

REPORT TO FORMARTINE AREA COMMITTEE – 22 JANUARY 2019

ABERDEENSHIRE H&SCP PERFORMANCE & OUTCOMES FRAMEWORK QUARTER 2 REPORTING – July to September 2018

1 Recommendations

The Committee is recommended to:

- 1.1 Note the content of the IJB Performance Q2 Report**
- 1.2 Provide feedback and/or recommend actions to the IJB for their consideration.**

2 Background / Discussion

- 2.1 The attached report (Appendix A) was approved at the Integration Joint Board on 12 December 2018 for circulation to all Area Committees for noting and recommending improvement actions as appropriate. An additional appendix containing the 'locality' performance against the Aberdeenshire-wide performance has been attached in Appendix B.

The 'locality' performance indicators reported in Appendix B have been reviewed as part of a broader review of the H&SCP performance framework. Appendix B reflects changes that have been made to the set of Aberdeenshire-level performance indicators reported quarterly to the IJB. Furthermore, in response to feedback from Elected Members, all of the indicators reported in Appendix B have locality-level data (in this case, at Formartine level). Further development to the Aberdeenshire H&SCP performance framework will be ongoing during 2019/20 and there is scope to augment the current set of locality indicators in Appendix B with additional performance information which would be useful to the Formartine Area Committee. In addition, an annual performance report for the Formartine Locality Plan will be submitted to the Formartine Area Committee with Q4 performance reports.

In order to provide a broader overview of H&SC relevant to each Area Committee, work is underway around the development of a suitable regular briefing format from locations. This would supplement the performance information currently provided for Quarters 2 & 4.

- 2.2 The Head of Finance and Monitoring Officer within Business Services have been consulted in the preparation of this report and are satisfied that the report complies with the Scheme of Governance and relevant legislation.

3 Scheme of Governance

- 3.1 The Committee is able to consider this item in terms of Section B.1.2 of the List of Committee Powers in Part 2A of the Scheme of Governance, which allows the Area Committee to consider, comment on and make recommendations to any other appropriate Committee on any matter or policy which impacts their area.
- 3.2 This report provides relevant performance information to support the Area Committee in making recommendations to the IJB for improvements to the delivery of the Social Work service.
- 3.3 This report is for information only where it relates to the performance and delivery of services provided by NHS Grampian.

4 Implications and Risk

- 4.1 An equality impact assessment is not required for the Performance Framework because its purpose is to underpin the strategic direction for the service and there will be no differential impact, as a result of the report, on people with protected characteristics.
- 4.2 There are no staffing or financial implications.
- 4.3 The following Risks have been identified as relevant to this matter on a Corporate Level:
- ACORP 007 – Social Risk (e.g. population changes, demographic changes) – link to [Corporate Risk Register](#)

The following Risks have been identified as relevant to this matter on a Strategic Level:

- IJB risk 10 (Service Standards). To monitor service performance against an agreed set of performance measures.
 - IJB risk 7 (Effective Leadership of IJB). To ensure appropriate information is presented to IJB to allow it to deliver this function.
- 4.4 Performance management reporting is a legislative requirement under section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014.

Angie Wood
Partnership Manager (Central)
Aberdeenshire Health and Social Care Partnership

Report prepared by: Katherine Regan, Strategic Development Officer, Aberdeenshire Health and Social Care Partnership

13 December 2018

**REPORT TO ABERDEENSHIRE INTEGRATION JOINT BOARD
12th DECEMBER 2018**

**ABERDEENSHIRE HSCP PERFORMANCE & OUTCOMES FRAMEWORK
QUARTER 2 REPORTING – JULY TO SEPTEMBER 2018**

1 Recommendation

It is recommended that the IJB:-

- 1.1 Note the content of the IJB Performance Q2 Report**
- 1.2 Comment on performance against the Strategic Commissioning Plan by Exception (Appendices 1 and 2)**
- 1.3 Note this Report will be circulated to the Area Committees for their information and reflections and that any feedback from the Area Committees will be shared with IJB members to ensure there is an interactive process.**

2 Risk

- 2.1 IJB risk 10 (Service Standards). To monitor service performance against an agreed set of performance measures.
IJB risk 7 (Effective Leadership of IJB). To ensure appropriate information is presented to IJB to allow it to deliver this function.**
- 2.2 Performance management reporting is a legislative requirement under section 42 of the Public Bodies (Joint Working) (Scotland) Act 2014.**

