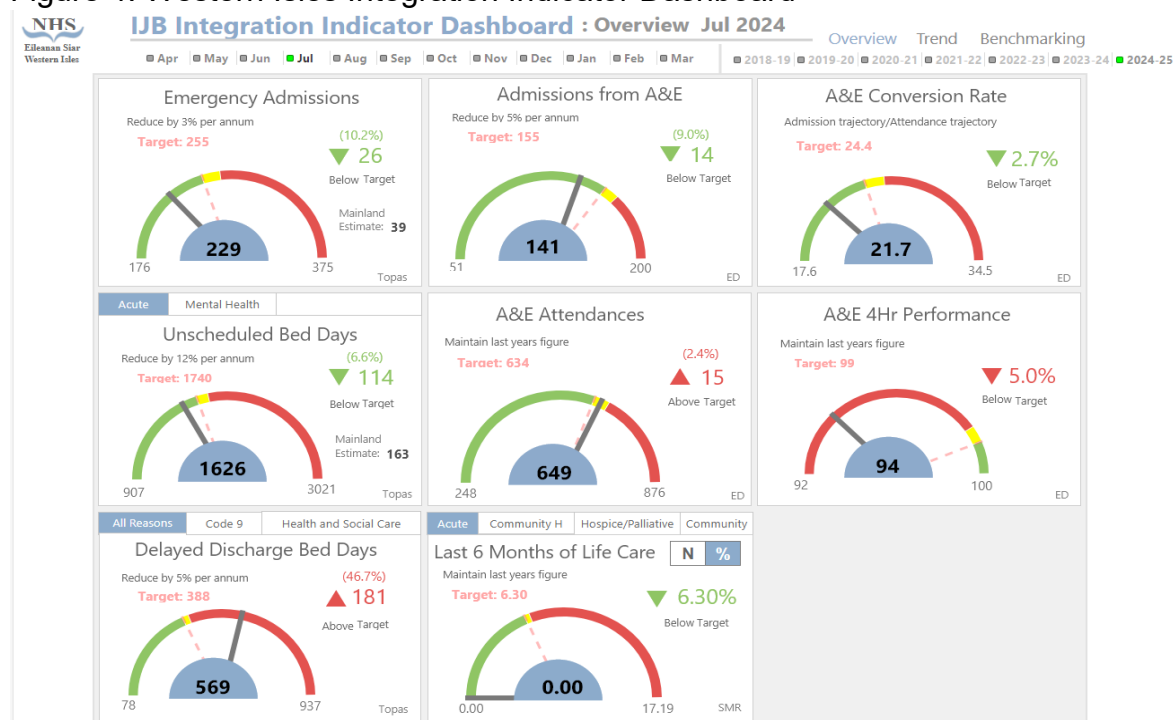*Table 7: Covid Daily Operational Information Report, status at 14/08/24 10am*

Daily·Essential·Operational·Information·--·April·2020·V6¶
[·Note:·this·is·an·iterative·document·subject·to·change·]¶
THIS·REPORT·MUST·BE·SUBMITTED·BY·10:00·°a·further·update·is·required·at·16:00·if·the·situation·has·changed°

Date:°	14.08.2024·------------------------·Executed·on·14.08.2024·--·10:05:15·AM°	
Site:°	WIH·&·OU&B·ED°	
Completed·by°	kedar.paul@nhs.net,·Analyst·(This·is·an·automated·report)°	
Part·1·—·completed·by·Hospitals·with·Core·Emergency·Departments°		
Capacity°		**10:00·AM°**
Number·of·patients·currently·in·ED·(New-unplanned,·Return-unplanned·only·)°		1°
Longest·waiting·patient·in·ED·(Minutes)°		26°
Number·of·**Non-COVID-19**·acute·beds·available°		-9·out·of·52·available
Number·of·**COVID-19**·designated·beds·available·(Erisort·Ward·only)°		17·out·of·17·available(Confirmed:,·UnConfirmed:)°
Number·of·Critical·Care·Beds·(Level·2·—·CCU/HDU)°·occupied°°°°		1°
Number·of·Critical·Care·Beds·(Level·2·—·CCU/HDU)°·available°°°°°°°°°		4°
Number·of·ITU·(Level·3·ventilated·beds)·occupied°		0°
Number·of·ITU·(Level·3·ventilated·beds)·available°		8°
Number·of·patients·on·NIV/CPAP°		

The above latest submitted information is based on agreed covid beds from pandemic within Erisort ward (17 beds) with remaining 52 beds as non-covid acute bed capacity. CCU/HDU beds are based on beds with ventilation levels provided at time of covid pandemic.

