

# Midlothian HSCP MSG Indicators

Performance from April 2019 to June 2022,  
with 2020/21 MSG targets and trends

Local Intelligence Support Team (LIST),  
September 2022

Management information –  
not for onward distribution

# Contents

1. Methodology
2. Data completeness
3. 2020/21 MSG targets and actuals
4. A&E attendances
  - a) weekly figures by age group
  - b) monthly proportions by age group
  - c) 4 hour performance
  - d) admission conversion rates
3. Emergency admissions
4. Unplanned bed days:
  - a) Acute
  - b) Geriatric Long Stay
  - c) Mental Health
5. Delayed discharges occupied bed days
6. Balance of care
7. End of life

# 2020/21 MSG Targets - Methodology

- The MSG Objectives Performa was submitted in February 2020 which specified the 2020/21 targets and an action plan on how those targets were to be achieved
- 2017/18 MSG data was used as the baseline to calculate the 2020/21 targets

# Data completeness

Source: MSG data release Aug-22, PHS

Indicator	Published until	Provisional until	Data completeness issues
1. A&E attendances	Jun-22	n/a	-
2. Emergency admissions	Dec-21	Jun-22	(SMR01) Nov-20 = 93%, Nov-21 = 95%
3a. Unplanned bed days (acute)	Dec-21	Jun-22	(SMR01) Nov-20 = 93%, Nov-21 = 95%
3b. Unplanned bed days (GLS)	n/a	Jun-22	(SMR01E) Quarters ending: Sep-21 = 95%; Dec-21 = 95%; Mar-22=92%; Jun-22 = 87%
3c. Unplanned bed days (MH)	Mar-21	Jun-22	(SMR04) Quarters ending: Jun-22 = 90%
4. Delayed discharges occupied bed days	Jun-22	n/a	-
5. Last 6 months of life (% in community setting)	2020/21	2021/22	-
6. Balance of care (% at home)	n/a	2020/21	-

# 2020/21 targets and actuals

Source: MSG objectives 2020-21 template - Midlothian IJB; MSG data release Aug-22, PHS

Indicator	2020/21 target	2020/21 target (rate per 100,000)		2020/21 (rate per 100,000)		Target met
		Annual	Monthly	Annual	Monthly	
1. A&E attendances	Maintain	31,543	2,629	26,390	2,199	✓
2. Emergency admissions	5% decrease	9,207	767	9,207	767	✓
3a. Unplanned bed days (acute)	10% decrease	60,888	5,074	57,459	4,788	✓
3b. Unplanned bed days (GLS)	Decrease	<13,733	<1,144	14,122 (p)	1,177 (p)	X
3c. Unplanned bed days (MH)	Decrease	<15,910	<1,326	12,511	1,043	✓
4. Delayed discharges occupied bed days	20% decrease	9,836	820	9,779	815	✓
5. Last 6 months of life (% in large hospital)	Decrease	<8.7%	-	7.8%	-	✓
6. Balance of care (% at home)	Increase	>96.4%	-	97.%	-	✓

(p) = provisional

- Indicators 3b and 6 are still provisional.

