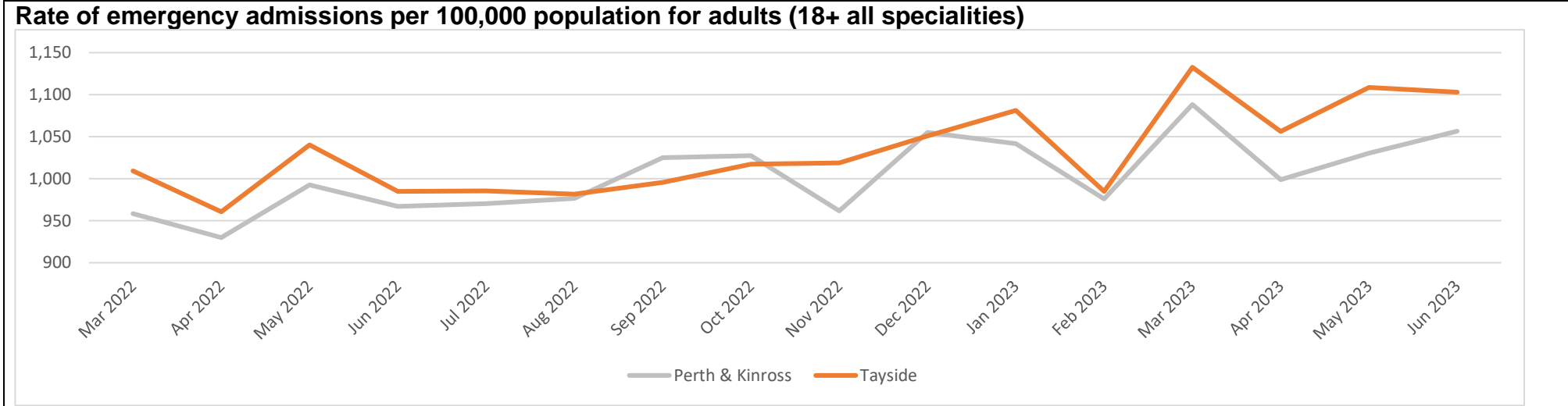


1.1 Key Strategic Performance Indicators (over time)

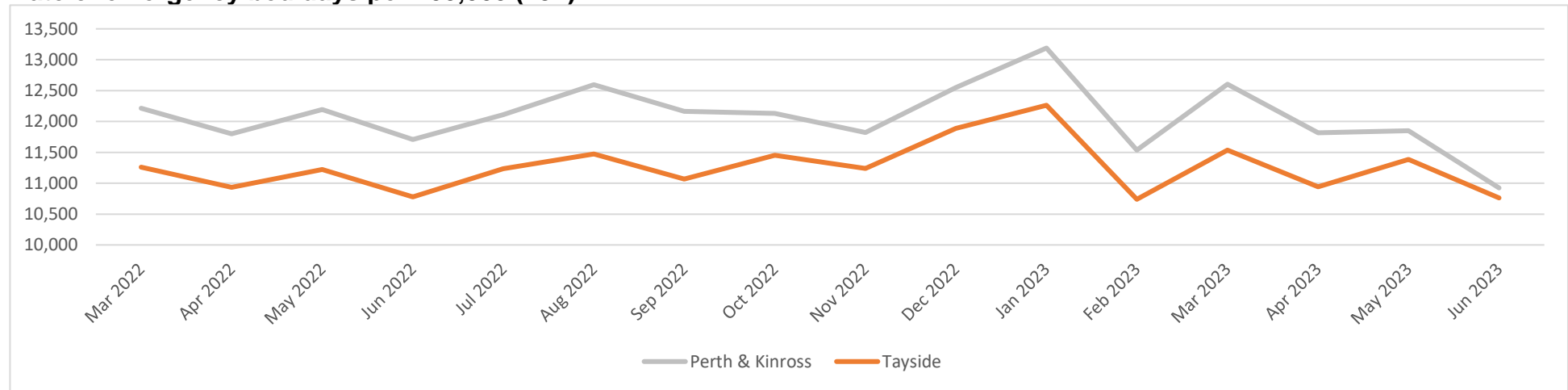
National Indicator Monthly Update Charts (local data sources)



Source: Local Data NHST TAN Report. NI-12 Equivalent

**Notes to assist with narrative creation:**  
 Emergency admissions have increased by 1.64% which is lower than the rise seen across Tayside overall at 2.31%. With an older population it may be expected that demand for emergency care may increase and we are continuing to develop our services in response to that demand. To tackle emergency admissions this is about prevention and early intervention and we are developing our community based models to ensure earlier intervention in the person’s care journey to limit deterioration and prevent a hospital admission where possible. Our new model for Hospital to Home in Perth City will support this approach further.

