

# An approach to understanding resource usage data to inform strategic commissioning

Summary version

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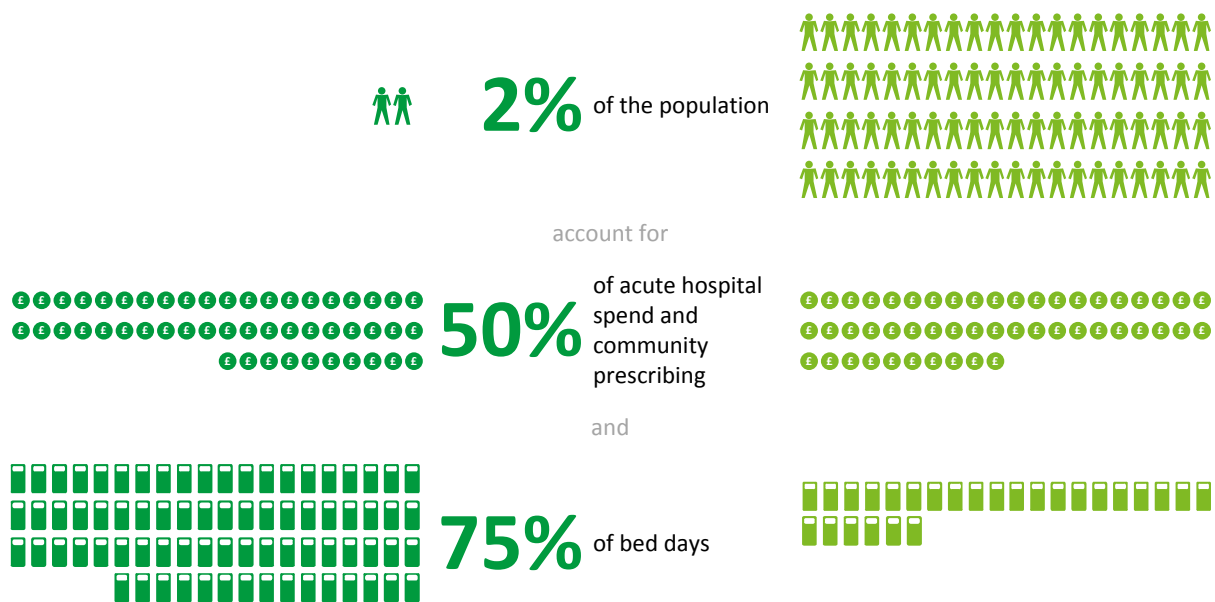
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# High Resource Groups

The integration of health and social care presents an opportunity for system-wide change by understanding the needs of your population and how people interact with care and support services. This opportunity is set in the context in which approximately 2% of the population account for 50% of hospital and community prescribing resources, including 75% of acute inpatient bed days. The data on High Resource Groups is intended to be used by Integration Joint Boards to develop strategic commissioning plans; however it will also interest anyone who contributes to the planning and delivery of health and social care services, or would like to understand how data can inform decisions about commissioning services in your area.



The High Resource Group data is an important resource to support strategic commissioning and to make changes to the way in which you deliver care and support services. Using the data can enable you to learn from the needs of the highest 2% of the population in your area and understand the ways in which people interact with your services. By combining this national data with local knowledge and expertise, you can change how you deliver services so that you focus on anticipatory and preventative forms of support.

To truly improve outcomes for these people we need to focus on:



Improving people's overall health by focussing on supporting independence and self-management