Western Isles Integration Performance Dashboard

There is a local dashboard containing information on SG Management Steering Group (MSG) indicators of IJB performance which is updated monthly with both local and other partnership indicator data. This allows a view for each indicator in terms of performance against RAG status (based on historic local targets), Benchmarked performance against selected partnership(s) and indicator trends with indication of variation from lower/upper limits. A monthly snapshot of the dashboard for both overview and benchmark and trend performance is taken and distributed in document form to selected staff and is incorporated into system performance report to Integration Board.

Figure 4: Western Isles Integration Indicator Dashboard

Western Isles Related Operational Reports

There are a number of other operational reports which have a bearing on areas of whole system flow with examples of latest provided below.

Hospital at Home Reporting

There is a local online report which can be selected for any period to show details of patients within the hospital at home service with information on nos./service days of discharges or current patients. In addition information is available on specialty, consultant and main diagnosis for assisting with operational management.

Table 8: Local online report on Hospital at Home patients to date, 15/08/24

Hospital at Home Admissions

Total Episodes: 1191   Current Patients: 9   Missing Diagnosis: 16

Report Run at: 15/08/2024 11:04

Admitted	Discharged	Days	Specialty	Consultant	Primary Diagnosis
14/08/24	Current Patient		General Medicine	LOCUM_CONSULTANT	
13/08/24	Current Patient		General Medicine	LOCUM_CONSULTANT	
13/08/24	13/08/24	0	General Medicine	Apostolopoulos	
12/08/24	Current Patient		General Medicine	GOYAL	
12/08/24	13/08/24	1	General Medicine	Apostolopoulos	
11/08/24	Current Patient		General Surgery	BLISS	
10/08/24	Current Patient		General Medicine	GOYAL	
10/08/24	12/08/24	2	General Medicine	GOYAL	URINARY TRACT INFECTION, SITE NOT SPECIFIED
10/08/24	14/08/24	4	General Surgery	MCAULAY	
10/08/24	12/08/24	2	General Medicine	GOYAL	PAPILLOEDEMA, UNSPECIFIED
09/08/24	Current Patient		General Medicine	Apostolopoulos	
09/08/24	Current Patient		General Surgery	BLISS	
09/08/24	Current Patient		General Medicine	GOYAL	
09/08/24	12/08/24	3	General Medicine	GOYAL	OTHER AND UNSPECIFIED ABNORMAL INVOLUNTARY MOVEMENTS
09/08/24	Current Patient		General Medicine	GOYAL	
08/08/24	13/08/24	5	General Medicine	Apostolopoulos	DISORIENTATION, UNSPECIFIED
07/08/24	14/08/24	7	General Medicine	Apostolopoulos	

Additional summary info. on current Hospital at Home service status is provided below noting patients may have multiple admissions to the service.

Table 9: Western Isles Hospital at Home Service episodes

Month	2024	2023	2022
Dec	-	51	15
Nov	-	38	19
Oct	-	45	18
Sep	-	36	13
Aug	24*	31	8
Jul	45	47	18
Jun	51	30	20
May	56	45	30
Apr	51	22	20
Mar	32	12	12
Feb	49	25	18
Jan	59	27	8

*Aug 24 - last admission 14/08/24

In addition below is the summary information on bed use potentially saved by patients being seen in hospital at home service rather than in hospital ward.

