

# Report

## Whole System Delays – Recent Trends

### Edinburgh Integration Joint Board

22 September 2017



#### Executive Summary

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1. The purpose of this report is to update the Integration Joint Board on:
  - the current performance in respect of people delayed in hospital;
  - trends across the wider system;
  - identified pressures and challenges; and
  - improvement activities.

#### Recommendations

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2. The Integration Joint Board (IJB) is asked to note:
  - i. current performance in respect of people delayed in hospital;
  - ii. the delays and pressures in the community;
  - iii. the actions being taken to address the identified challenges; and
  - iv. the significant ongoing challenge of bringing about improvement.

#### Background

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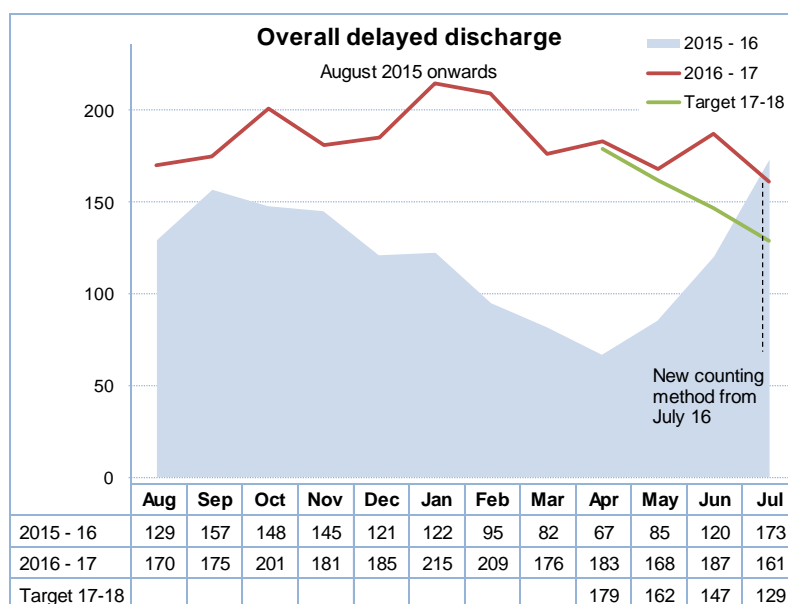
3. Edinburgh has regularly had the highest number of delayed discharges of any Integration Authority in Scotland. Reducing both the number of people whose discharge from hospital is delayed and the length of those delays has been an ongoing problem and a particular area of concern for the Integration Joint Board. However, pressures are also evident across the wider system, with large numbers of people waiting for assessments and for domiciliary care, the majority of whom are currently at home rather than in hospital.
4. These issues are also reflected in the report of the Care Inspectorate/Health Improvement Scotland's inspection of Edinburgh's services for older people.
5. The IJB has previously asked that performance reports on this subject be brought to each IJB meeting.

## Main report

### Overview of performance: delayed discharge

6. The number of people who are delayed in hospital is reported monthly to the Information Services Division (ISD) of NHS Scotland. This information is used to compare performance across Integration Authorities. The figure reported to ISD excludes complex delays, where the Partnership is unable, for reasons beyond its control, to secure a patient's safe, timely and appropriate discharge from hospital. Examples include a person waiting for a place in a specialist residential facility where no places are available; or where a person cannot leave hospital until a Guardianship Order has been granted by the courts.
7. The Edinburgh Health and Social Care Partnership revised performance targets in respect of the number of people whose discharge from hospital is delayed in April 2017. The intention in setting these targets was that the number of delays would be reduced to no more than 50 non-complex cases and 10 complex cases by December 2017. Trajectories to reach this target have been set on both a city-wide and locality basis. Table 1 in the appendix shows these trajectories.
8. Chart 1 below shows the number of people whose discharge from hospital was delayed over the last two years, using the monthly data reported to ISD. The shaded area shows performance from August 2015 to July 2016 (the latest date for which data is available). The red line shows performance for the current year. The green line shows the target trajectory.