### Rate of emergency bed days per 100,000 (18+)

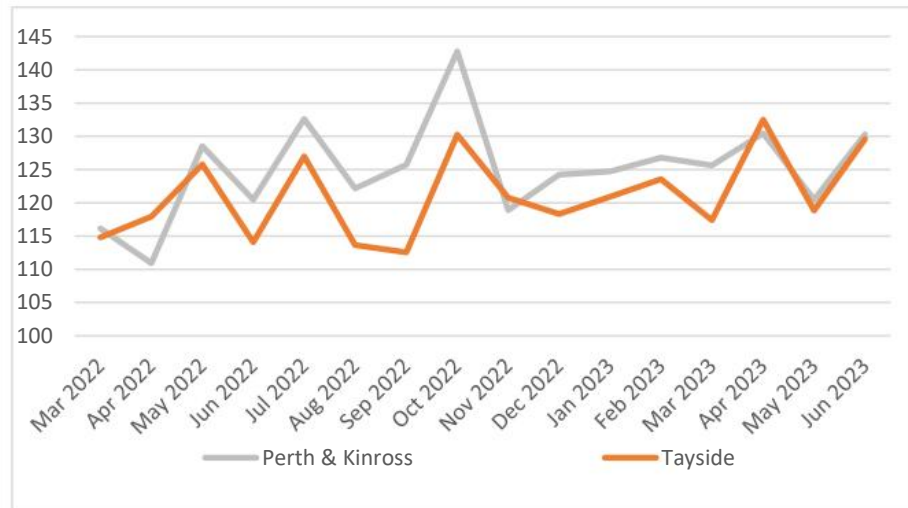


Source: Local Data NHST TAN Report. NI-13 Equivalent

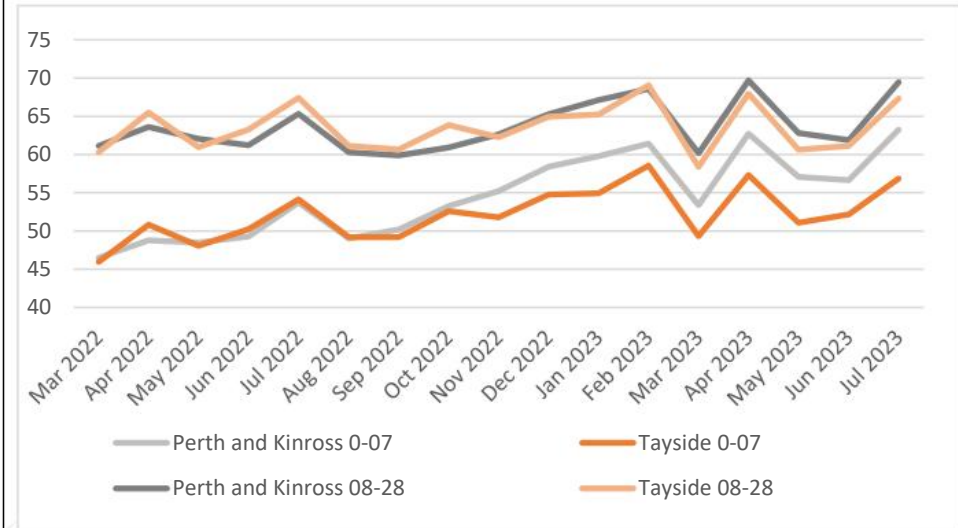
The rate of emergency bed days has declined slightly by 0.76% and we remain higher than Tayside overall, which may be expected given demographic challenges. The gap has narrowed significantly in recent months. This indicator is driven by the length of stay in hospital for people admitted as an emergency. Reducing people's length of stay in hospital has been possible through a combination of: streamlining operational processes, focusing on robust multi-disciplinary discharge planning including setting planned dates of discharge and integration of the discharge team. We have added extra capacity with our early discharge service to work alongside our HART and Care at Home services. We have also used interim placements where people are discharge to a care home setting on a temporary basis where their home circumstances may be more complex.

Additionally, when people present for emergency care we have created a new approach to dealing with frailty. Our "Frailty at the Front Door" model is ensuring that people admitted to hospital gain access to multi-disciplinary support faster. This is leading to earlier discharges supported by community based services.