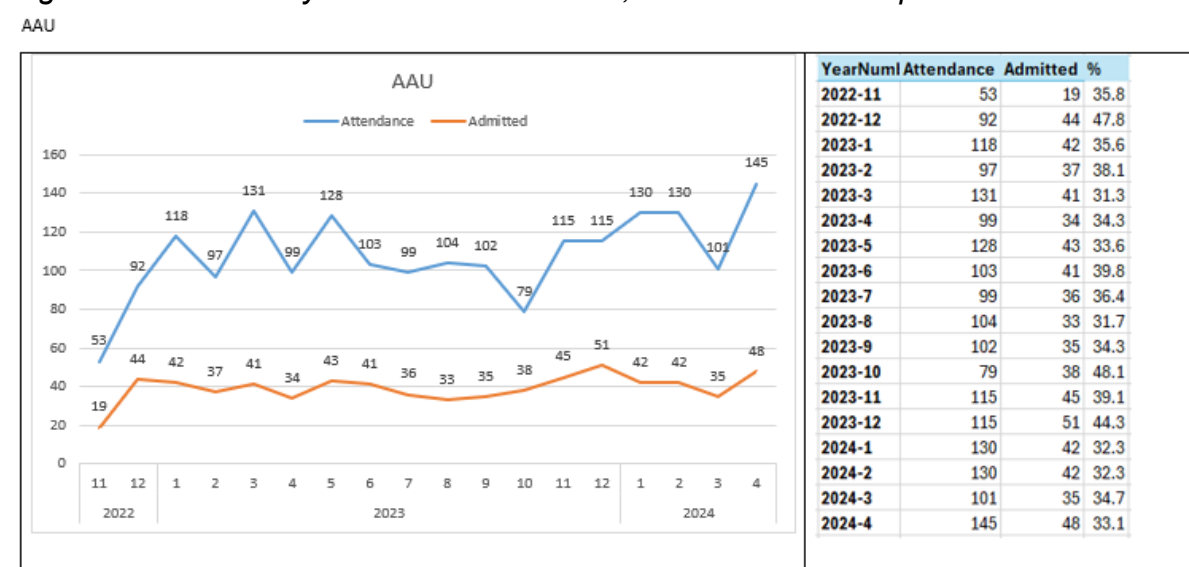*Table 10: Western Isles Hospital at Home Service Potential bed days saved*

2024*	2023	2022
2111	2036	1708

*Data to period 15/08/24

Acute Admission Unit Reporting

A local report is provided to WIH Performance group take from our ED IT system which captures AAU activity and proportion of these admitted to wards. Below is latest extract of this report to April 2024 showing a monthly range in attendances from 53-131 with between 32-48% leading to onward admissions to hospital wards.

Figure 5: AAU activity and % of admissions, Western Isles Hospital

YearNum	Attendance	Admitted	%
2022-11	53	19	35.8
2022-12	92	44	47.8
2023-1	118	42	35.6
2023-2	97	37	38.1
2023-3	131	41	31.3
2023-4	99	34	34.3
2023-5	128	43	33.6
2023-6	103	41	39.8
2023-7	99	36	36.4
2023-8	104	33	31.7
2023-9	102	35	34.3
2023-10	79	38	48.1
2023-11	115	45	39.1
2023-12	115	51	44.3
2024-1	130	42	32.3
2024-2	130	42	32.3
2024-3	101	35	34.7
2024-4	145	48	33.1

A&E Reporting

Daily operational reporting is provided on status of A&E which feeds into a number of unscheduled care sitrep report versions to SG which have adjusted several times over recent years.

Figure 3: A&E Performance snapshot as at 10am 14/08/24

A&E Board Performance (WIH , U&B)

Visit type - 'New Unplanned ' & 'Return Unplanned ' only

Report run on: 14-Aug-2024 Wed

Snapshot Time: 10:00

Already Discharged today:

Summary:

Arrival Date	Location Name	Attendances	No. Waiting > 4 Hours	4 Hour Compliance (%)	No. Waiting > 12 Hours	Longest Wait (hrs)
Wed 14-Aug-2024	Western Isles Hospital	1	0	100 %	0	0.6
	Total	1	0	100 %	0	0.6

Details:

CRN	Location Name	Arrival Date Time Display	Discharge Date Time	Wait in minutes	Wait in Hours (target 4 hours)	Flow Group	4 hour Delay reason
059300	Western Isles Hospital	14/08/2024 (01:42)	14/08/2024 (02:15)	33	00:33	Flow 1 (Minor Injury & Illness)	00. No delay