3 Background/Discussion

- 3.1 The purpose of this report is to ensure the Integration Joint Board (IJB) fulfils its ongoing responsibility to ensure effective monitoring and reporting on the delivery of services and on the programme of work as set out in the Strategic Plan.**
- 3.2 This report presents the HSCP performance information reported against the strategic priorities for the period July to September 2018 (Q2) for the Board's consideration. It includes as an Exception Report those indicators which are currently a red status (not meeting local targets and out with tolerances) which can be seen in Appendix 2.**
- 3.3 The performance information is to allow IJB scrutiny. The scale and breadth of improvement projects means it is difficult to align system information to any single project as the major projects aim to hit multiple areas within the system in order to affect change.**

- 3.4 The Quarter 2 Report will be subsequently submitted to Area Committees, as part of the Performance and Outcomes Framework, for their information and comment.

Review of the HSCP Performance Framework

- 3.5 Development of the performance framework is continuing. The current areas of focus are public health, performance indicators for the six administrative areas of Aberdeenshire, and a review of targets and tolerances for the local (Aberdeenshire) performance indicators.

It is proposed that moving forward, Area Committees' performance reports will be streamlined to ensure their reports do not include performance indicators for which area-level data is not available. Area Committee performance reports will be based on the same local (Aberdeenshire) performance indicators as the IJB, augmented by additional performance information that has been requested by Elected Members. Pending approval of this proposal, the new style of Area Committee reports will be submitted to the next scheduled Area Committee meetings, in line with normal calendar of reporting. Area Committees will also receive performance reports in relation to the relevant Locality Plan with Quarter Four performance reports, again in line with the normal calendar of performance reporting.

- 3.6 Updates on the outcomes of these developments to the Performance Framework will be provided with future performance reports for consideration by the IJB.
- 3.7 A reporting timetable is under development to provide a forward plan of the scheduling of themed performance reports (the first examples of these were submitted with the Q1 performance reports in relation to dementia services and i-matter survey results). These reports have been designed to provide a broader overview of work taking place around a specific area, to augment the performance data. The proposed reporting timetable is below (at current time, dates for 2019 IJB meetings are to be confirmed):

Quarter 1

- Empowering the workforce (i-matter survey results and staff sickness absence data)
- Dementia Services

Quarter 2

- National Integration Indicators

Quarter 3

- Complaints (report from the Adult Social Work and Clinical Governance Committee)
- Community Justice

Quarter 4

- Public Health
- Mental Health (To be confirmed pending the approval of the Mental Health Strategy in summer 2019)
- Locality Plans

3.8 Further engagement will take place with IJB members to continue to refine and develop a shared understanding of IJB performance information requirements, including desired content, format and frequency of reporting.

Report Structure

3.9 The front section of this report gives an overview of any national or service updates. Appendix 1 details all the local measures which are reported to management. Appendix 2 considers key exceptions for further focus. Appendix 3 details the Aberdeenshire Core Suite of national integration indicators. This report is now being submitted on an annual basis, to reflect annual data updates from Information Services Division (ISD).

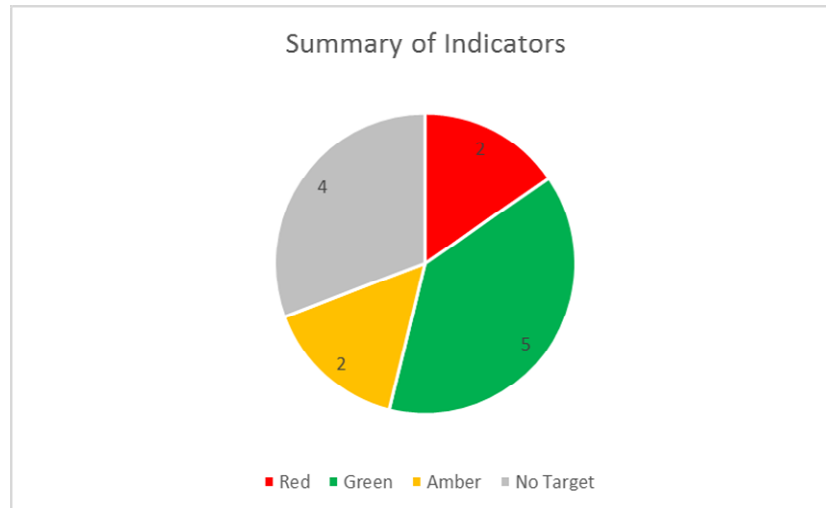
National

3.10 The recently published National Review of Target and Indicators for Health and Social Care in Scotland makes a number of recommendations regarding the development of targets and indicators at a national and local level. These recommendations have been considered in our approach to review of the HSCP performance framework.