**Rate of Readmissions to hospital within 28 days of discharge per 1,000 discharges (18+)**



**Rate of readmissions to hospital within 0-7 and 8-28 days of discharge per 1,000 discharges (18+)**



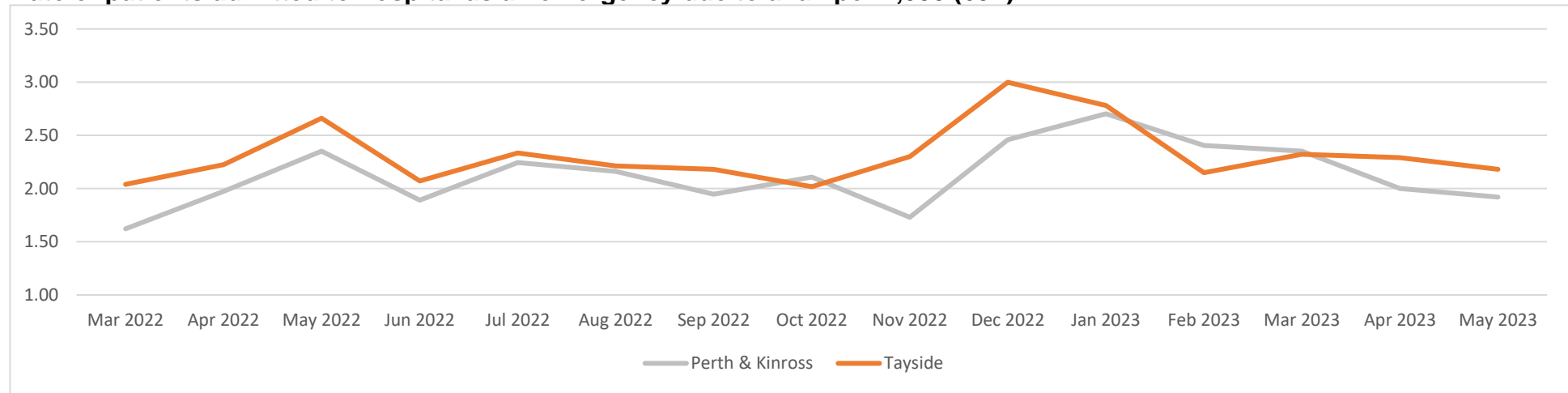
Source: Local Data NHST TAN Report. NI-14 Equivalent

Our rate for readmissions within 28 days is broadly stable (0.28% increase) across the reporting period. Although this rate remains above Tayside overall the gap has narrowed significantly in recent months.

Where divergence exists more notably when compared to Tayside, is in relation to readmissions within 7 days of discharge. The reason for this is not yet fully understood however this is being investigated and we engaged with Health Improvement Scotland to examine and improve our approach to supporting frailty.

Beyond understanding more about what is impacting on 7 day readmissions the development of our community based services such as our Locality Integrated Team (LINC)s and our respiratory services continue to support people at home where that is possible. These services will be further enhanced through new approaches to dealing with “Urgent Care” and in the introduction of “Hospital at Home”.