Waiting to be discharged, currently seen/treated as at 10:05   If red then already breached

CRN	Location Name	Arrival Date Time Display	Discharge Date Time	Wait in minutes	Wait in Hours (target 4 hours)	Flow Group
044010	Western Isles Hospital	14/08/2024 (09:39)		26	00:26	

All attendances today , discharged or not

Arrival Date	Location Name	Attendances	Avg Arrival to triage (Mins)	Avg Arrival to triage (Hours)	Avg Arrival to treatment (Mins)	Avg Arrival to treatment (Hours)
Wed 14-Aug-2024	Western Isles Hospital	2	10	0.2	0	0
	Total	2	10	0.2	0	0

* This report is based on Time of Arrival (SGUCD government daily submission is bassed on Time of Discharge)

The above latest report shows on 14/08/24 100% of A&E attendances were within the 4 hour waiting period at point of report at 10am based on 1 discharged while remaining patient currently within A&E was under 1hr waiting at 10am with overall average time from arrival to triage of 10 minutes and max. wait of 33 minutes.

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Social Care Reporting

Care at Home Unmet Need Weekly Submission

A template report is submitted by the Care at Home Systems Admin Team, providing a snapshot of following information:
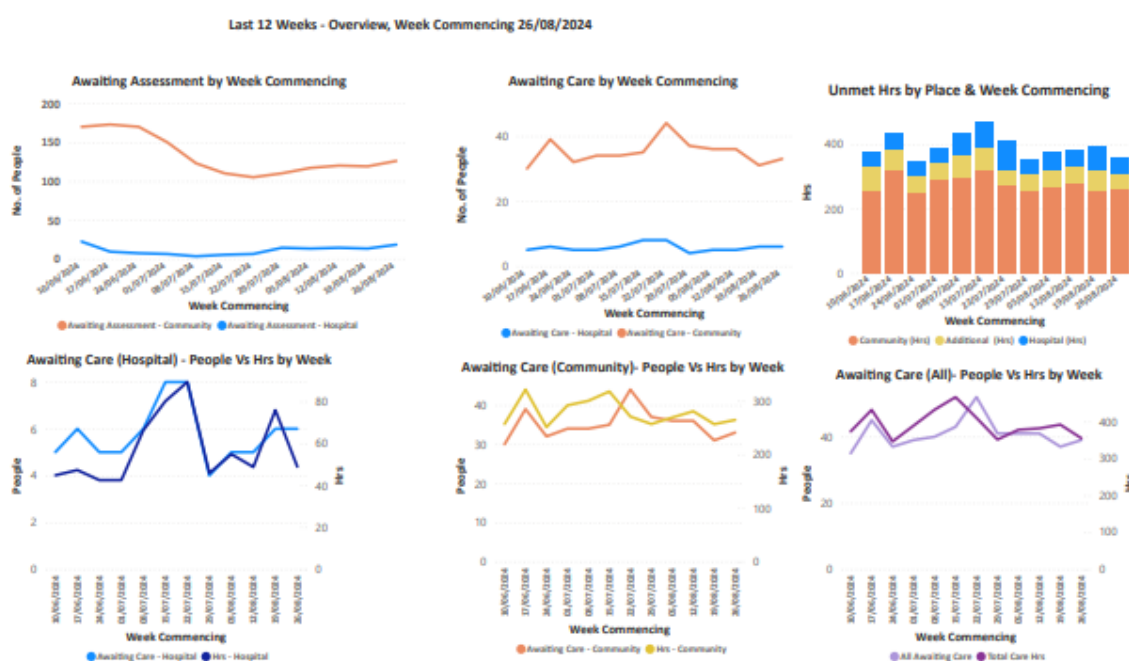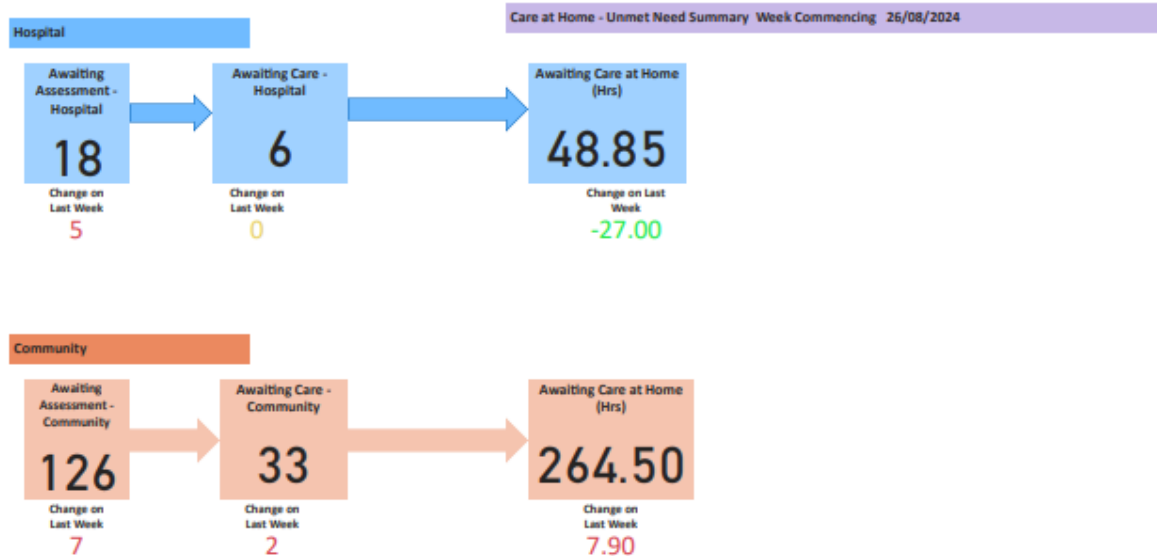
Figure 4: Resilience in Care at Home – Assessment and Unmet Need template