Current Performance - Quarter 2 2018/19:

3.11 The Aberdeenshire HSCP local indicators have been given challenging targets to meet. To date, targets have been set using local trends and taking into consideration demographic projections. In due course further work will be undertaken to ensure the targets set against each indicator remain appropriate moving forward.

3.12 We have 13 local indicators, with 2 indicators in Red Status which are outwith target tolerances detailed in Appendix 2, also detailing improvement actions currently being taken to address this performance. There are 2 in Amber Status: these are not meeting target but within agreed tolerances. Five of the indicators are at Green Status. The remaining 4 indicators have no set target.



3.13 The Chief Officer, along with the Chief Finance Officer and the Legal Monitoring Officer within Business Services of the Council have been consulted in the preparation of this report and their comments have been incorporated within the report.

4 Equalities, Staffing and Financial Implications

4.1 An Equality Impact Assessment is not required for the Performance Framework because its purpose is to underpin the strategic direction for the service and there will be no differential impact, as a result of the report, on people with protected characteristics.

4.2 There are no specific staffing implications arising from this report.

Mike Ogg
Partnership Manager
Aberdeenshire Health and Social Care Partnership

Report prepared by:
Katherine Regan, Strategic Development Officer, Caroline Morrison, Senior Information Officer, and Angela MacLeod, Programme Manager, Aberdeenshire Health and Social Care Partnership

Date: 23 September 2018

Aberdeenshire Health and Social Care Partnership Performance Report - Quarter 2 (July - September 2018)
Aberdeenshire Indicators by Strategic Priority

KEY					
Performance Against Target	✓	No concern. Meeting target	Performance Against Previous Period	I	Improved on previous reporting period by more than 2%
	!	On Review. Not meeting target but within tolerance		S	+/- 2% on previous reporting period
	✗	Of concern. Not meeting target, out-with tolerance. Included in exception report		W	Worsened on previous reporting period by more than 2%