# Data Sources

## **2020/21 MSG Targets**

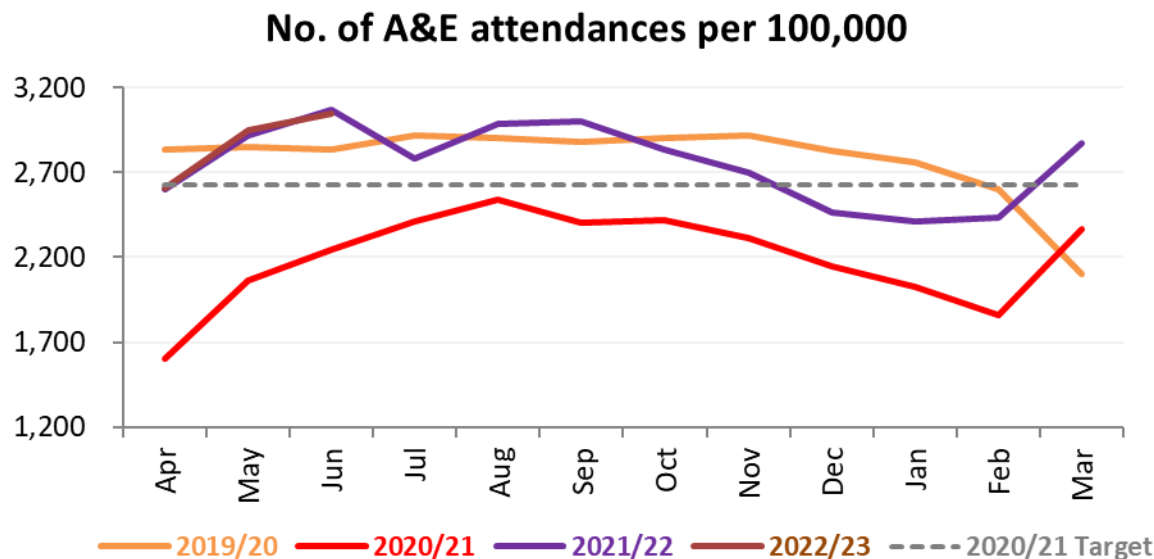
- Source: MSG data release v1.57, Aug-22; Public Health Scotland
- These are official monthly figures released by PHS and will be nationally published (some data is provisional and not yet published)
- Next data release: Sep-22

# A&E Attendances

Source: MSG data release Aug-22; data published up to Jun-22

Target = maintain	Annual	Monthly
2020/21 Target Rate (per 100,000)	31,543	2,629
2019/20 Rate (per 100,000)	33,319	2,777
2020/21 Rate (per 100,000)	26,390	2,199
2021/22 Rate (per 100,000)	33,053	2,754
2022/23 Running average (Jun)		2,868

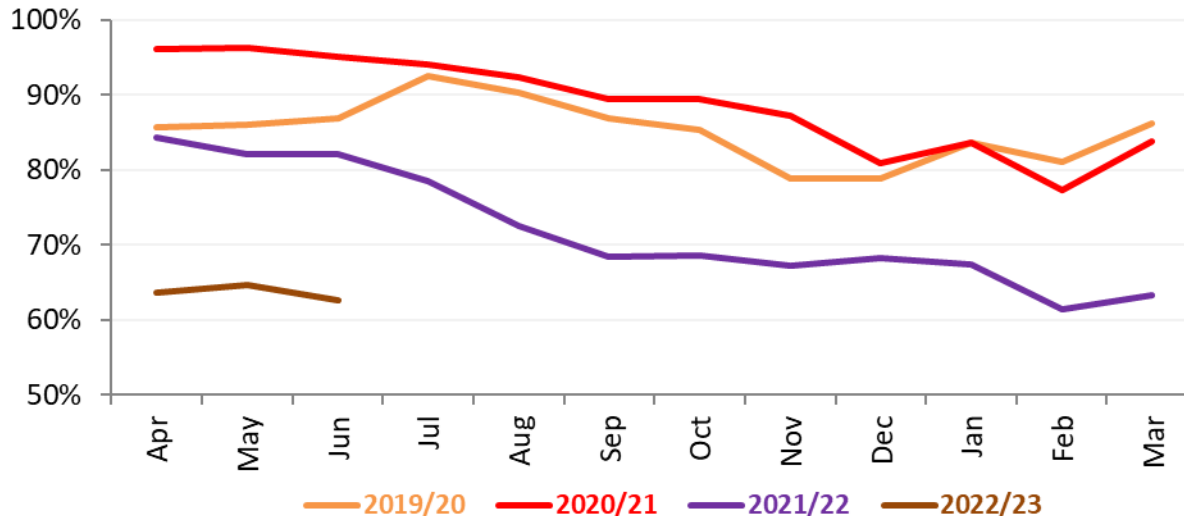
- The 2020/21 target was met
- The rate of attendances in 2020/21 was 21% lower than 2019/20, and **17% lower than the 2017/18 baseline year**. Much of this may be due to covid-19.
- The rate of attendances had increased back to typical levels by Aug-20, but steadily decreased again until Mar-21 when it started increasing.
- From May-21 – Nov-21 it exceeded the 2020/21 target level. Between Dec-21 and Feb-22 it dipped below the target again.