### Rate of patients admitted to hospital as an emergency due to a fall per 1,000 (65+).

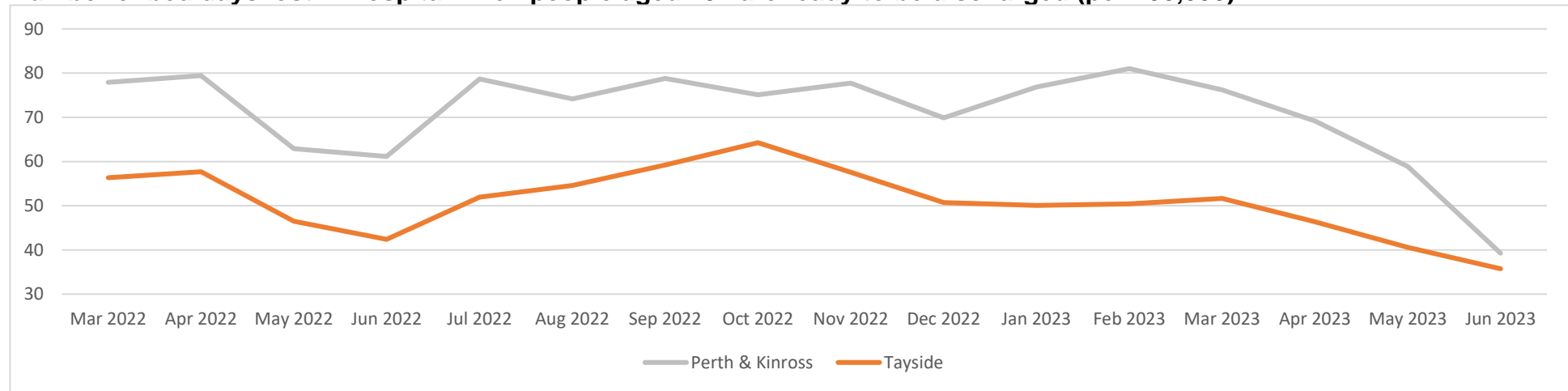


Source: Local Data NHST TAN Report. NI-16 Equivalent

The rate of falls resulting in an emergency has declined by 1.54% broadly in line with Tayside overall. The absolute numbers that drive this indicator are relatively small and so small movements can influence the rates to large extent.

Likelihood of falling increases with frailty and although it can occur at any age frailty prevalence increases with age. Our focus on supporting our older population continues in respect to the falls prevention where we are currently reviewing our falls pathway with colleagues across Tayside to ensure a consistent and standardised approach. Working with Health Improvement Scotland on frailty is also contributing to this and we will integrate any necessary changes into our Locality Integrated Teams to further support older people.

### Number of bed days lost in hospital when people aged 75+ are ready to be discharged (per 100,000)



Source: Local Data NHST TAN Report. NI-19 Equivalent

Over the reporting period our delayed discharges have declined by 4.06% and at a faster rate than seen across Tayside. Most notably however we have seen a significant decline since February this year. Similar to our work to reduce emergency bed days and emergency admissions, this has been possible due to a whole system approach being implemented. Most significantly we have streamlined operational processes, focusing on robust multi-disciplinary discharge planning, planned dates of discharge, and integration of the discharge team. We have also added extra capacity with an early discharge service working alongside our HART and Care at Home Teams and we have used interim placements as another discharge option where the person's home circumstances are more complex.

## 1.2 National Indicators Key Performance: Local Updates

The Scottish Government requires us to measure our performance using the core set of National Indicators (NIs). The table below provides a summary of performance to date against indicators for which data is available.

National Indicator Equivalents		2022/23			Latest			Comparison		
LOCAL DATA INDICATORS	measure	Tayside	Perth & Kinross	Period	Tayside	Perth & Kinross	Period	P&K movement from 2022/23	Tayside movement from 2022/23	P&K compared to Tayside
Rate of emergency admissions per 100,000 population for adults (18+ all specialities).	Rolling 12-month rate	12,234	12,011	Mar 23	12,516	12,208	Jun 23	1.64%	2.31%	-2.53%
Rate of emergency bed days per 100,000 (18+).	Rolling 12-month rate	135,831	146,403	Mar 23	135,985	145,287	Jun 23	-0.76%	0.11%	6.40%
Readmissions to hospital within 28 days of discharge per 1,000 discharges (18+).	Rolling 12-month rate	121.52	127.03	Mar 23	122.95	127.39	Jun 23	0.28%	1.18%	3.48%
Rate of patients admitted to hospital as an emergency due to a fall per 1,000 (65+).	Rolling 12-month rate	28	26	Mar 23	28	26	May 23	-1.54%	-1.47%	-7.40%
Number of days people aged 75+ spend in hospital when they are ready to be discharged per 1,000.	Rolling 12-month rate	637	892	Mar 23	613	856	Jun 23	-4.06%	-3.75%	28.34%

Within 3%, of meeting or exceeding the comparative figure	Between 3% and 6% away from the comparative figure	More than 6% away from the comparative figure
-----------------------------------------------------------	----------------------------------------------------	-----------------------------------------------

Source: Local Data. The data used for this update is unpublished data for management information purposes only. It is subject to change and validation as more information becomes available over time.

NOTE: No local or national data is currently available for the following core suite indicators. As this becomes available it will be included in future reports: NI-11 "Premature mortality rate per 100,000 persons", NI-15 "Proportion of last 6 months of life spent at home or in a community setting", NI-17 "Proportion of Care Services rated good or better in Care Inspectorate inspections", NI-18 "Percentage of 18+ with intensive social care needs receiving Care at Home" and NI-20 "Percentage of health and care resource spent on hospital stays where the patient was admitted as an emergency".