Aberdeenshire Strategic Priority	ID	Indicator Description	Source	Performance	Target	Previous Period	Against Last Period	Trend line	Trend Period	Current Period
1 Meaningful engagement with all stakeholders to optimise effective planning and use of resources	Performance measured through: a) Local Indicators L22-L40 based on data from the IBP Service Users and Unpaid Carers Survey (undertaken December 2016 to January 2017). b) National Outcome Indicators NI 1-9 based on data from the biennial Health and Care Experience Survey commissioned by the Scottish Government.									
2 Empowering the workforce	Performance measured through annual report based on data from the annual staff iMatter survey.									
3 Developing the support mechanisms that enable people to have improved health and wellbeing	Performance Indicators LO5 and LO6 (see below) are relevant to this priority area. Setting additional local performance indicators from the Public Health programme will be part of ongoing development work during 2018/19.									
4 Ensuring quality through safe, effective and sustainable service provision	Setting additional local performance indicators for this area will be part of ongoing development of the performance framework during 2018/19. Performance in this area is also measured through the National Integration Indicators and annual iMatter thematic report.									
5 Reducing inequalities to provide equitable outcomes for our communities	Performance Indicators LO5 and LO6 (see below) are relevant to this priority area. Setting additional performance indicators from the Public Health programme will be part of ongoing development work during 2018/19.									
6 Involving people as partners with early identification, management and appropriate support to promote recovery and achieve their potential	LO1	Percentage of clients receiving alcohol treatment within 3 weeks of referral	NHS	✓ 91.9%	90%	91.5%	S		5 Quarters	Jul-Sep 18
	LO2	Percentage of clients receiving drug treatment within 3 weeks of referral	NHS	! 89.0%	90%	90.8%	S		5 Quarters	Jul-Sep 18
7 Public protection	LO3	Number of adult protection referrals	SW	No Target 44	-	50	-		5 Quarters	Jul-Sep 18
	LO4	Percentage of unpaid work orders instructed within seven days	SW	✓ 73.90%	75%	8.2%	W		5 Quarters	Apr-Jun 18
8 Prevention and early intervention to promote healthy lifestyles and resilient communities	LO5	Smoking cessation in 40% most deprived areas after 12 weeks (number of individuals)	NHS	No Target 92	-	103	W		5 Quarters	Apr-Jun 18
	LO6	Number of Alcohol Brief Interventions being delivered (includes ABIs in priority settings only where data can be aligned to HSCP)	NHS	No Target 255	-	304	W		5 Quarters	Jul-Sep 18
9 Development of services that are fit for the future	Setting local performance indicators for this priority will be part of ongoing development of the performance framework during 2018/19. Performance in this area is also measured through the National Integration Indicators.									
10 The most appropriate and effective use of acute and community resources.	LO7	Number of bed days occupied by delayed discharges per quarter (inc code 9) per 1,000 18+ population	NHS/SW	No Target 23	-	20	W		5 Quarters	Jul-Sep 18
	LO8	Number of delayed discharges per quarter (inc code 9) (Census snapshot, monthly average for quarter)	NHS/SW	✗ 56	35	38	W		5 Quarters	Jul-Sep 18
	LO9	Rate of emergency occupied bed days per 1,000 population over 65s	NHS	✓ 2278	2360	2290	S		5 Quarters	Jul-Sep 18
	LO10	Emergency Admission rate per 1,000 population over 65s	NHS	! 197	193	193	S		5 Quarters	Jul-Sep 18
	LO11	Number of people over 65 years admitted as an emergency in the previous 12 months per 1,000 population.	NHS	✓ 126	125	125	S		5 Quarters	Jul-Sep 18
	LO12	ED attendance rates per 1,000 population (all ages, based on ED attendances at ARI, Dr Grays and RACH)	NHS	✗ 24.1	19.3	24.5	S		5 Quarters	Jul-Sep 18
	LO13	Percentage of people seen within 4 hours within community hospital Minor Injury Units (all ages based on all attendances at MIUs in Grampian)	NHS	✓ 99.8% (9081)	98.0%	99.6% (9538)	S		5 Quarters	Jul-Sep 18

Appendix A2
Aberdeenshire Health and Social Care Partnership
Exception Report - Q2 July to September 2018

LO8 - Number of Delayed Discharges inc Code 9
(Census snapshot, monthly average for quarter)

Year	Number
Q2 2017/18	38
Q3	52
Q4	40
Q1 2018/19	38
Q2	56

Key Points

Broadly the trend over the last number of years has been a reducing number of people delayed in hospital. The closure of a Care Home in August caused a sharp increase in the number of delayed discharge cases during that month, as residents were temporarily admitted to hospital until new care home places were found. In addition to that, the cause of delays is very varied and includes issues related to capacity and care home availability. Whilst the number does remain above our target we continue to prioritise the facilitation of discharge. Delayed discharge is also affected by seasonal fluctuations including the prevalence of winter illness and therefore the level will vary throughout the year.

Improvement Actions

We continue to ensure that national and local processes are followed, to ensure that people do not remain in hospital any longer than is required. Through the work of the Continuous Improvement team we regularly review local performance. The winter planning process has also reflected seasonal influences/variations and a wide programme of work has been planned to mitigate against seasonal pressures across the health and social care system Grampian-wide.

LO12 - ED Attendance rates per 1000 Population (all ages)

Year	Count	Rate
Q2	5762	22.0
Q3	5748	21.9
Q4	5538	21.1
Q1 2018/19	6412	24.5
Q2	6321	24.1

