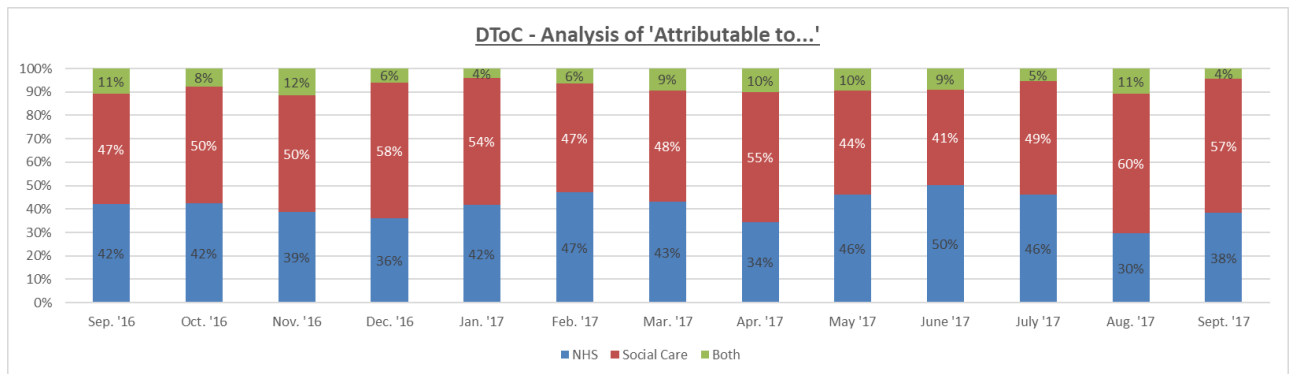


Scrutiny Report – Adult Social Care Performance: Appendix B

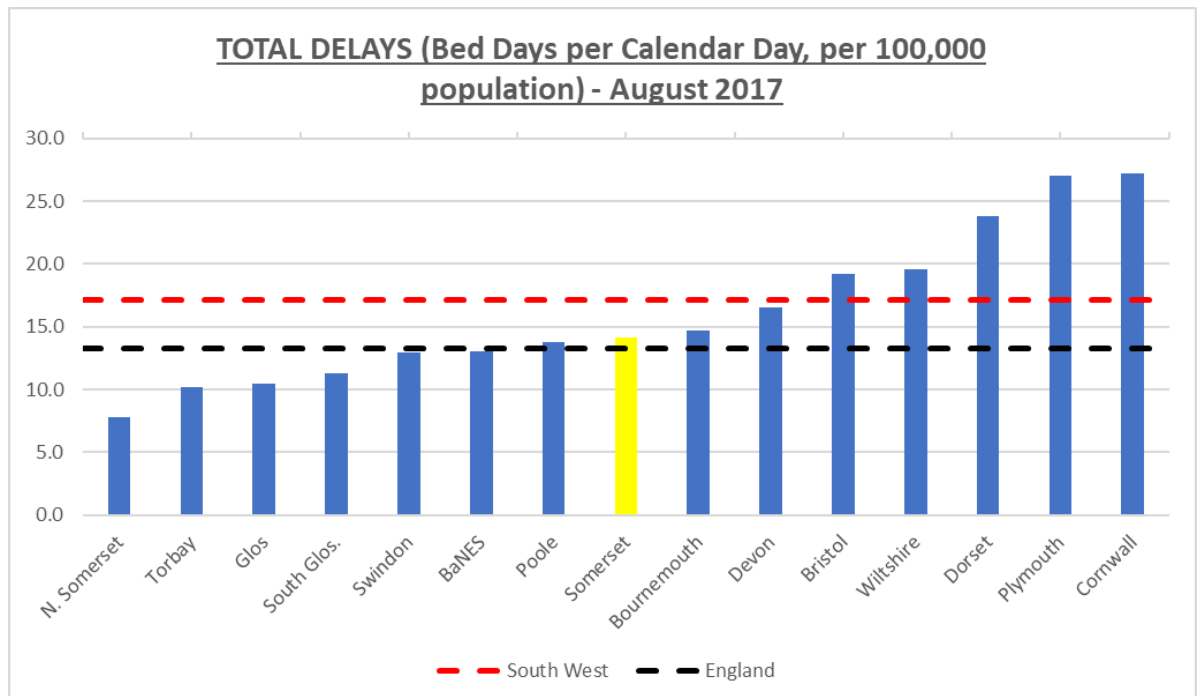
The charts below show how Somerset’s performance on DToC has changed over the past 12 months and also provides some comparison both nationally and regionally.