# A&E 4 hour performance

Source: MSG data release Aug-22; data published up to Jun-22

A&E % discharged, admitted or transferred within 4 hours



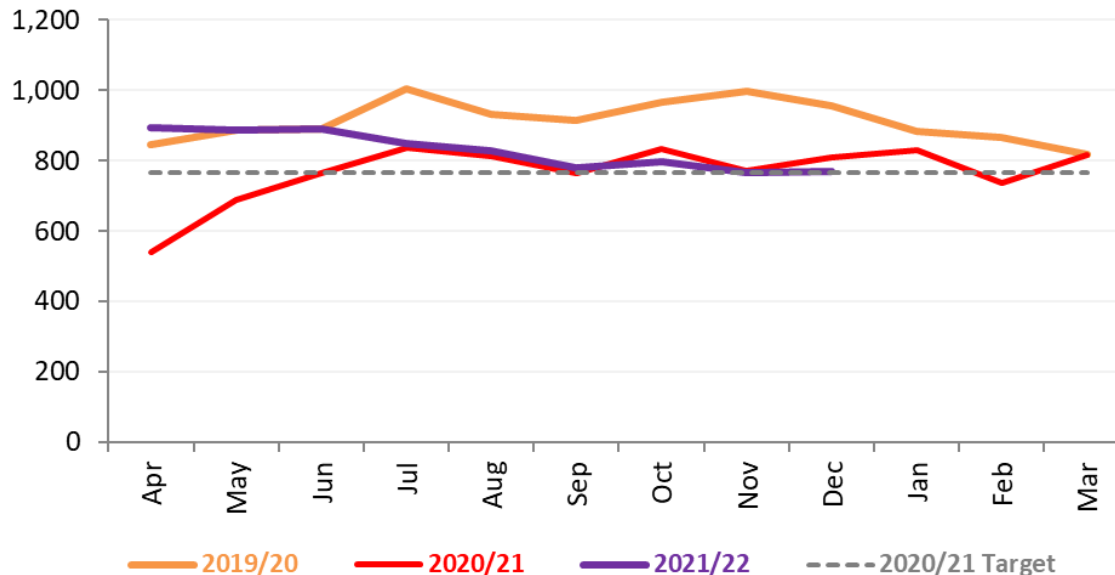
- Four hour performance was steady through the winter of 2020-21
- **Overall four-hour performance for 2020/21 was 79.9%**, a slight decrease from the 2019/20 level (85.2%)
- Performance through 2021/22 steadily declined, and has been around 62-65% since Feb-22

# Emergency Admissions

Source: MSG data release Aug-22; data published up to Dec-21

Target = 5% decrease	Annual	Monthly
2020/21 Target Rate (per 100,000)	9,207	767
2019/20 Rate (per 100,000)	10,966	914
2020/21 Rate (per 100,000)	9,207	767
2021/22 Running average (Dec)		829