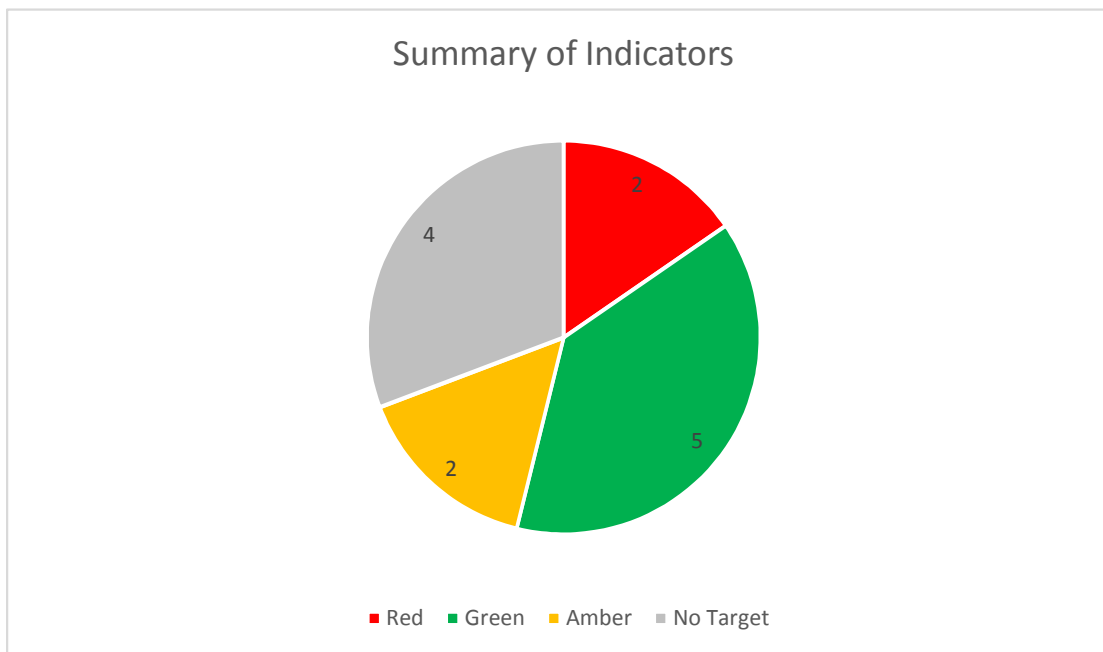
Key Points

This data is for attendances at ARI, Dr Grays and Royal Aberdeen Childrens Hospital by Aberdeenshire residents. The increase is reflective of a wider trend. ED attendances were 9% higher across Grampian during Q2 of this year compared to the same period in 2017/18. However, since the last quarter of this year there has been a decrease of 2.3%. Reasons for the recent significant increases in attendance are being reviewed, this reflects a regional trend.

Improvement Actions

In Aberdeenshire work continues to enhance primary care access and minimise unnecessary emergency attendances through continued delivery of the Virtual Community Ward model, the provision of enhanced diagnostic testing in the community and other initiatives e.g. minor ailments service delivered through Community Pharmacy. The winter planning process has also reflected seasonal influences/variations and a wide programme of work has been planned to mitigate against seasonal pressures across the health and social care system Grampian-wide.

Red	2
Green	5
Amber	2
No Target	4
	13



National Integration Indicators

Background

The National Core Suite of Integrations Indicators have been developed from national data sources to ensure the measurement approach is consistent across all partnerships in Scotland. Indicators are grouped into two types of measures, outcome indicators based on survey feedback and indicators derived from organisational/system data.

Data is generally refreshed and released as Management Information quarterly by ISD. Indicators 1-11, 17 and 18 are available as annual figures only however all other indicators are made available as both annual and quarterly figures. To ensure consistence all figures within this report are presented as annual figures. Annual figures may change slightly with each quarterly update that is released as data becomes more complete with each refresh.

All indicators are currently available up to 2017/18 with the exception of N11 which is only available to 2017 and N18 which is only available to 2016/17.

Aberdeenshire Summary from latest release

Aberdeenshire performs well compared to Scotland with only three indicators performing worse than Scotland based on the current reporting periods.

Areas where Aberdeenshire has performed worse than Scotland include

N4 - Percentage of adults supported at home who agree that their health and social care services seemed to be well co-ordinated

N6 – Percentage of people with positive experience of the care provided by their GP practice

N18 – Percentage of adults with Intensive care needs receiving care at home

Aberdeenshire sits in the top 10 partnerships for 12 of the 19 reported indicators. Aberdeenshire has the lowest emergency admission rate per 100,000 population (N12) of all Partnerships in Scotland, and the lowest falls rate per 1,000 population 65+ (N16).