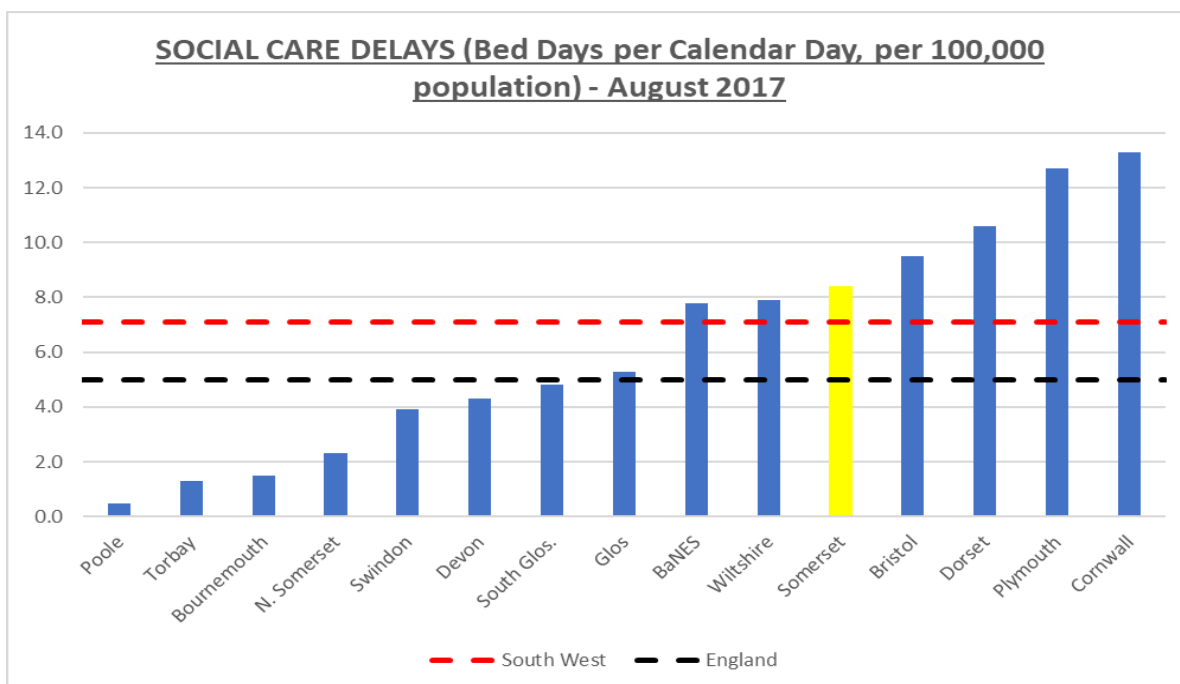
A. Analysis of ‘Attributable to...’ – all delays are attributable to either; NHS, Social Care or Both. This chart shows how this breakdown has changed over the last 12 months:



Commentary: The statistical release from the Department of Health that accompanied the publication of the September data shows that on average 36.3% of delays were attributable to Adult Social Care. Somerset’s August performance makes us an outlier.

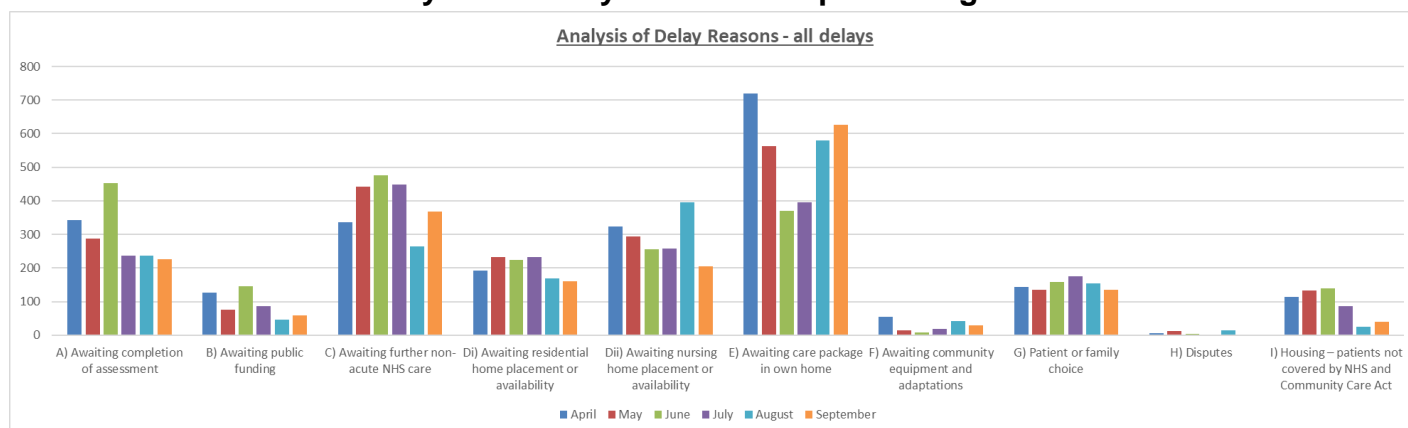
B. South West Region comparison of Delayed Bed Days (average number of delayed days per calendar day) per 100,000 population for August 2017:





Commentary: For all delays (NHS, Social Care and Both) Somerset’s August performance puts us 8th out of 15 South West LAs and 107th Nationally. For Social Care attributable delays Somerset are ranked 11th in the South West and 130th Nationally.