Resilience in Care at Home - Assessment and Unmet Need - HSCP Data

Name of partnership:	Comhaire nan Eilean Siar		
Date of data collection (please update with the Monday date, of each weekly collection):			

Number of People	In Hospital	In the Community	Total
1. Waiting for a social care assessment			
2. Assessed and waiting for a package of care			

Number of Weekly Hours	# Hours
3. Care yet to be provided for assessed individuals in 'hospital' include: both acute and community beds	
4. Care yet to be provided for assessed individuals in the 'community' include: both home and interim beds	
5. Care assessed as needed and not provided for those in receipt of a care package	

Notes
1. Data definitions provided on first worksheet
2. Please enter data in yellow cells only
3. Please provide a snapshot of data for the Monday of the reporting week.

4. Hours of care should be hours of care **per week.**
5. Non numerical data cannot be used.
6. Please provide any comments within the body of your submission email

This data is submitted to PHS Source Team.

Locally, this weekly data is converted into a visual report to support trend analysis, which is shared with Social Care Management and Operational teams, and the IJB Chief Officer.

Figure 5: Resilience in Care at Home – Unmet Need Visual Report W/C 26/08/2024

Further sections of the report provide 12 month and annual data charts for 2022-2023 to date.

START Team

Reporting supplied to the multidisciplinary START team is currently undergoing a refresh following process changes. The snapshot below provides a snapshot of the current version:

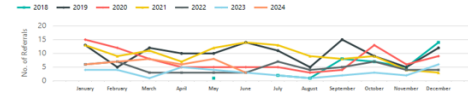*Figure 6: START Team Monthly Report – May 2024, Section 1 sample*

START Team Monthly Report
May 2024

SCI Gateway Referrals

Since moving to Morse as the primary CRM, all patients referred to OT will be

Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
2018						1	2		8	7	5	14	38
2019	13	5	12	10	10	14	11	5	15	9	9	12	121
2020	15	12	8	5	5	5	5	3	4	13	6	9	90
2021	13	9	11	7	12	14	13	9	8	9	4	3	112
2022	6	7	3	3	3	7	4	5	7	4	4	4	56
2023	4	4	1	5	4	3	2	1	2	3	2	6	37
2024	6	7	8	6	8	3							38
Total	57	44	43	36	43	42	40	23	42	48	26	48	492