Number of emergency admissions per 100,000



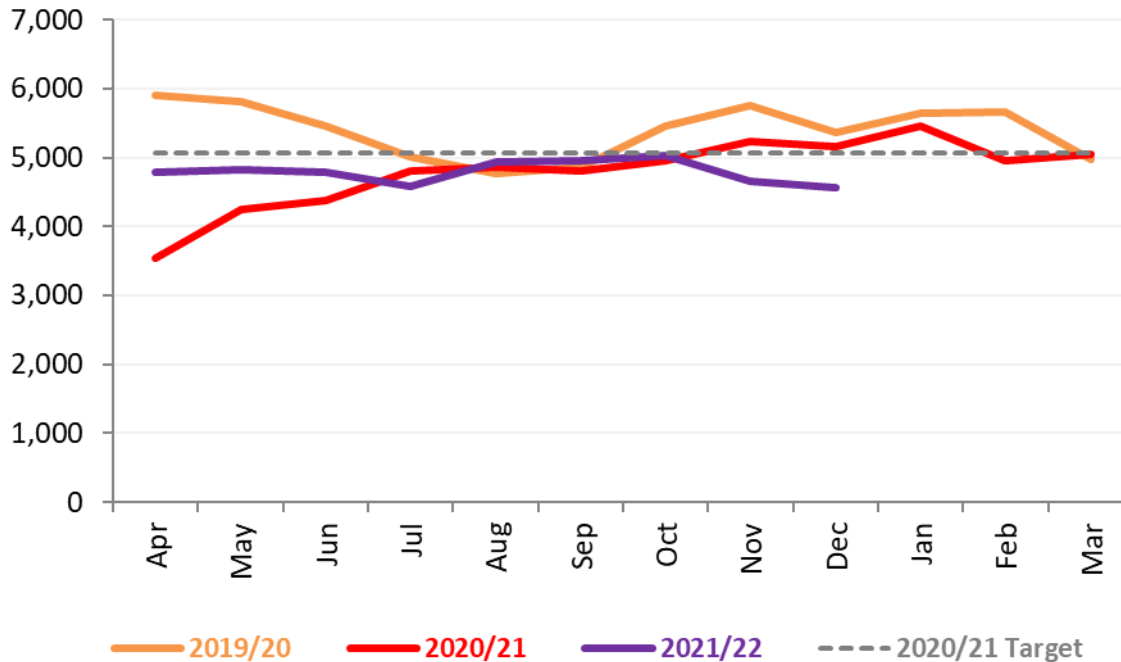
- The 2020/21 target was met
- The rate of emergency admissions dropped in Apr-20 due to Covid-19, but quickly returned to more typical levels – although remained lower than 2019/20 until March-21
- In the first quarter of 2021/22 the admissions rate increased above the 2020/21 target level and above 2020/21 levels; this discrepancy has reduced since

# Unplanned Bed Days - Acute

Source: MSG data release Aug-22; data published up to Dec-21

Target = 10% decrease	Annual	Monthly
2020/21 Target Rate (per 100,000)	60,888	5,074
2019/20 Rate (per 100,000)	64,683	5,390
2020/21 Rate (per 100,000)	57,459	4,788
2021/22 Running average (Dec)		4,795

Acute unscheduled bed days per 100,000



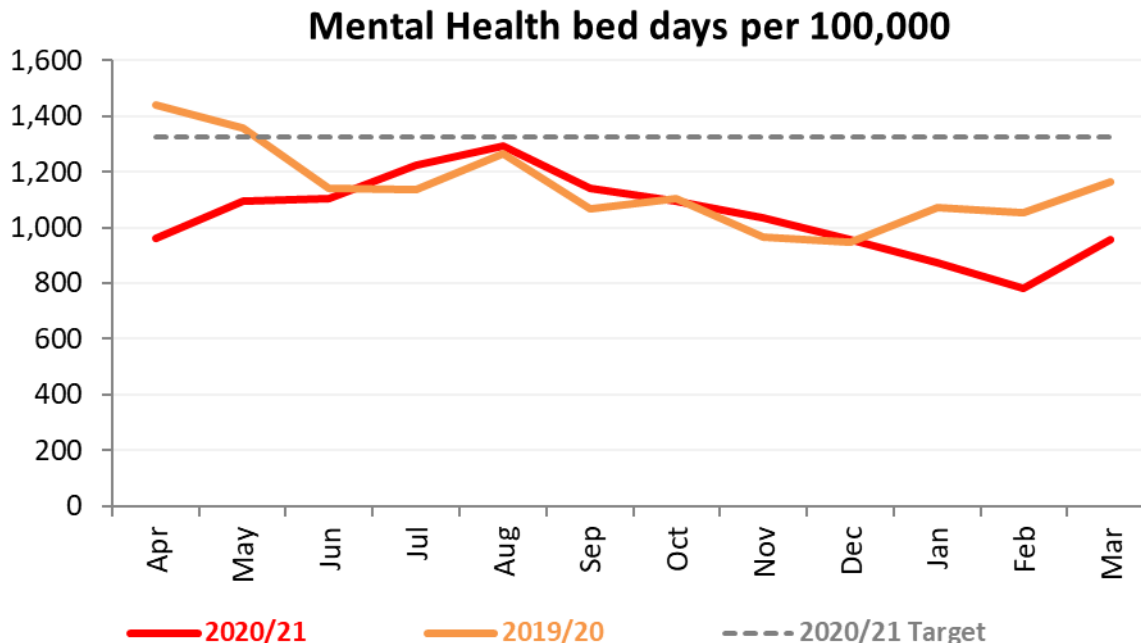
- The 2020/21 target was met
- The rate dropped drastically in Apr-20 due to Covid-19, but was back to a more typical level by Jul-20.
- The rate has remained stable since then