C. Analysis of Delay Reasons – April to August 2017:



Commentary: Across these 6 months an average of 26% of delays were due to ‘Awaiting Care Package in Own Home’. The statistical release from the Department of Health in September states that nationally this is the number one reason for Social Care delays.

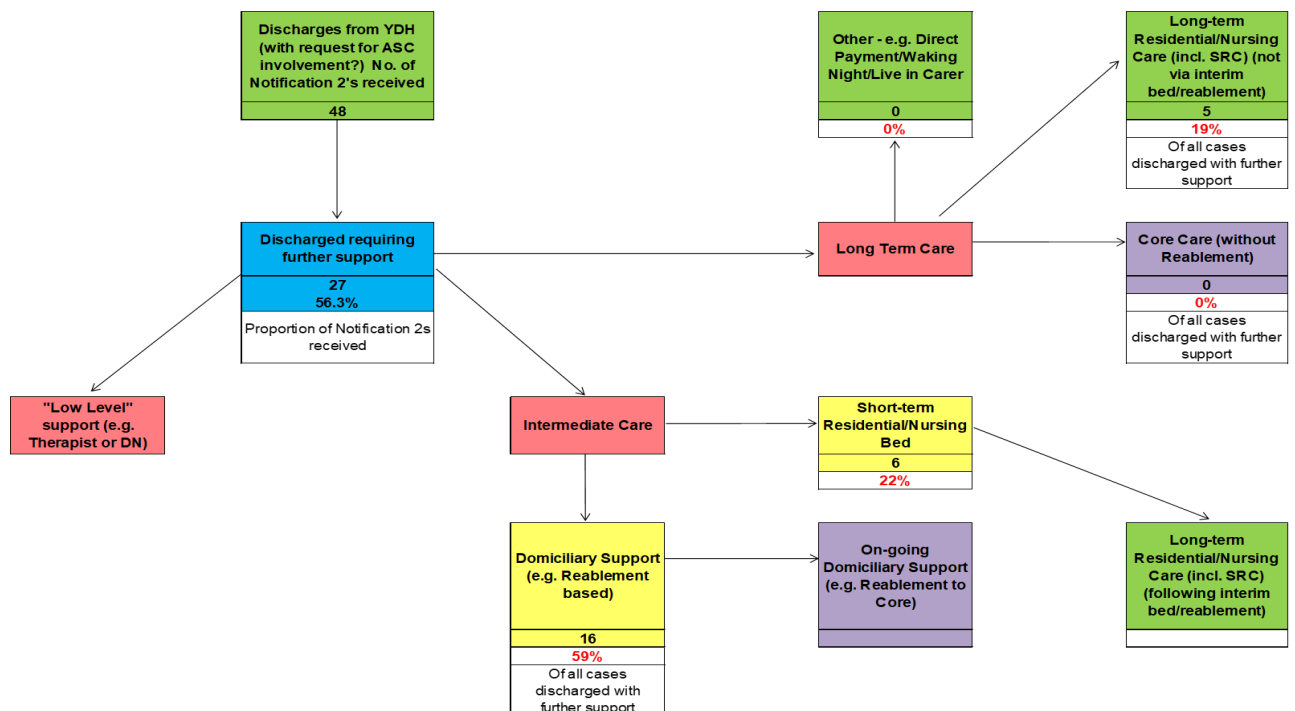
D. What does good look like?

We now have a clear definition of what good looks like in terms of hospital flow and are monitoring each of these measures on a monthly basis:

- 300 out of every 1,000 (approx.. 30%) of older people (65+) admitted to hospital are discharged requiring further support,
- Of these 300 admissions, 250 of them should be discharged into Reablement services (either bed based [25] or domiciliary [225]),
- Approx. 86 people discharged into reablement support (either bed based or domiciliary) require on-going (core) domiciliary support. This equates to 8.6% of total hospital discharges and approx. 34% of discharges into reablement,
- Approx. 8 people discharged into reablement support (either bed based or domiciliary) require long-term residential/nursing placements. Less than 1% of total hospital discharges and approx. 3% of discharges into reablement.
- Zero discharges direct to long-term residential/nursing placements,
- Zero discharges direct to core domiciliary care.

An example of how we are monitoring patient flow is shown in the diagrams below – these are for Musgrove Park Hospital and Yeovil District Hospital for September 2017.

Snapshot - Yeovil District Hospital - September 2017:



Snapshot - Musgrove Park Hospital - September 2017:

