Midlothian Integration Joint Board

Midlothian Health & Social Care Partnership

Thursday 13th October 2022, 14.00-16.00

IJB Improvement Goals

Item number:	5.8

Executive summary

The purpose of this report is to update the IJB on progress towards achieving the current IJB performance goals for the financial year 2022/23.

Board members are asked to:

- Note the performance against the IJB Improvement Goals for 2022/23.

Update to the IJB Improvement Goals

1   Purpose

The purpose of this report is to update the IJB on progress towards achieving the current IJB performance goals (2022/23).

2   Recommendations

2.1   As a result of this report Members are asked to:-

- Note the performance against the IJB Improvement Goals for 2022/23 (Appendix 1);

3   Background and main report

3.1   The IJB has previously identified improvement goals to monitor progress on reducing unscheduled hospital activity and use of institutional care. They are based on goals recommended by the Scottish Government Ministerial Strategic Group for Health and Community Care (find out more [here](#)).

3.2   At the IJB meeting in June 2022 the Performance Assurance & Governance Group recommended that the improvement goals for 2022/23 were set in order to prioritise an increase in system stability, focussing on workforce recovery and wellbeing.

3.3   The Members approved the following goals, based on a continuation of the target rates set for 2021/22:

MSG Indicator	2021/22 Target Rate per 100,000	2021/22 Running Average per 100,000	2022/23 Target Rate per 100,000
A&E Attendances	2,629 / month	2,789 (at Feb 2022)	2,629 / month
Emergency Admissions	767 / month	820 (at Feb 2022)	767 / month
Unplanned Bed Days	5,074 / month	4,714 (at Feb 2022)	5,074 / month
Delayed Discharge	820 / month	680 (at Feb 2022)	820 / month

Occupied Bed Days			
End of Life - Percentage of Last Six Months Spent in Large Hospitals	<8.7%	7.4% (provisional)	**<8.7%**
Balance of Care	>96.4%	96.7% (provisional)	**>96.4%**

3.4   An updated report describing progress against each improvement goal is attached in Appendix 1. This report is produced by the Local Intelligence Support Team (LIST) on behalf of the Midlothian HSCP. Members are asked to note the information in Appendix 1, specifically with regard to data completeness (slide 4). Due to the processes required to validate these data, there is an inbuilt reporting delay and this information is not taken from a "live" system. This means that we are not yet in a position to calculate the full year average performance for 2021/22.

4   Directions

4.1   There are no implications on the Directions.

5   Equalities Implications

5.1   There are no equality implications from focussing on these goals but there may be implications in the actions that result from work to achieve them.

The focus of most of the goals is on reducing hospital activity and hospitals are not used equally by the population. There are groups of people that make more use of hospitals than others – for example older people, people living in areas of deprivation or people who live alone.

6   Resource Implications

6.1   There will be resource implications resulting from further action to achieve these improvement goals.

7   Risk

7.1   The main risk is that the IJB fails to set improvement goals that take cognisance of the continued instability of health and care systems, and the ongoing challenges of supporting workforce wellbeing.

8   Involving people

8.1   The Performance Assurance & Governance Group (PAGG) meet monthly to review and discuss these measures as part of wider data assurance. Membership of the group will be expanded to ensure increased representation of elected officials, the third sector and public health.

9   Background Papers

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Appendix 1: LIST Report describing progress against the IJB improvement goals 2022/23