# Unplanned Bed Days – Mental Health

Source: MSG data release Aug-22; data published up to Mar-21

- The 2020/21 target was met
- The rate of MH bed days has been lower than the target level since Jun-19

Target = decrease	Annual	Monthly
2020/21 Target Rate (per 100,000)	15,912	1,326
2019/20 Rate (per 100,000)	13,708	1,142
2020/21 Rate (per 100,000)	12,511	1,043

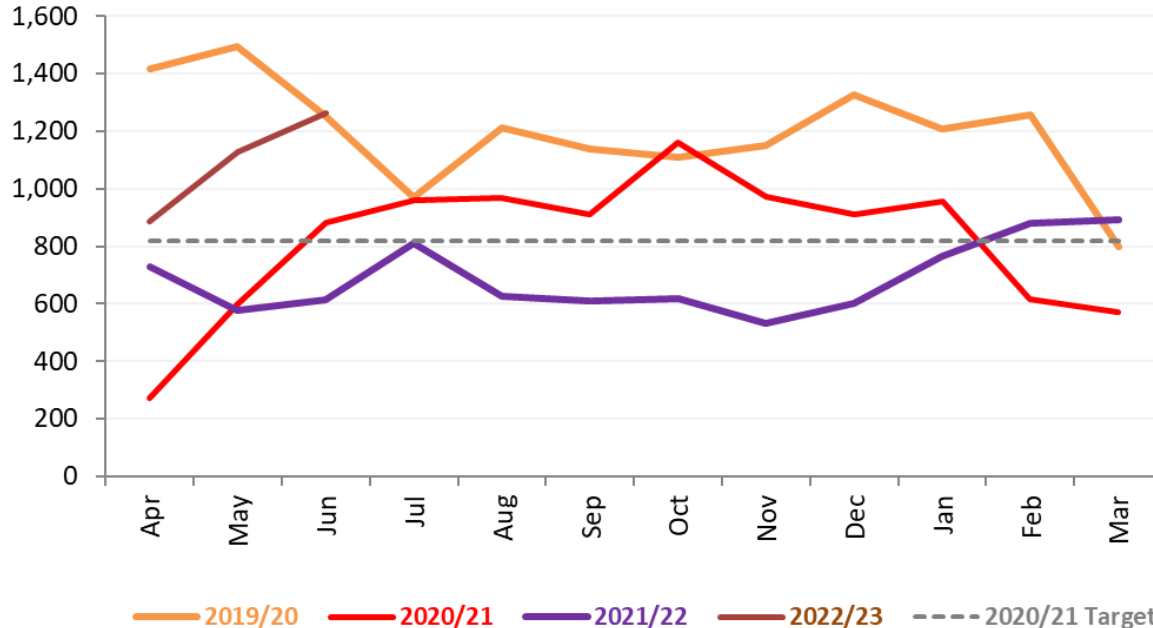


# Delayed Discharges Occupied Bed Days

Source: MSG data release Aug-22; data published up to Jun-22

Target = 20% decrease	Annual	Monthly
2020/21 Target Rate (per 100,000)	9,836	820
2019/20 Rate (per 100,000)	14,336	1,195
2020/21 Rate (per 100,000)	9,779	815
2021/22 Rate (per 100,000)	8,249	687
2022/23 Running average (Jun)		1,093

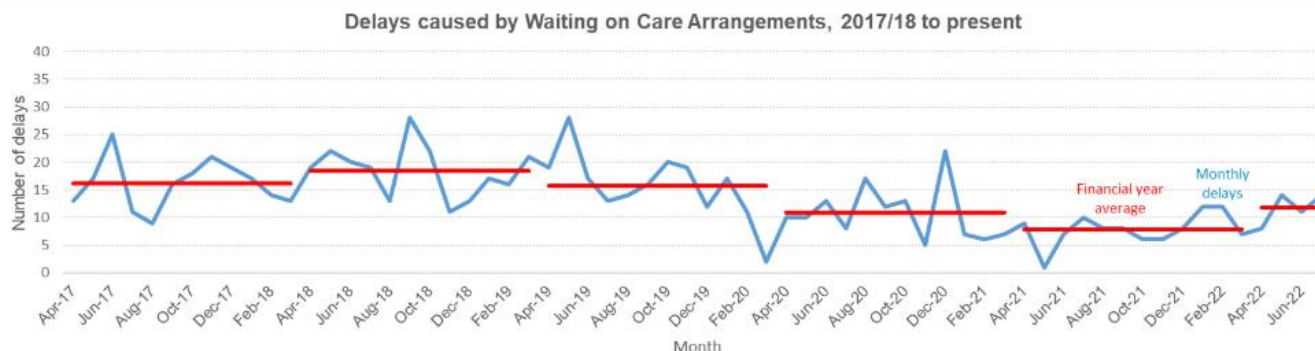
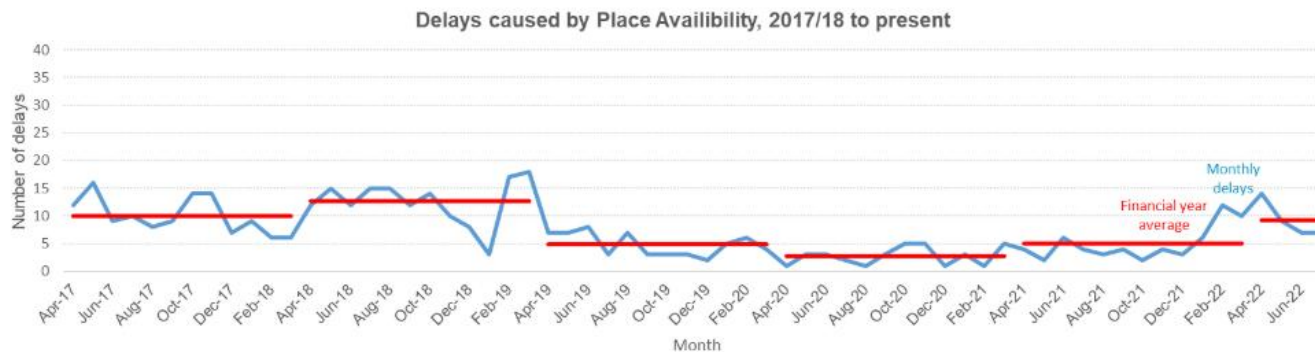
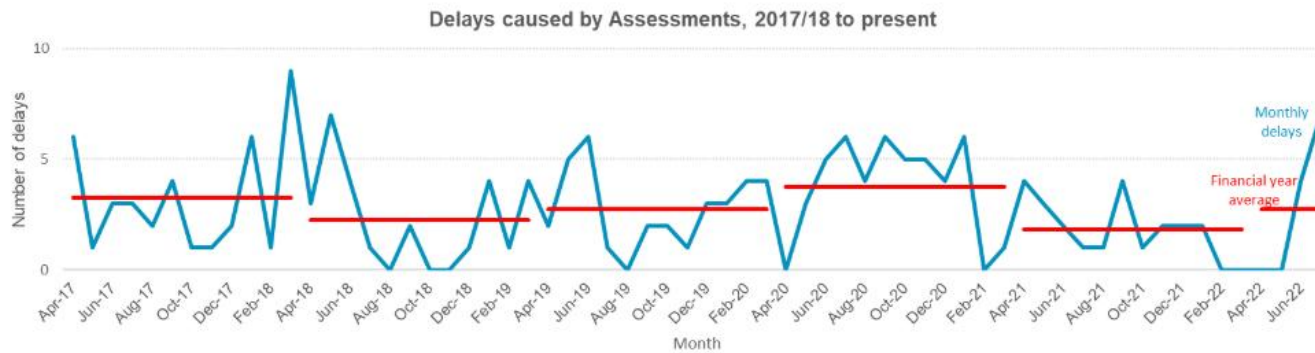
Delayed discharge bed days per 100,000, all reasons (18+)



