

An Official Statistics Publication For Scotland

HEALTH AND SOCIAL CARE

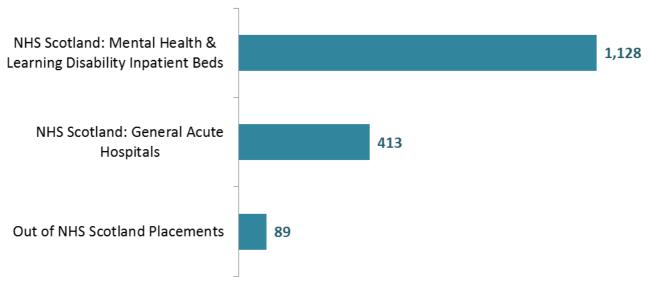
Executive summary

This report presents the results from the first Hospital Based Complex Clinical Care (HBCCC) Census, which was carried out by the Scottish Government and NHS Boards at midnight, 31 March 2016. The data was collected as part of the Inpatient Census, comprising of the Mental Health & Learning Disability Inpatient Bed Census, Out of NHS Scotland Placements Census and HBCCC (General Acute). Data is presented for patients receiving HBCCC from all three parts of the Census.

A patient is defined as receiving HBCCC if they cannot have their care needs met in any setting other than hospital and require long-term complex clinical care, or if they have been in hospital for more than 6 months. This includes patients within NHS Scotland facilities (e.g. acute general hospitals, community hospitals) as well as those patients funded by NHS Scotland but treated in non-NHS Scotland facilities (e.g. Private Facilities or NHS facilities elsewhere in the UK). By definition, patients in receipt of HBCCC cannot be a Delayed Discharge.

At the March Census there were 1,630 patients receiving Hospital Based Complex Clinical Care:

Number of patients receiving HBCCC, March 2016



Key Points

Some key points from this report include:

- There were 1,630 patients receiving Hospital Based Complex Clinical Care at the March 2016 Census.
- Of the 1,630 patients, 52% were male, 48% were female. Of patients aged under 65, 66% were male.
- The patients in the census were mostly from older age groups. 13 patients (1%) were aged under 18, 232 (14%) were aged 18-39, 422 (26%) were aged 40-64 and 963 (59%) aged 65+.
- Of the 1,630 patients, 532 (33%) had a consultant who specialized in Psychiatry
 Of Old Age. 412 (25%) had a consultant who specialized in General Psychiatry and
 357 (22%) Geriatric Medicine.
- 279 patients (17%) had been in hospital less than 6 months at the census date, while 354 patients (22%) had been in hospital for more than 5 years.
- 1,128 patients (69%) receiving HBCCC were occupying a Mental Health,
 Learning Disability or Addiction Inpatient Bed in an NHS Scotland facility at the
 Census date. 413 patients (25%) were in a General Acute NHS Scotland facility,
 while 89 patients (5%) were treated outwith NHS Scotland (e.g. Private Facilities or
 NHS facilities elsewhere in the UK).

Inpatient Census, 2016

Hospital Based Complex Clinical Care

Acknowledgements

We are extremely grateful to all those who assisted with the Inpatient Census, in particular, colleagues from the health boards, hospitals and care homes who provided information.

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Introduction

Hospital-Based Complex Clinical Care (HBCCC) was introduced in Scotland on the 1st June 2015 following a review of NHS Continuing Care. This report represents an overview of the results from the first Hospital-Based Complex Clinical Care Census, carried out by the Scottish Government and NHS Boards as at midnight, 31 March 2016.

A patient is defined as receiving HBCCC if they cannot have their care needs met in any setting other than hospital and require long-term complex clinical care, or if they have been in hospital for more than 6 months. This includes patients within NHS Scotland facilities (e.g. acute general hospitals, community hospitals) as well as those patients funded by NHS Scotland but treated in non-NHS Scotland facilities (e.g. Private Facilities or NHS facilities elsewhere in the UK). By definition, patients in receipt of HBCCC cannot be a Delayed Discharge. Further information about HBCCC is available from the following link: http://www.sehd.scot.nhs.uk/dl/DL(2015)11.pdf

The purpose of the census is to firstly monitor HBCCC and secondly, to enhance the Scottish Government and NHS Scotland's' understanding of HBCCC. This analytical evidence will inform policy development and service planning, both nationally and locally.

To enable further research and statistical analysis, extracts of the Census datasets may be made available for approved researchers.

Scope of census

Following on from the first Mental Health & Learning Disability Inpatient Bed Census held in October 2014, a review of the scope, frequency and questions were undertaken by Scottish Government in collaboration with NHS Boards. There are a number of differences between the 2014 Census and the 2016 Census. Most notably, a third part to the census was introduced in 2016 in order to reduce duplication for NHS Boards.