SCI Gateway Referrals

Active Caseload by

CCL	Jun 2023	Jul 2023	Aug 2023	Sep 2023	Oct 2023	Nov 2023	Dec 2023	Jan 2024	Feb 2024	Mar 2024	Apr 2024	May 2024
Active Caseload	12	11	15	11	9	11	13	14	13	14	14	12

Morse	Jun 2023	Jul 2023	Aug 2023	Sep 2023	Oct 2023	Nov 2023	Dec 2023	Jan 2024	Feb 2024	Mar 2024	Apr 2024	May 2024	Jun 2024
Active Caseload	15	12	19	12	14	16	17	17	15	16	16	15	15

Active Caseload

Active Caseload
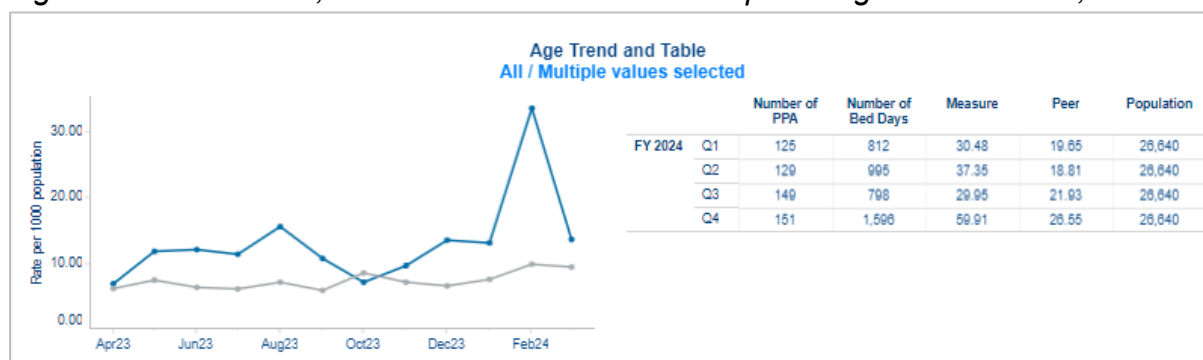
Areas of Future Reporting consideration

There are a number of other areas of related information which have an impact on delayed discharges and the wider system flow in hospital which the potential to include in local operational reporting may be considered. The relevance of this will depend on the usefulness operationally of the information according to granularity and availability of the various data below.

Admissions Avoidance information

Potentially preventable admissions

The national Discovery dashboard contains information on an agreed set of conditions (Ambulatory Sensitive Conditions – ASC) which give a marker of the level of potentially preventable admissions across systems.
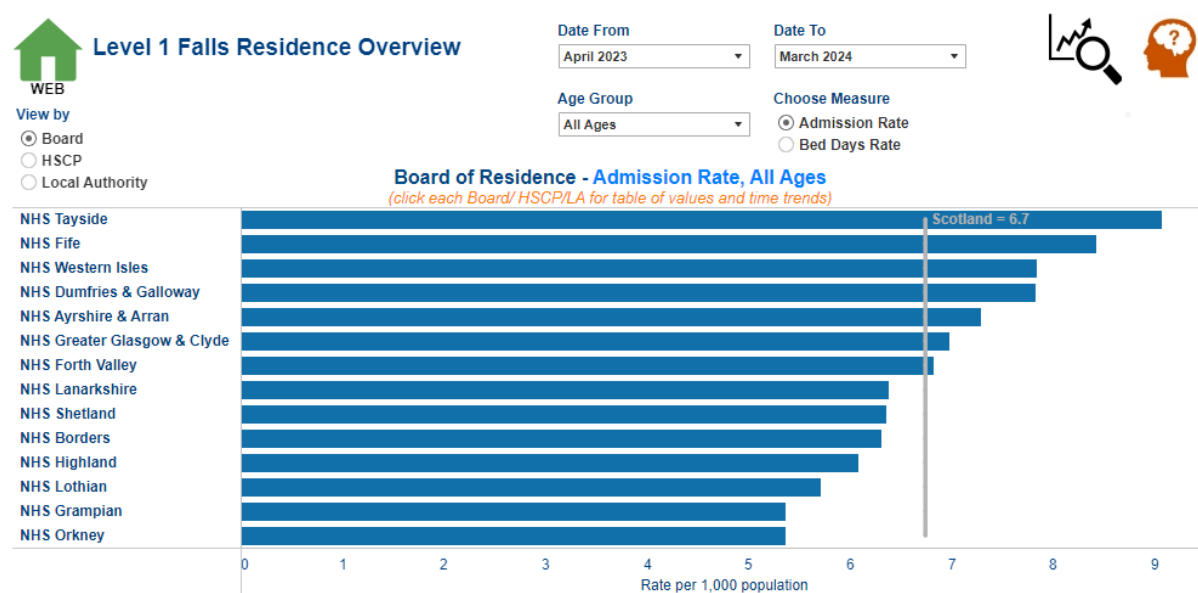
Figure 4: Rate of PPA, Western Isles and Peer Group Average – 2023/2024,