Comparing Aberdeenshire's current performance against the national indicators to the previous reporting periods, Aberdeenshire's performance has improved, or stayed the same, for 10 of the 19 reported indicators. Of the 9 indicators where performance is worse than the last period all except 2 are within 5% of previous performance. Aberdeenshire performance deteriorated by 5% against N4 - Percentage of adults supported at home who agree that their health and social care services seemed to be well co-ordinated, and by 8% against N14 – Readmission to hospital within 28 days.

Appendix A3. Aberdeenshire Core Suite of National Integration Indicators - Annual Performance

Data Source: ISD
Last updated: November 2018

Data for the Core Suite of Integration Indicators, NI - 1 to NI - 23 are populated from national data sources and data is issued nationally. Indicators 1 to 10 are outcome indicators based on survey feedback and are updated bi-annually. Data for National Indicators 11 to 23 are derived from organisational/system data and are updated quarterly. Data for indicators 10, 21, 22 and 23 are not yet available.

Indicator	Title	Aberdeenshire		Scotland	RAG	
		Previous score 2015/16	Current score 2017/18	Current score 2017/18		
Outcome Indicators	NI - 1	Percentage of adults able to look after their health very well or quite well	96% (3979)	95% (4821)	93%	A
	NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible	84% (213)	85% (151)	81%	G
	NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided	79% (203)	84% (150)	76%	G
	NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated	75% (203)	70% (126)	74%	A
	NI - 5	Total % of adults receiving any care or support who rated it as excellent or good	81% (222)	83% (160)	80%	G
	NI - 6	Percentage of people with positive experience of the care provided by their GP practice	83% (3227)	81% (3531)	83%	A
	NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	85% (216)	83% (148)	80%	A
	NI - 8	Total combined % carers who feel supported to continue in their caring role	40% (185)	37% (225)	37%	A
	NI - 9	Percentage of adults supported at home who agreed they felt safe	82% (206)	87% (152)	83%	G
	NI - 10	Percentage of staff who say they would recommend their workplace as a good place to work	NA	NA	NA	

Indicator	Title	Aberdeenshire		Scotland	RAG	
		Previous score	Current score	Current Score		
Data Indicators	NI - 11	Premature mortality rate per 100,000 persons (<i>European age-standardised mortality rate per 100,000 for people aged under 75</i>)	331 ²⁰¹⁶	334 ²⁰¹⁷	425	A
	NI - 12	Emergency admission rate (per 100,000 population)	8,449 ^{2016/17}	8,519 ^{2017/18}	12,256	A
	NI - 13	Emergency bed day rate (per 100,000 population)	90,383 ^{2016/17}	86,324 ^{2017/18}	121,516	G
	NI - 14	Readmission to hospital within 28 days (per 1,000 population)	79 ^{2016/17}	85 ^{2017/18}	101	R
	NI - 15	Proportion of last 6 months of life spent at home or in a community setting	89% ^{2016/17}	90% ^{2017/18}	88%	G
	NI - 16	Falls rate per 1,000 population aged 65+	16 ^{2016/17}	13 ^{2017/18}	22	G
	NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	90% ^{2016/17}	87% ^{2017/18}	85%	A
	NI - 18	Percentage of adults with intensive care needs receiving care at home	53% ^{2015/16}	55% ^{2016/17}	61%	A
	NI - 19	Number of days people aged 75+ spend in hospital when they are ready to be discharged (per 1,000 population)	677 ^{2016/17}	596 ^{2017/18}	762	G
	NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	23% ^{2016/17}	23% ^{2017/18}	24%	G
	NI - 21	Percentage of people admitted to hospital from home during the year, who are discharged to a care home	NA	NA	NA	
	NI - 22	Percentage of people who are discharged from hospital within 72 hours of being ready	NA	NA	NA	
	NI - 23	Expenditure on end of life care, cost in last 6 months per death	NA	NA	NA	

RAG scoring based on the following criteria

If current Aberdeenshire position is better than current Scotland position

- and Aberdeenshire value has improved or stayed the same then "Green"
- and Aberdeenshire value has worsened by 5% or less of previous Aberdeenshire value then "Amber"
- and Aberdeenshire value has worsened by more than 5% of previous Aberdeenshire value then "Red"