Part 1: Mental Health and Learning Disability Inpatient Bed Census

Part 2: Mental Health, Addiction and Learning Disability Patients: Out of NHS Scotland Placements Census

Part 3: Hospital Based Complex Clinical Care Census (for patients who are not occupying Mental Health, Addiction and Learning Disability Inpatient Beds)

Collectively, the three parts to the Census make up the Inpatient Census. This report is entirely focused on patients in receipt of Hospital Based Complex Clinical Care, therefore, information is used from Part 1, 2 and 3 of the census about all patients who meet the HBCCC definition.

It should be noted that HBCCC was introduced in Scotland on the 1st June 2015 and as this is the first year which HBCCC information has been collected, the data collection systems and quality assurance processes in place are still being developed. However, the underlying data has undergone extensive validation by NHS Boards and Scottish Government Statisticians and is therefore being published as Official Statistics. All figures are provisional and may be subject to change in future publications.

The report for the first two parts of the Inpatient Census (Mental Health & Learning Disability Inpatient Bed Census, Out of NHS Scotland Placements Census) was published on 13 September 2016.

http://www.gov.scot/Publications/2016/09/9885

Accompanying data

An accompanying spreadsheet containing the data behind this report, as well as some summary information at NHS Board level will also be made available at the following link:

http://www.gov.scot/Topics/Statistics/Browse/Health

Staff in NHS Boards will also be able to request access to more detailed analysis, which will be accessed through a secure online website. This will provide more graphical representations of data, as well as drilling down to hospital and ward level for users' health boards. Access is granted by a nominated NHS Board authorizer, for more details please contact swstat@gov.scot.

Future plans for the census

A repeat of the census is intended to be carried out at the end of March 2017, and any methodological changes will be informed by this year's census.

1. Patients receiving Hospital Based Complex Clinical Care

There were **1,630 patients receiving Hospital Based Complex Clinical Care** at the March 2016 Census.

Of the 1,630 patients, 59% were aged 65 or over.

1,128 patients (69%) receiving HBCCC were occupying a Mental Health, Learning Disability or Addiction Inpatient Bed in an NHS Scotland facility at the Census date.

Number of patients receiving HBCCC in Census

There were 1,630 patients receiving Hospital Based Complex Clinical Care at the March 2016 Census.

Of the 1,630 patients receiving HBCCC 1,128 (69%) were occupying a Mental Health, Learning Disability or Addiction Inpatient Bed in an NHS Scotland Facility. 413 patients (25%) were in a General Acute NHS Scotland facility, while 89 patients (5%) were treated outwith NHS Scotland (e.g. Private Facilities or NHS facilities elsewhere in the UK).

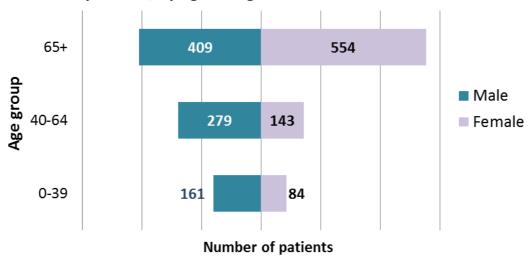
Inpatient Census, 2016	Patients
Part 1: Mental Health Bed Census	1,128
Part 2: Out of Scotland NHS Placements	89
Part 3: HBCCC (general acute)	413
All HBCCC patients in Inpatient Census	1,630

Age and Gender

The following chart shows the age and gender breakdown of patients receiving HBCCC at the March Census. Some key points include:

- Of the 1,630 patients, 849 (52%) were male, while 781 (48%) were female. Of patients aged under 65, 66% were male.
- The patients in the census were mostly from older age groups. 13 patients (1%) were aged under 18, 232 (14%) were aged 18-39, 422 (26%) were aged 40-64 and 963 (59%) aged 65+.

Number of patients, by age and gender

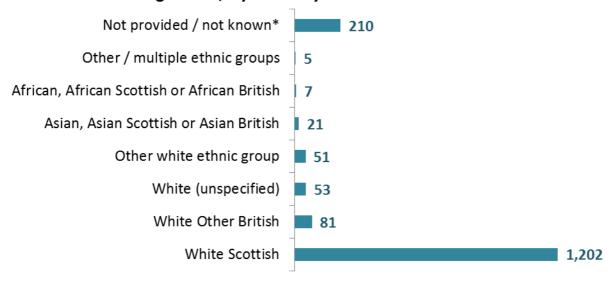


^{*13} patients were aged under 18 at the Census. Gender breakdown is not presented due to small numbers.

Ethnicity

Of the patients receiving HBCCC at the Census date for whom ethnicity was known, 1,202 (85%) had a White Scottish ethnicity. Information was not provided for 210 patients.

Patients receiving HBCCC, by ethnicity



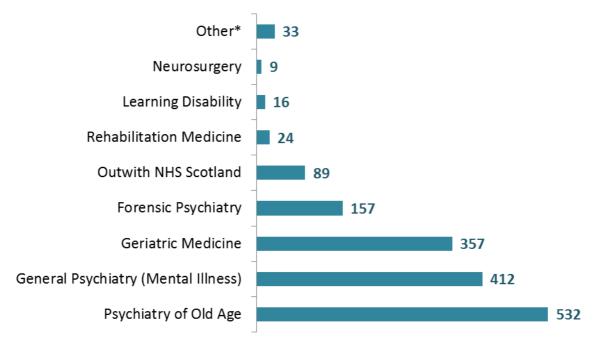
^{*}Includes 89 patients treated Outwith NHS Scotland for whom ethnicity information was not recorded.

Consultant Specialty

As part of the Census NHS Boards were asked to record the medical specialty of the consultants responsible for overseeing the treatment of each patient in the census.

Of the 1,630 patients receiving HBCCC at the census, 532 (33%) had a consultant who specialized in Psychiatry Of Old Age, 412 (25%) had a consultant who specialized in General Psychiatry and 357 (22%) Geriatric Medicine. The full breakdown is shown in the below chart:

Patients receiving HBCCC, by consultant specialty

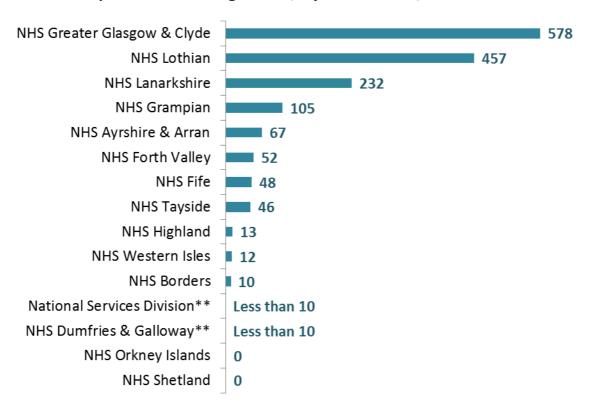


^{*}Other includes a range of specialties with small numbers of patients that have been aggregated to protect patient confidentiality.

NHS Board

NHS Greater Glasgow & Clyde were responsible for funding the treatment of more patients than any other NHS Board at the Census with 578 patients (35%). NHS Lothian had the next highest number with 457 (28%).

Number of patients receiving HBCCC, by NHS Board*, March 2016



^{*}NHS Board responsible for funding treatment.

Length of Stay in Hospital

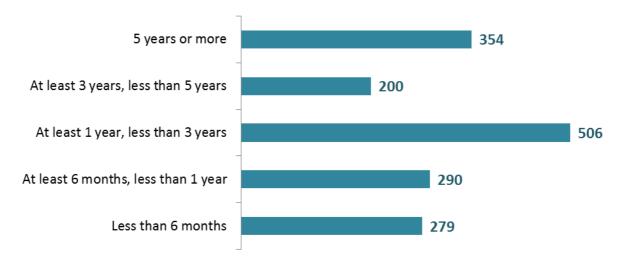
NHS Boards were asked to record how long patients had been in hospital at the March census date. The average (median) time in hospital was 643 days (approximately 1 year and 9 months).

The spread of length of stay of patients can be seen in the below chart. 279 patients (17%) had been in hospital for less than 6 months, while 354 (22%) had been in hospital for at least 5 years. *Note: admission date was missing for 1 patient.*

^{**}Numbers have been suppressed to protect patient confidentiality.

^{**}National Services Division is funded by the territorial NHS Boards, and provides funding for a small number of patients in cases where they may require more specialized, long-term or cost-intensive treatment.

Days since admission at census date



2. Methodology & further information

Time period and scope

The second Inpatient Census was carried out by the Scottish Government and NHS Boards as at midnight, 31 March 2016. However, this is the first time the census has collected information on HBCCC patients.

The census was conducted in 3 parts and covered:

- every patient occupying a psychiatric, addiction or learning disability inpatient bed in an NHS Scotland facility on the census date (midnight at the end of 31st March 2016) (Part 1).
- every mental health, addiction or learning disability patient whose care is funded by NHS Scotland, but is being treated in a facility that is out with NHS Scotland (e.g. in a local authority care home, in a private hospital, in a NHS England facility), on the census date (midnight at the end of 31st March 2016) (Part 2).
- every patient who was in receipt of Hospital Based Complex Clinical Care (HBCCC) in general acute inpatient beds on the census date (midnight at the end of 31st March 2016) (Part 3).

The census guidance notes are available here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016

This report contains analysis about patients in receipt of Hospital Based Complex Clinical Care from Parts 1, 2 and 3 of the census.

Data completeness

NHS Scotland facilities (Part 1)

All 12 NHS Scotland territorial boards which have psychiatric, addiction or learning disability inpatient beds provided a return.

The State Hospital (Special NHS Board) provided a return.

Data completeness for individual census questions varied. Where there was missing data, this has been footnoted against the corresponding table or displayed in the chart.

Patients treated out with NHS Scotland (Part 2)

All NHS Scotland territorial boards which have mental health, addiction or learning disability patients whose care is funded by NHS Scotland, but is being treated in a facility that is out with NHS Scotland provided a return.

Data completeness for individual census questions varied. Where there was missing data, this has been footnoted against the corresponding table or displayed in the chart.

Hospital Based Complex Clinical Care in general acute beds (Part 3)

All territorial NHS Boards which have patients in receipt of HBCCC in general acute bed provided a return.

Data collection

The Scottish Government's Scotxed Unit provide data collection and validation support for a number of statistical returns across Education, Health, Social Care, Social Work, Transport, Housing, Communities, Finance, Justice, Environment and some 3rd Sector. The Scotxed Unit provided secure data collection software (procxed.net) and first stage data validation checks. Further information about the data collection software can be found in the Privacy Impact Assessment which is available here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016.

Health & Social Care Analysis Division undertook 2nd stage validation checks.

The data collection, analysis and report has been overseen and produced by statisticians. All statistics branches in the Scottish Government are part of the Government Statistical Service (GSS) which comprises the statistics divisions of all major departments in the UK, Scotland and Wales plus the Office for National Statistics, which has a coordinating role.

Data confidentiality

A Privacy Impact Assessment was undertake prior to the census which outlines how patient confidentiality is maintained. The Privacy Impact Assessment is available here: http://www.gov.scot/Topics/Statistics/Browse/Health/DataSupplier/Census2016.

In addition, statistical disclosure control has been applied to the analysis. **Statistical Disclosure Control** (SDC) covers a range of ways of changing data which are used to control the risk of an intruder finding out confidential information about a person or unit (such as a household or business). This publication has used the following methods where there are under 5 patients in a particular category:

- Suppression of possibly disclosive cells (e.g. where the value is small) which
 means that the value for that cell in the table is not given and secondary
 suppression of cells which means at least one other value in the row or column is
 also not given to ensure that disclosive cells can not be deduced through
 subtraction;
- **Table redesign and recoding**, where cells are grouped together to protect small value cells.

Further information about Statistical Disclosure Control is available here: http://www.gov.scot/Topics/Statistics/About/Methodology/Glossary

Access to the data for further research

To enable further research and statistical analysis, extracts of the Inpatient Census data may be made available for approved researchers from late 2016.

Academic researchers must initially apply to the 'Public Benefit and Privacy Panel for Health and Social Care¹' to gain access to the Inpatient Census data. If the 'Public Benefit and Privacy Panel for Health and Social Care' approve an application then a copy of the original application form and a copy of the approval letter should be emailed to the following address SWStat@scotland.gsi.gov.uk for approval by the Scottish Government (Health & Social Care Analysis Division and the Principal Medical Officer for Mental Health).

NHS Boards will have a version of the Inpatient Census dataset which contains information about patients for whom they are responsible for providing treatment for, or are responsible for funding. NHS boards will have their own arrangements in place for researchers to access health data. All Boards have a Caldicott Guardian who is responsible for assuring confidentiality and enabling appropriate data sharing, and a director responsible for research and development.

¹ http://www.informationgovernance.scot.nhs.uk/

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Health and Social Care Analysis (HSCA) is one of a number of Analytical Services Divisions in the Scottish Government. HSCA's main objective is to continue to build the statistical, economic and research evidence base for Health and Care in Scotland, and to provide analytical support, briefing and advice to support policy development and service planning.

For general enquiries about Scottish Government statistics please contact: Office of the Chief Statistician, Telephone: 0131 244 0442, e-mail: statistics.enquiries@scotland.gsi.gov.uk

How to access background or source data

The data collected for this statistical bulletin may be made available on request, subject to consideration of legal and ethical factors. Please contact swstat@scotland.gsi.gov.uk for further information.

Complaints and suggestions

If you are not satisfied with our service or have any comments or suggestions, please write to the Chief Statistician, 3WR, St Andrews House, Edinburgh, EH1 3DG, Telephone: (0131) 244 0302, e-mail statistics.enquiries@scotland.gsi.gov.uk.

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