- The 2020/21 target was met
- The rate of delayed discharge occupied bed days in Apr-20 was about 80% lower than the previous April's rate due to Covid-19
- The rate has remained mostly lower than the previous year ever since; during much of 2021/22 it was lower than the 2020/21 target level, although it has now exceeded it since Feb-22 and has risen substantially over the last two months

# Delayed Discharges: Trends by Reason for Delay

Data Source: Public Health Scotland Delayed Discharge Census September 2022 Publication

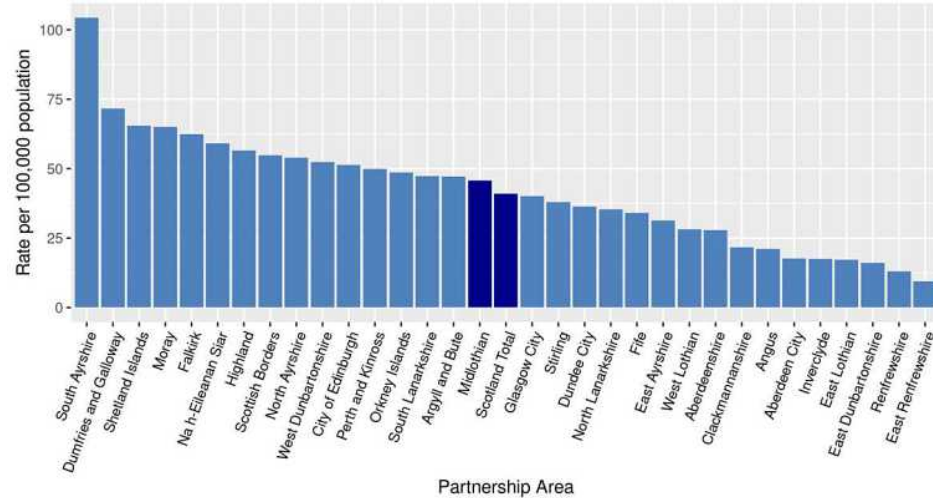


- These charts show the long term trend and the yearly average of the number of delays caused by: Assessments; Place Availability and Waiting on Care Arrangements.
- Data has been taken from the monthly Census from Public Health Scotland.
- Performance has been improving since before the pandemic, although the last few months have seen a substantial uptick in delays, particularly for Assessments.

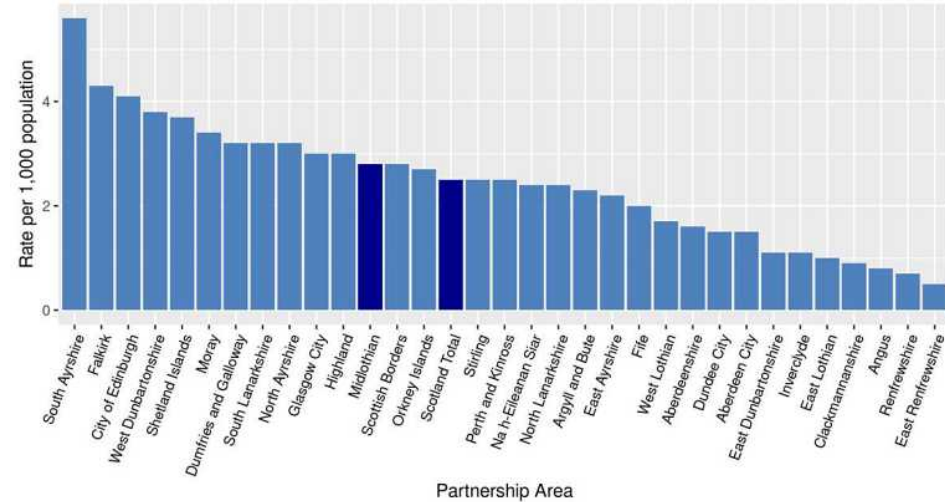
# Delayed Discharges (all reasons): Midlothian Position

Data Source: Public Health Scotland Delayed Discharges September 2022 Publication

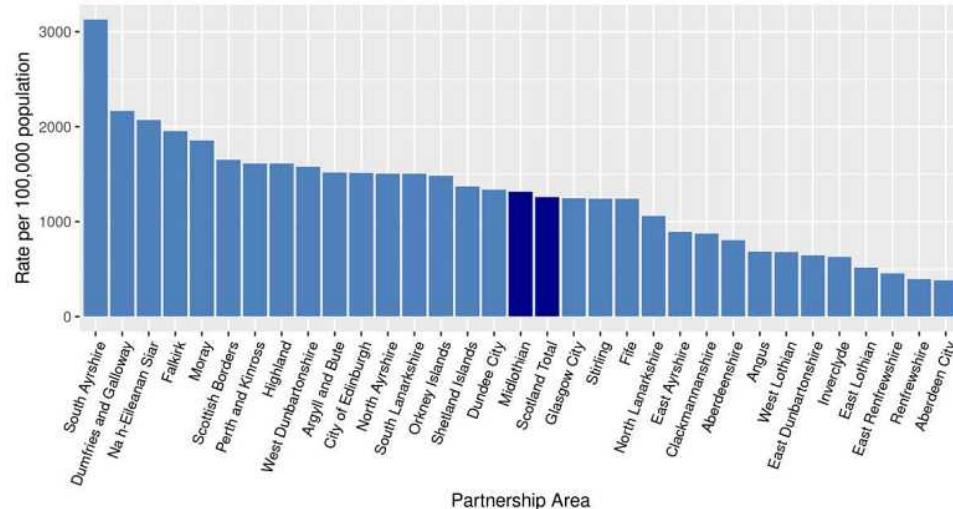
Delayed Discharge Rates per 100,000 Population, Aged 18+  
Jul 22



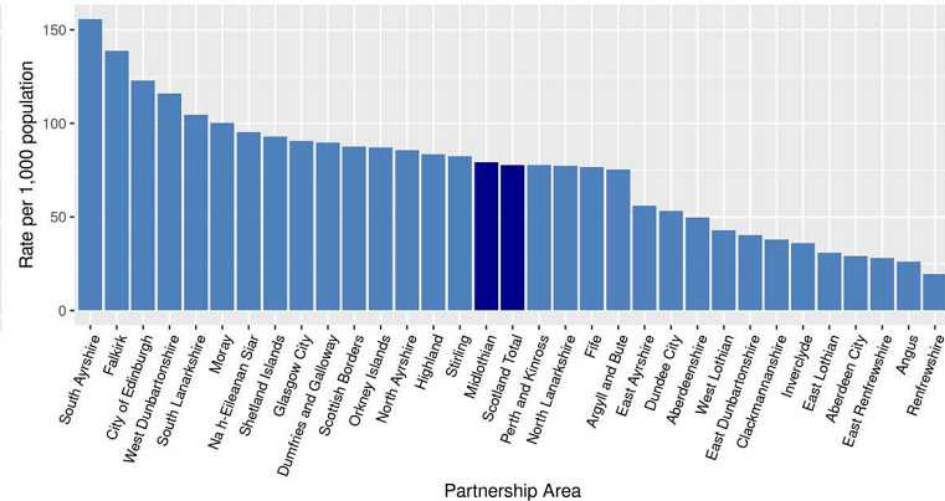
Delayed Discharge Rates per 1,000 Population, Aged 75+  
Jul 22



Occupied Bed Days for Delayed Discharges - Rate per 100,000 Population, Aged 18+  
Jul 22



Occupied Bed Days for Delayed Discharges - Rate per 1,000 Population, Aged 75+  
Jul 22



# End of Life - Percentage of Last Six Months Spent in Large Hospitals

Source: MSG data release Aug-22; data published up to 2020/21

Target = decrease	Annual
2020/21 Target	<8.7%
2019/20	9.1%
2020/21	7.5%

- The 2020/21 target was met
- The provisional percentage for 2021/22 is below the target and is higher than the 2020/21 level