If current Aberdeenshire position is worse than current Scotland position

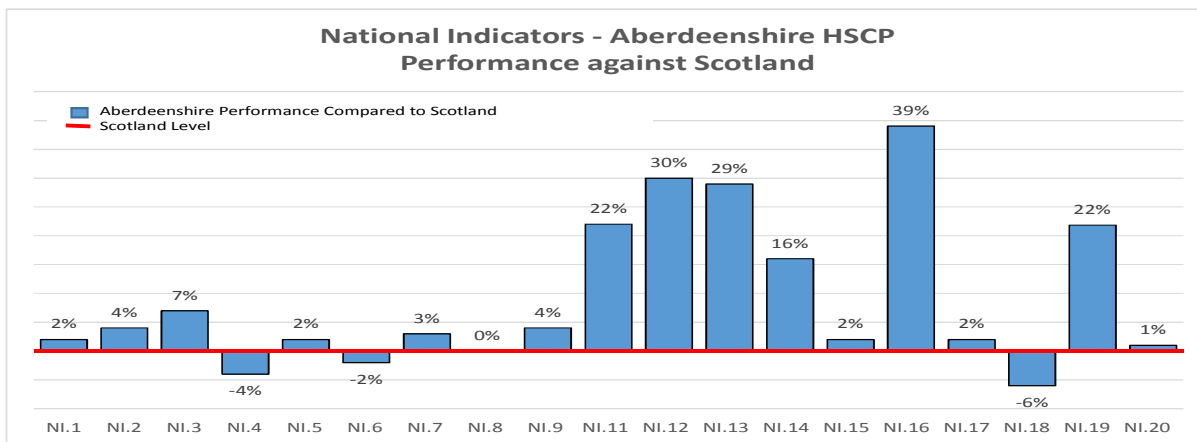
- and Aberdeenshire value has improved or stayed the same then "Amber"
- and Aberdeenshire value has worsened by 5% or less of previous Aberdeenshire value then "Amber"
- and Aberdeenshire value has worsened by more than 5% of previous Aberdeenshire value then "Red"

Aberdeenshire Core Suite of National Integration Indicators - Headline Performance

Data Source: ISD

Last updated: November 2018

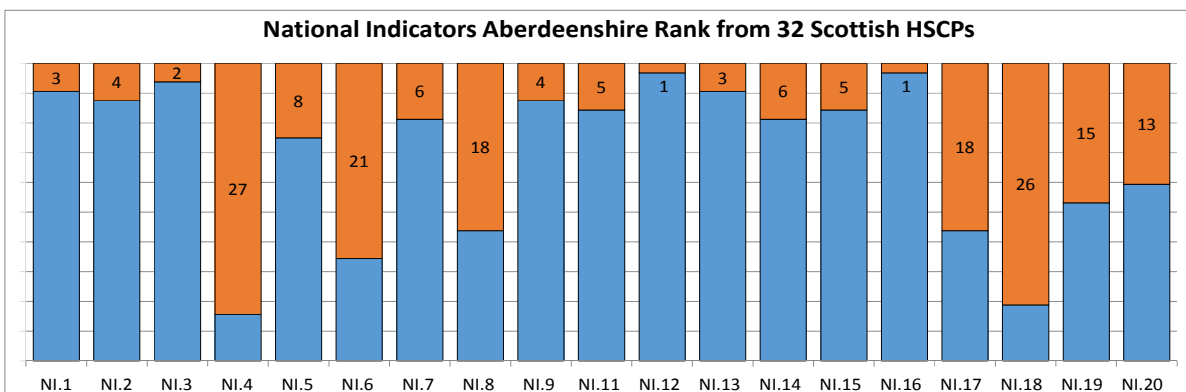
The three charts below show Aberdeenshire's performance for the National HSCP Integration Indicators against the rest of Scotland and comparing Aberdeenshire's performance to the previous reporting period. Note that data for the national indicators is updated nationally all indicators are updated to 2017/18 with the exception of N11 which is only available to 2017 and N18 which is only available to 2016/17.



The red line shows the Scotland position and the bars show for each indicator the percentage Aberdeenshire HSCP's performance differs from Scotland's performance for the current reporting period. Positive bars show where Aberdeenshire HSCP is performing better than Scotland and negative bars show where Aberdeenshire HSCP performance is worse than Scotland.