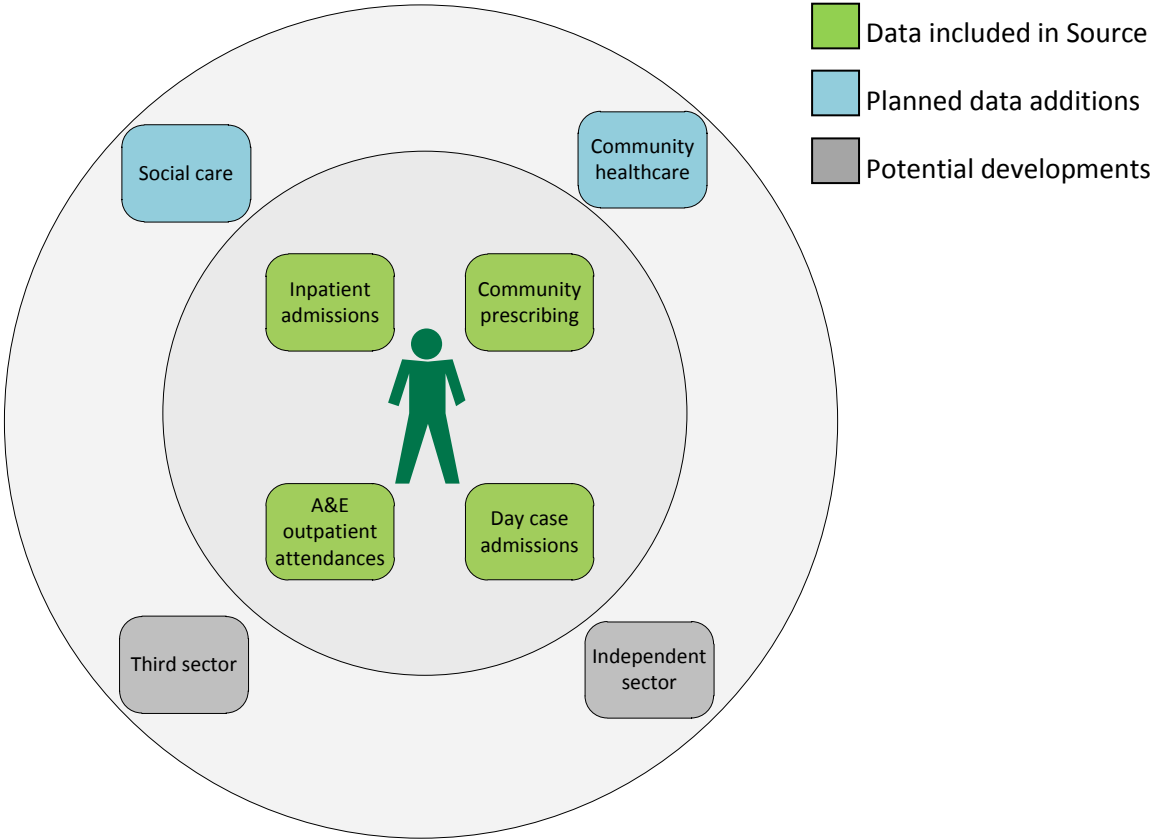
Improving people's experience of care when it is required, and




Making sure that our health and social care system is financially sustainable.


# Who are the High Resource Groups?


Data is available in Scotland that shows how people interact with health and social care services. The High Resource Groups data brings these health and social care data together so that we can see the services that an individual interacts with each year. This data is then aggregated to show how a small proportion of the population (2%) accounts for a high level of service use. The data is available to you through an interactive platform called SOURCE.



It is important not to generalise people within this 2% of the population, however looking at studies of similar populations from other countries suggests that three broad patterns of need result in being part of this group:

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People nearing end of life
- 

People with continuing levels of high need from year to year
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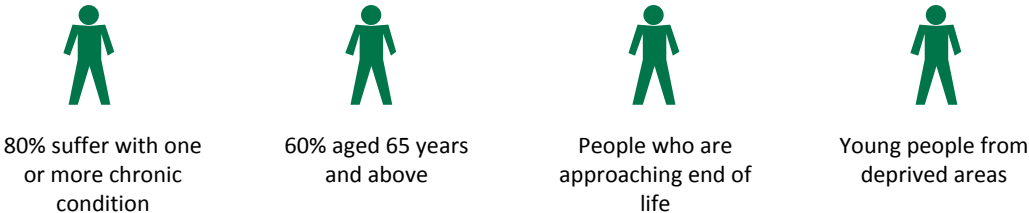
People who experience episodes of crisis that are resolved

Two of these patterns mean that High Resource Groups people are less likely to remain in this 2% group year on year. In fact, only 20-25% will remain in the 2% group from one year to the next.