*Chart 1: Number of people delayed in hospital Aug 2016 to July 2017*



excluding complex cases

9. The number of people whose discharge is delayed has shown a reduction, but this has not been sufficient to meet the phased targets. Lack of packages of care continues to account for the largest number of individuals waiting (53%), followed by people waiting for care homes, illustrated in Table 2 below. This pattern is consistent across the four localities.
10. Table 1 provides an overview of all delays, both complex and non-complex and the proportion of delays in acute beds.

Table 1. Overview of delays: reportable (including % in acute) and complex

	<b>Aug 16</b>	<b>Sep 16</b>	<b>Oct 16</b>	<b>Nov 16</b>	<b>Dec 16</b>	<b>Jan 17</b>	<b>Feb 17</b>	<b>Mar 17</b>	<b>Apr 17</b>	<b>May 17</b>	<b>Jun 17</b>	<b>Jul 17</b>
Reportable Total	170	175	201	181	185	215	209	176	183	168	187	161
% in acute	86%	82%	86%	80%	74%	73%	79%	80%	83%	79%	79%	86%
Excluded cases (complex)	23	24	27	23	18	12	13	16	32	34	24	25
Of which, Guardianship	20	20	22	16	17	11	12	14	18	19	12	14
Grand Total	193	199	228	204	203	227	222	192	215	202	211	186

11. The proportion of delays in acute sites is closely monitored because of the impact on the capacity of acute services. There was a reduction over the winter months to under 75%, with more recent levels being at least 79%. The number of complex delays where people are waiting for Guardianship Orders to be granted is shown separately, as additional resources have been put in place to focus on this group of people, which has resulted in a reduction in the number of complex delays.

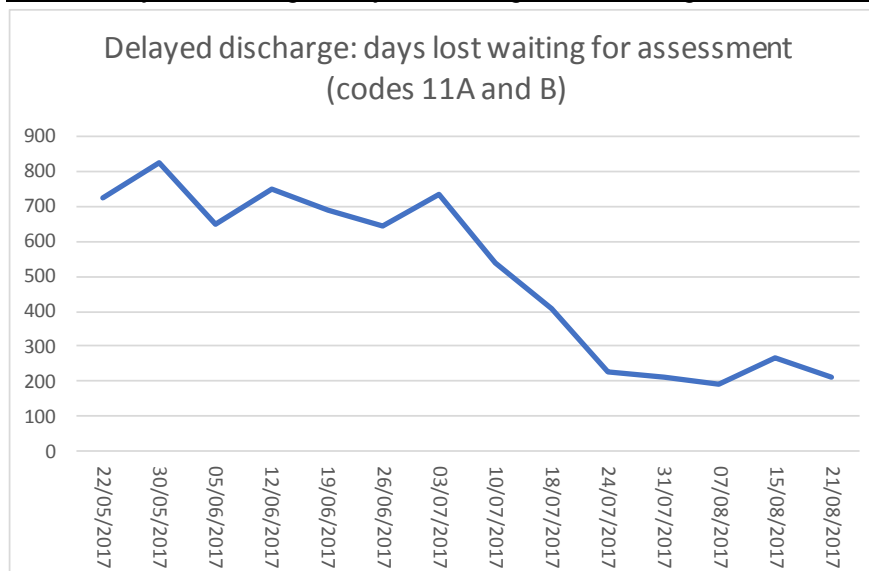
12. The main reasons for reportable delays are summarised in Table 2. It shows that waiting for a care home place and for domiciliary care continues to be the main cause of delay.