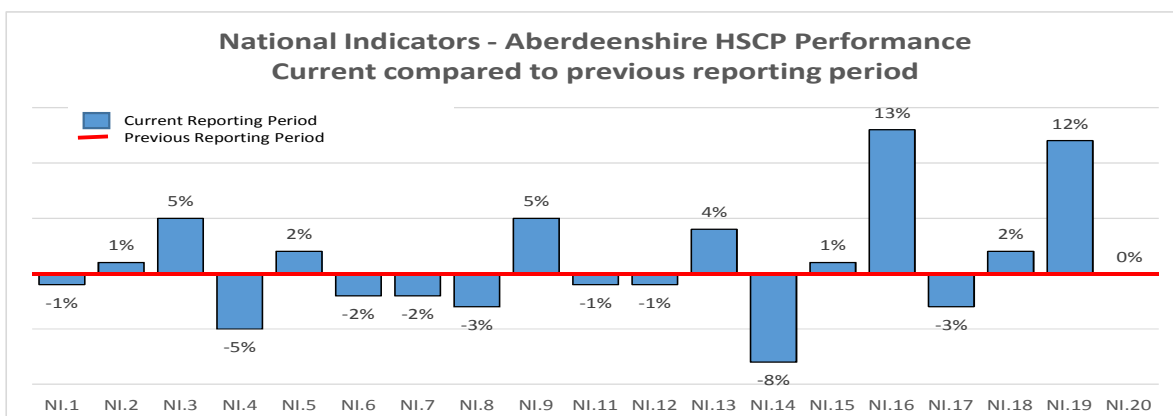
For the current reporting period Aberdeenshire HSCP performed the same or better than Scotland for 16 of the 19 national indicators, with 3 performing worse than Scotland. Note that of the 23 national indicators only 19 have data available for reporting.

Aberdeenshire HSCP's performance for each indicator ranked against all 32 HSCP's in Scotland is shown below. A lower number demonstrates a better position against the rest of Scotland. Aberdeenshire was in the top 50% for 14 of the 19 reported indicators for this reporting period. This is the same as the last reporting period.



The below chart shows Aberdeenshire HSCP's performance for the current reporting period compared to the previous reporting period.

The red line demonstrates the previous reporting period and the bars indicate the percentage change in performance to the current reporting period. 10 of the 19 reported indicators have improved, or stayed the same, since the previous reporting period. This is slightly worse than the last reporting periods where 12 of the 19 reported indicators had improved, or stayed the same. Of the 9 indicators that performed worse than the previous period all but one were within 5% of the previous periods performance.



Aberdeenshire Health and Social Care Partnership Performance Report - Quarter 2 (July - September 2018)

Locality Report: Formartine Indicators by Strategic Priority

KEY					
Performance Against Target	✓	No concern. Meeting target	Performance Against Previous Period	I	Improved on previous reporting period by more than 2%
	!	On Review. Not meeting target but within tolerance		S	+/- 2% on previous reporting period
	✗	Of concern. Not meeting target, out-with tolerance. Included in exception report		W	Worsened on previous reporting period by more than 2%

Aberdeenshire Strategic Priority	ID	Indicator Description	Source	Performance	Target	Previous Period	Against Last Period	Trend line	Trend Period	Current Period
7 Public protection	LO3	Number of adult protection referrals	SW	No Target 6	-	3	-		5 Quarters	Jul-Sep 18
10 The most appropriate and effective use of acute and community resources.	LO7	Number of bed days occupied by delayed discharges per quarter (inc code 9) per 1,000 18+ population	NHS/SW	No Target 27	-	17	W		5 Quarters	Jul-Sep 18
	LO8	Number of delayed discharges per quarter (inc code 9) (Census snapshot, monthly average for quarter)	NHS/SW	No Target 10	-	6	W		5 Quarters	Jul-Sep 18
	LO9	Rate of emergency occupied bed days per 1,000 population over 65s	NHS	No Target 659	-	619	W		5 Quarters	Jul-Sep 18
	LO10	Emergency Admission rate per 1,000 population over 65s	NHS	No Target 55	-	57	I		5 Quarters	Jul-Sep 18
	LO11	Number of people over 65 years admitted as an emergency in the previous 12 months per 1,000 population.	NHS	No Target 148	-	not available	-		1 Quarters	12 months to Sep 18
	LO13	Percentage of people seen within 4 hours within Formartine community hospitals Minor Injury Units (all ages based on all attendances at MIUs in Grampian)	NHS	Turriff 100% (491)	-	100% (482)	S		5 Quarters	Jul-Sep 18