# Characteristics of High Resource Groups

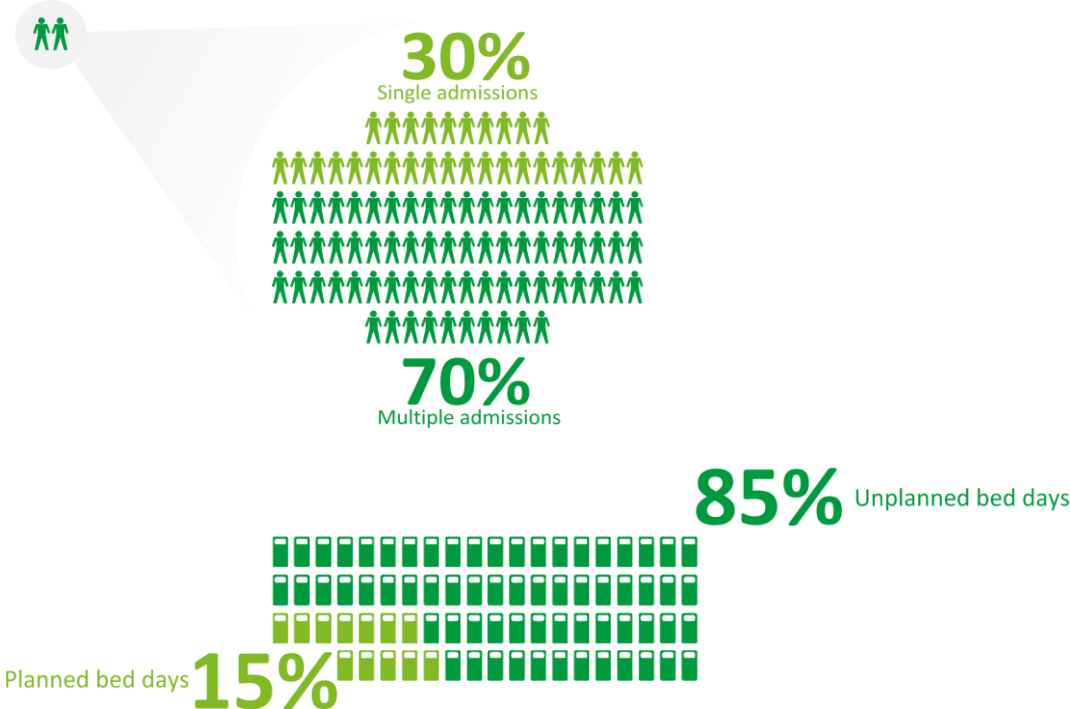
The reasons behind someone being part of this 2% group vary considerably. For some it will be because they have a high level of need that requires an equally high level of care and support. There will also be those for whom the health and social care system has not been able to meet their needs in the most appropriate way, and as a result have been required to interact with costly unplanned services.

Based on the use of hospital and community prescribing data, High Resource Groups are likely to associate with one or many of the following situations or conditions:



These characteristics are likely to broaden once data on social care and primary care have been included.

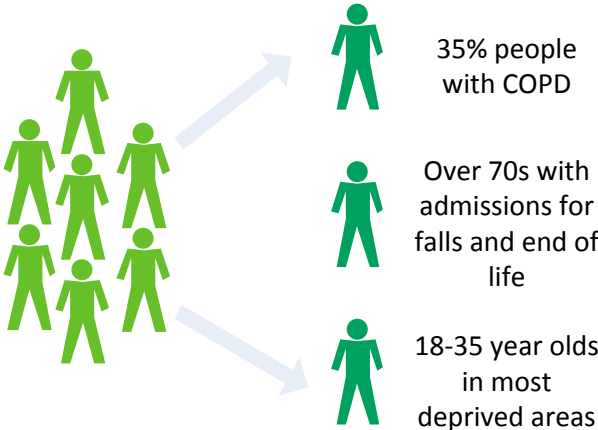
The way in which the 2% of the population interact with services is predominantly through multiple unplanned admissions to acute services which result in extended periods of inpatient care and episodes of delayed discharge.



# How to use the data for improvement

The value of High Resource Individual data is that it can be used to challenge how your health and social care system is designed against the needs of the people who interact with care and support services the most. The data can be used to:

- Understand who your High Resource Groups are, including the demographic and clinical characteristics.