Table 2. Reportable delays by reason

	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17
Assessment	24	43	42	47	32	37	30	20	30	28	29	13
Care Home	59	50	72	64	68	77	69	51	53	72	74	57
Domiciliary Care	76	81	86	69	81	97	107	101	97	65	81	85
Legal and Financial	0	0	0	0	2	2	0	2	1	1	1	2
Other	11	1	1	1	2	2	3	2	2	2	2	4
<b>Total</b>	<b>170</b>	<b>175</b>	<b>201</b>	<b>181</b>	<b>185</b>	<b>215</b>	<b>209</b>	<b>176</b>	<b>183</b>	<b>168</b>	<b>187</b>	<b>161</b>
% Domiciliary Care	45%	46%	43%	38%	44%	45%	51%	57%	53%	39%	43%	53%

13. One area of marked improvement has been the reduction in bed days lost for people waiting for assessments, from 822 at 30 May to 211 for 21 August. This represents a reduction of 74%, which has been achieved at a time of high vacancy levels in operational teams.

*Chart 2: Days lost through delayed discharge while waiting for assessment*

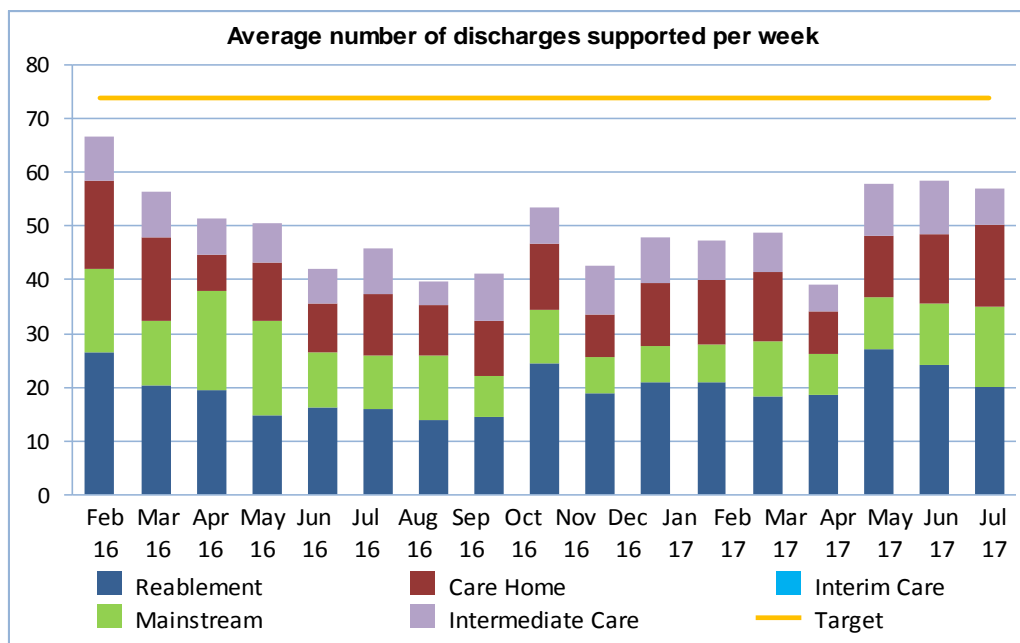


14. The average number of people supported to leave hospital each week is shown in Table 3 below. Chart 3 shows how people were supported. The average weekly target of 74 was set to achieve the intended targets for the reduction in delays by December 2017. However, the level of support required is not being achieved.

Table 3. People supported to leave hospital

	Aug 16	Sep 16	Oct 16	Nov 16	Dec 16	Jan 17	Feb 17	Mar 17	Apr 17	May 17	Jun 17	Jul 17
People supported to be discharged in calendar month	193	209	236	272	258	223	230	213	186	203	170	168
Monthly Target	317	328	328	307	328	317	328	317	328	328	328	328
Average discharges per week	45	47.2	57	68	58.3	52	51.9	49.7	42	45.8	39.7	37.9
Av Weekly Target	74	74	74	74	74	74	74	74	74	74	74	74

Chart 3. The average number of people supported to leave hospital per week



15. Table 4 below shows the net change in the number of people whose discharge from hospital is delayed for the 12 weeks to 21 August 2017. This is the difference between the number of people *ceasing* to be delayed and people *becoming* delayed each week. The volume of new and ceasing delay activity is highest in North West. The total number of people *supported to leave hospital* tends to be higher than the number ceasing to be delayed, showing that people who are *not delayed* are being supported to leave hospital. Further work is planned to investigate this in detail.

*Table 4: Summary of delayed discharge flow (averages over the 12 weeks to 21 August)*

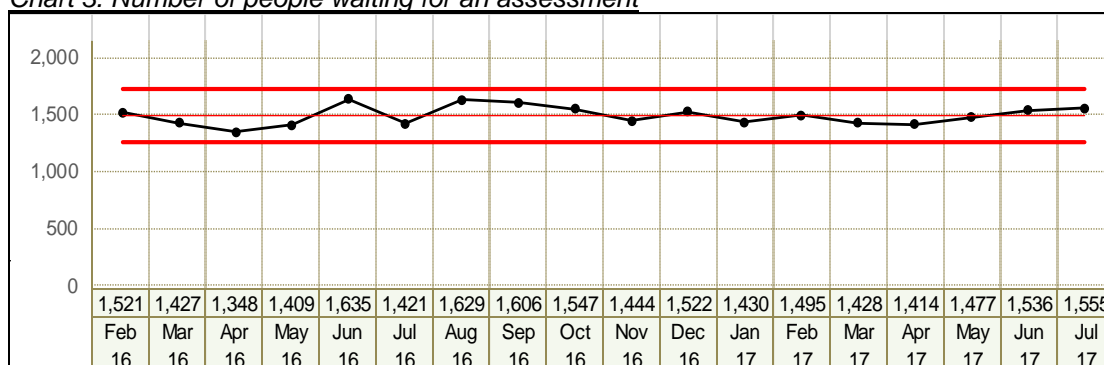
	North East	North West	South East	South West	Total
Average new delays per week	8	15	11	10	45
Average delays ended per week	8	17	10	9	44
People supported to leave hospital	12	18	10	14	54
People waiting in hospital for a package of care (including non-delayed)	8	22	19	22	70

Note that people may leave the list temporarily if they become unwell and not fit for discharge.

### Overview of performance: Delays in the community

16. The number of people waiting for assessments and the number of people waiting for support at home are key indicators of pressures across the system.
17. Charts 3a, 3b are set up to show whether month to month change is likely to result from normal (common cause) variation, or instead is likely to reflect a significant change. Using this statistical process control method on an ongoing basis will help to identify whether improvement actions are having the intended effect, i.e. are bringing about significant change in delays.
18. For the assessment waiting list, Chart 3 shows normal month to month variation, with no sign of a reducing trend.

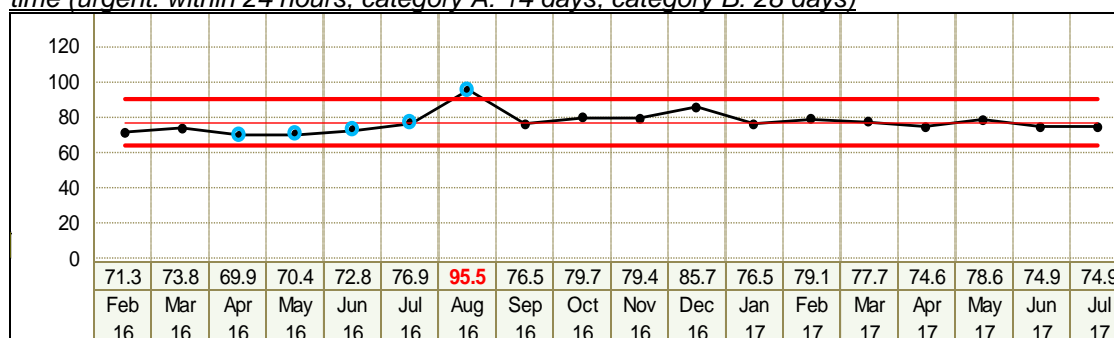
*Chart 3. Number of people waiting for an assessment*



19. Chart 3b shows the proportion of people waiting, outside the standard timescales which are detailed below:

Category	Definition	Standard timescale – to be completed within	Median waiting time during July 2017
U (Urgent)	Where there is an actual or immediate threat to the safety of an individual and/ or those around them	24 hours	0.5 days
A	Where there are risk factors including: <ul style="list-style-type: none"> <li>• a sudden or significant change in circumstances</li> <li>• a significant difficulty in managing essential personal care tasks</li> <li>• extreme stress upon carers</li> </ul>	14 days	49 days
B	Where there is a chronic condition or circumstance resulting in: <ul style="list-style-type: none"> <li>• some degree of risk in undertaking personal care tasks</li> <li>• carers needing support</li> <li>• a planned change in living/support arrangements being required</li> </ul>	28 days	82 days

*Chart 3b. The percentage of people waiting for an assessment beyond the standard response time (urgent: within 24 hours; category A: 14 days; category B: 28 days)*



20. The number of people waiting for domiciliary care shows a steady increase over the past three months, particularly for older people in the community.

*Table 5. Number of people waiting for domiciliary care: older people by location and adults under 65*

Time Series of People Waiting	Older People				People aged under 65	Total
	a) Receiving Reablement, awaiting Mainstream service	b) In the community, including people with Intermediate Care	c) In hospital	Total	Total	
27/03/2017	72	226	77	375	174	549
03/04/2017	75	242	86	403	182	585
10/04/2017	71	252	86	409	187	596
17/04/2017	68	250	74	392	186	578
24/04/2017	82	245	60	387	189	576
01/05/2017	79	248	47	374	192	566
08/05/2017	78	253	35	366	191	557
15/05/2017	89	252	36	377	191	568
22/05/2017	104	261	40	405	187	592
29/05/2017	111	279	39	429	189	618
05/06/2017	108	287	47	442	191	633
12/06/2017	111	294	70	475	191	666
19/06/2017	104	295	55	454	192	646
26/06/2017	103	302	62	467	184	651
03/07/2017	112	301	57	470	187	657
10/07/2017	113	318	68	499	191	690
17/07/2017	117	311	68	496	189	685
24/07/2017	123	316	70	509	195	704
31/07/2017	124	325	56	505	196	701
07/08/2017	129	342	82	553	190	743
14/08/2017	133	346	84	563	192	755
21/08/2017	131	356	71	558	201	759
28/08/2017	131	364	78	573	207	780
04/09/2017	133	352	76	561	204	765
11/09/2017	134	363	73	570	203	773

21. The current average waiting time for a domiciliary care packages is 114 days.
22. Table 6 below shows the number of support hours for which people are waiting.



*Table 6. Number of domiciliary care hours required: older people by location and adults under 65*

Time Series of Hours Waiting	Older People				People aged under 65	
	a) Receiving Reablement, awaiting Mainstream service	b) In the community, including people with Intermediate Care	c) In hospital	Total	Total	Total
27/03/2017	763	1,780	1,172	3,715	1,151	4,866
03/04/2017	752	1,835	1,263	3,850	1,188	5,038
10/04/2017	655	1,888	1,227	3,770	1,321	5,091
17/04/2017	587	1,914	1,176	3,677	1,285	4,962
24/04/2017	703	1,853	962	3,518	1,267	4,785
01/05/2017	670	1,956	748	3,374	1,452	4,826
08/05/2017	638	2,018	654	3,310	1,486	4,796
15/05/2017	717	1,993	618	3,328	1,503	4,831
22/05/2017	897	2,203	677	3,776	1,489	5,265
29/05/2017	947	2,370	650	3,966	1,568	5,534
05/06/2017	908	2,302	801	4,011	1,657	5,668
12/06/2017	929	2,238	1,119	4,286	1,526	5,812
19/06/2017	867	2,243	1,033	4,143	1,580	5,723
26/06/2017	886	2,238	1,011	4,135	1,359	5,495
03/07/2017	942	2,250	1,016	4,208	1,412	5,620
10/07/2017	904	2,365	1,186	4,455	1,464	5,919
17/07/2017	964	2,223	1,203	4,390	1,394	5,784
24/07/2017	1,048	2,297	1,199	4,544	1,565	6,109
31/07/2017	1,069	2,332	982	4,382	1,584	5,966
07/08/2017	1,101	2,471	1,225	4,796	1,431	6,228
14/08/2017	1,109	2,555	1,368	5,032	1,477	6,509
21/08/2017	1,100	2,646	1,272	5,018	1,524	6,542
28/08/2017	1,101	2,599	1,344	5,045	1,591	6,635
04/09/2017	1,118	2,552	1,266	4,936	1,605	6,541
11/09/2017	1,195	2,600	1,121	4,916	1,576	6,492

## Key pressures and challenges

23. The main ongoing challenges associated with addressing the number and length of delayed discharges are:
- the lack of availability of packages of care, exacerbated by an increase in vacancies and sickness levels in the in-house service – this is reflected both in the number of people waiting in hospital (83) and in the number waiting to move on from the reablement service (133 at 21/8/2017)
  - recruitment and retention of care staff – the local contracted providers have reported high turnover rates of staff in the region of 30 – 50%
  - the lack of availability of local authority funded care home places at the national contract rate (self-funders form around half of the total care home residents supported by the Council)
  - a lack of specialist dementia beds.

## Improvement actions

24. The Flow Programme Board has recently reviewed the content of the programme and identified three specific areas for attention:
  - maximising capacity through the care at home contract
  - optimising flow through the hospital system and discharge from hospital
  - technology-enabled care as a means of increasing capacity to support people to live independently in the community, avoiding the need for admission to hospital and facilitating timely discharge.
25. Weekly “star chamber” meetings are held with locality managers. These meetings have helped to reduce the length of time that people are delayed in hospital and identified a number of practice, culture and service capacity-related issues. Two examples of this are:
  - inconsistent application of the moving on policy for self-funders who are waiting for a care home place
  - delays relating to house cleaning, stemming from contract issues
26. The locality Multi-Agency Triage Teams (MATT) and Hubs are now operational. The MATTs review all delays, pending discharges from hospital to their locality who are not delayed, and admissions to hospital in the previous 24 hours. They identify patients who could be supported home sooner from hospital with the right community support. Hub Managers now also join the hospitals’ conference calls where all activity is discussed each morning.
27. A review of the hospital OT assessment process (accounting for 70% of requests for packages of care) is underway.
28. An early support discharge process is currently being tested in the SW Edinburgh Hub.
29. The interim leadership team is reviewing the above at pace to focus on key priorities and provide a clearer view of objectives for the rest of the year and beyond. What is clear is that a concise strategic plan for older people is essential and this needs to include a robust demand and capacity plan for the short-, medium- and longer term.

## Key risks

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30. Current levels and patterns of support to enable people to leave hospital are not sufficient to bring about the reduction in the level of delay required. There are major challenges in terms of the capacity of the care system and of affordability.

## Financial implications

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31. There is a high level of unmet need in hospital and in the community, which has significant cost implications which are not reflected in current financial forecasts.

## Involving people

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32. As the Locality Hubs and Clusters become operational, there will be further engagement with local communities to develop the model further.

## Impact on plans of other parties

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33. The ability of the Edinburgh Health and Social Care Partnership to reduce significantly the number of people delayed in hospital and the length of those delays impacts on NHS Lothian. Partners are kept informed of progress by the Chief Officer through the IJB Chief Officers Acute Interface Group.

## Background reading/references

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None.

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## Appendices

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<b>Appendix 1</b>	Phased targets for the number of people whose discharge from hospital is delayed
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## Appendix 1

Phased targets for the number of people whose discharge from hospital is delayed:  
non-complex (reportable) and complex

	28 Aug	25 Sep	30 Oct	27 Nov	25 Dec
1. Non-complex					
City Target	162	136	103	76	50
NE Target	30	25	20	15	11
NW Target	41	34	25	18	11
SE Target	46	39	30	22	15
SW Target	45	38	28	21	13
2. Complex					
City Target	20	17	15	12	10