

CÙRAM IS SLÀINTE NAN EILEAN SIAR

INTEGRATION JOINT BOARD



Meeting date: 19 June 2025
Item: 8.1
Title: IJB Performance Report
Responsible Officer: Chief Officer
Report Author: Chief Officer

1 Purpose

This is presented to the Integration Joint Board (IJB) for:

- Awareness

This report relates to a:

- Government policy/directive
- Legal requirement

Competence:

- There are no legal, financial or other constraints associated with the report.

2 Report summary

2.1 Situation

The Integrated Joint Board is required to report on the National Integration Indicators to Scottish Government via the Ministerial Strategic Group for Health and Community Care (MSG). These are intended to provide a view of how Partnerships are progressing against a range of whole system level measures. Early notice has been given that Scottish Government are reviewing the indicators and that they are likely to change

2.2 Background

Currently there are six MSG indicators:

1. Emergency admissions
2. Unscheduled hospital bed days
3. A&E performance
4. Delayed discharges
5. End of life care
6. The balance of care across institutional and community services

A description of the data which relates to the indicators is included within this appendix 1 of this report.

Currently the Integrated Joint Board receives a performance report which provides data on 5 of the six indicators as data on indicator 6 is under development nationally.

2.3 Assessment

The report provides both a status report for month of December 2024 and importantly additional trend analysis for each of the indicators over the period January 2023 - April 2025

The trend analysis graphics provide an indication of performance trends in each of the domains.

In addition to the run charts there is a secondary chart which benchmarks local performance alongside that of Highland Partnership. The rationale for this is that it represents a remote and rural population. However direct comparison should be treated with caution given the unique characteristics of the population of the Western Isles.

Overall, the indicators provide a broad if somewhat limited indicator of the overall health of the population of the Western Isles.

In the last quarter the Board are asked to note performance against the core MSG indicators.

Emergency Admissions

Emergency admissions (unplanned care) resulting from a period of injury or illness has seen an increase of approximately 15% against the last reporting period, however the number of admissions remains within the control parameters. Admissions are in the order of 225 per month. Western Isles ageing demographic has a not insignificant impact on emergency admissions, particularly for those patients >75 years old. The Board should note that NHS Western Isles has been successful in a bid to participate in the National HIS Frailty programme, with a focus on enhancing and improving frailty services in Western Isles hospitals.

Unscheduled hospital Bed Days

This performance indicator includes only patients treated as inpatients or day cases. The specialty of geriatric long stay is excluded. Unscheduled bed days relate to all occupied bed days within a continuous hospital stay following an emergency or urgent admission. Bed days for each month are calculated based on the month in which the bed days were occupied. This differs from other analysis where bed days are reported by the month of discharge. The data is for all ages, under 18, 18+, 18-64 and 65+ age groups.

Performance has improved in the reporting period with 1401 days/month (April 2025) against a target of 1869 days/month.

The HSCP has an 11 point action plan which is a whole system approach to improve flow and delayed discharges. In addition the HSCP will be engaging with SG peer support team focusing more widely on flow and delayed discharge.

The data for mental health bed days demonstrates a sustained improvement in performance over the last quarter with 35 bed days against a target of 124. This is due in part to the close working between Estates and APU colleagues to facilitate improvements to the APU estate, supported by enhanced community provision across CPN services.

A&E 4 Hour Waiting Time Performance

This indicator reports on the percentage of A&E Attendances which are seen within 4 hours. The waiting time is defined as the time of arrival until the time of discharge, admission or transfer.

The data demonstrates a small increase in performance in the month of April. Overall 97.2% of patients are seen within 4 hours against a target of 95%. NHS Western Isles is one of the highest performing Health Boards in Scotland.

Performance is positively impacted through a number of alternatives to Emergency Department attendance, Namely the Acute Assessment Unit, Urgent and Unscheduled Care Service (which includes an innovative partnership with Scottish Ambulance Service). The Board should note that NHS Western Isles has just completed an ambitious upgrade to the A&E department in Western Isles Hospital.

Delayed Discharges Hospital Bed Days

This indicator reports on the number of bed days occupied by all people experiencing a delay in their discharge from hospital. Data is presented for 18+, 18-74 and 75+ age groups and for the following reason groups: all reasons, health and social care, patient/carer/family-related and code 9s.

Length of delay is calculated from the patient's planned date of discharge (PDD) to either their PDD within the specific calendar month or the end of the calendar month for patients who are still in delay.

The data demonstrates a deterioration in performance as outlined in the data set. There is currently a national mission to reduce the number of patients who are delayed in hospital. The target for Western Isles is a maximum of 7 patients/day who are delayed. Performance remains above the target with an average of 14 patients/day who are delayed. As referenced in the unscheduled bed days a whole system approach is required to drive improvement against the metric.

Additionally, a new reporting template has been developed to monitor admissions and discharges in week. Delayed Discharges were negatively impacted in this reporting period due to the closure of Blar Bhuidhe and the associated loss of residential care beds. Positively the majority of Blar Bhuidhe staff have transferred under TUPEE arrangements which alongside the nursing home registration for Bremner Court affords new and improved opportunities to support patients requiring respite and long term residential care.

Last 6 Months of Life Care by Setting (acute, Community Hospital, Hospice/Palliative, Community)

This indicator measures the percentage of time spent by people in the last six months of life in the following settings:

- Community
- Hospice / Palliative Care Unit
- Hospital

The data demonstrates a strong performance over the last quarter with more than 95% of individuals spending the last 6 months of life in a community setting. Performance is supported by the development of a 7-day palliative care service across the Western Isles.

2.3.1 Quality/ Patient Care

The report has no direct impact on quality of care (and services).

2.3.2 Workforce

No direct impact on the workforce including resources, staff health and wellbeing.

2.3.3 Financial

No financial impact

Accountants Name	Signature

Comment from the Chief Finance Officer:

No requirement for sign-off

2.3.4 Risk Assessment/Management

Strategic Risk Register defines risks to the IJB.

2.3.5 Equality and Diversity, including health inequalities

State how this supports the Public Sector Equality Duty, Fairer Scotland Duty, and the Board's Equalities Outcomes.

An impact assessment has not been completed because it is not required.

2.3.6 Climate Emergency and Sustainability Development

State how this report will support or impact on the Scottish Government's policy on Global Climate Emergency and Sustainability Development DL(2021)38.

No direct impact on sustainability

2.3.7 Other impacts

Not applicable

2.3.8 Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage external stakeholders where appropriate:

No requirement to engage or communicate with stakeholders.

2.3.9 Route to the Meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

IJB Board, standing item

2.4 Recommendation

Awareness – For Members' information only.

3 List of appendices

The following appendices are included with this report:

Appendix 1. IJB Performance report April 2025