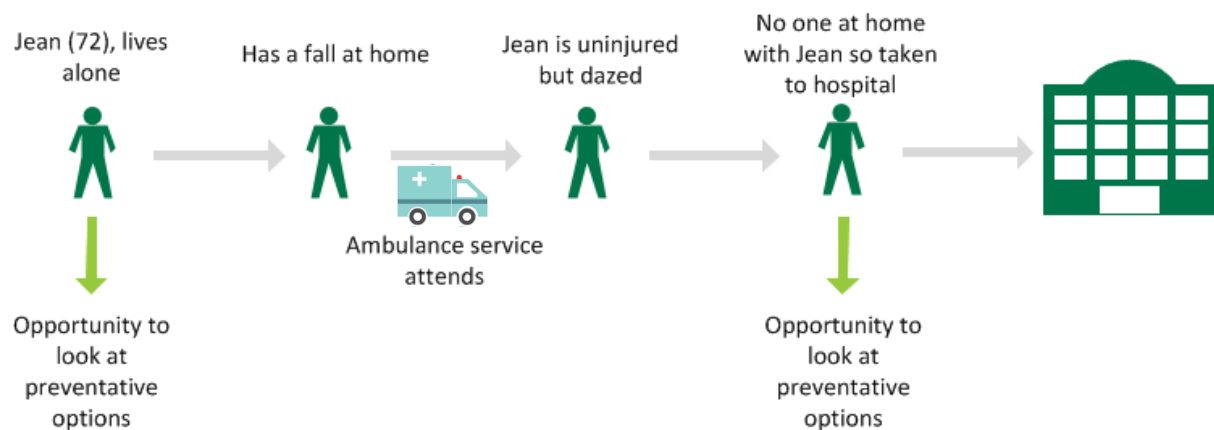


- Explore the services that support these groups of people with these characteristics and potential improvement programmes which would support improved outcomes for these groups.

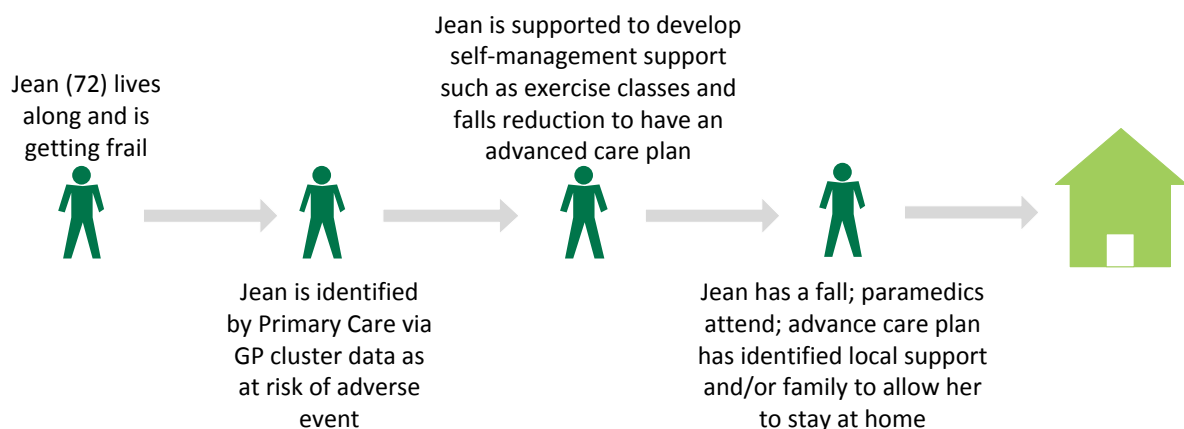




- Explore their pathways of care. Identify where pathways could be improved and scale this opportunity up to the rest of your population so that you can see the potential impact.



- Test the changes to your system and measure the impact on the people who use the services, the staff who deliver the care, and the impact on the service itself. Use the learning from these tests to re-design your care pathways so that your system better meets the needs of your population and maximises its effectiveness in preventing and anticipating need.



- This process can also identify triggers for people who are at risk of becoming High Resource Groups in future. By exploring the pathways you can identify where there was an opportunity to intervene and prevent escalation of need.

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## How we can support you

A detailed guide is available to help you use the data to focus improvement activity:  
<http://ihub.scot/media/1216/20170213-full-hri-paper-12.pdf>

The guide covers the various stages including how to:



Access and present the data to your health and social care partnership



Structure a deep dive workshop in which the data is used to stimulate discussion about the needs of your population



Explore the support and care you provide



Create an action plan in which you link your local priorities to the key themes from data and discussion which result in specific actions on how to increase the pace and scale of improvement

The two national organisations that can help you through this process are:



The Information Services Division of NHS National Services Scotland has the skills to source, link, analyse and interpret data relevant to health and social care resource use.

[isd@nhs.net](mailto:isd@nhs.net)



Healthcare Improvement Scotland's Improvement Hub (ihub) has improvement expertise to support your partnership to use data to plan, test, evaluate and implement improvement ideas.

[hcis.livingwell@nhs.net](mailto:hcis.livingwell@nhs.net)



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The Healthcare Environment Inspectorate, Improvement Hub, Scottish Health Council, Scottish Health Technologies Group, Scottish Intercollegiate Guidelines Network (SIGN) and Scottish Medicines Consortium are part of our organisation.