Age Trend and Table
All / Multiple values selected

		Number of PPA	Number of Bed Days	Measure	Peer	Population
FY 2024	Q1	125	812	30.48	19.65	26,640
	Q2	129	995	37.35	18.81	26,640
	Q3	149	798	29.95	21.93	26,640
	Q4	151	1,596	59.91	26.55	26,640

Falls admissions

The Western Isles has among the highest rates of admissions for falls across all health boards at 7.8/1,000 population compared to Scottish level of 6.7/1,000 pop. And accounts for 209 hospital admissions or 2,950 hospital bed days in the Western Isles. These rates are not adjusted for age but analysing comparative falls admission rates for older people the Western Isles is below the Scottish equivalent age specific rates for aged 65+, 75+ and 85+ which suggests the overall high falls admission rates are occurring in younger age groups in the Western Isles relative to other areas.

Figure 5: Falls admission rates per 1,000 population by Health Board – 2023/2024,

Taken from the national Discovery dashboard are levels of admissions where an acute hospital stay is involved in the Western Isles which for 23/24 is 1.8% compared to Scottish rate of 1.5%. When you broaden this to all service contacts with a fall recorded the % of pathways with a fall increases to 5% of total compared to 7% in Scotland. in the Western Isles

Figure 5: Services with Fall recorded, Western Isles – 2023/2024,

Services that record a fall in the pathway
(select a pathway to show bar chart)

Pathway (i)		Pathways with a fall recorded	Fall recorded by Acute	Fall recorded by ED	Fall recorded by MH	Fall recorded by NHS24	Fall recorded by GP OOH	Fall recorded by SAS
S → E → A		121	73	22	0	0	0	93
E → A		44	43	4	0	0	0	0
S → A		23	11	0	0	0	0	14
S → A → S		12	7	0	0	0	0	11
S → E → A → S		9	7	2	0	0	0	5
A		9	9	0	0	0	0	0
N → S → E → A		7	5	2	0	0	0	1
S → S → A		5	4	0	0	0	0	3
N → O → S → E → A		5	0	2	0	2	2	2
S → P → A		3	3	1	0	0	0	2

Hospital Flow

Below is provided summary of potential areas of reporting that currently aren't provided routinely which may form part of DD and whole system reporting if required.

- Hospital Inpatients Case Mix e.g. Age, Average Lengths of Stay; Co-Morbidity of LTCs in hospital
- Unscheduled Care – Emergency Admissions, Total, 65+, 75+, Ave. LoStay, bed day rates
- Delayed Discharges – by Ave. LoS;

Social Care

There are a number of areas where data has been captured though not fully utilised for operational reporting, this includes:

- Care Home Waiting Lists
- Care Home resident numbers by Care Home
- Scheduled Respite
- Care at Home – planned/actual/staffed hours, breakdown by geographic areas, striation by planned weekly hrs bandings, no. of service users/visits requiring double up care, Points of care distribution.
- Telecare service provision – by type / rates

This data forms the core of the service user level quarterly and annual return to PHS.