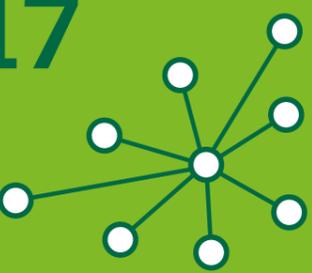


Healthcare Improvement Scotland's Improvement Hub (ihub) is enabling health and social care improvement, by:

Optimising partnership working

117



The ihub worked in partnership with 117 organisations in 2017-18.

Developing and disseminating improvement tools and resources

43



We developed 43 new practical tools that support practitioners to implement improvements in a range of areas. From supporting the management of frailty in key situations (for example, during hospital admission) to providing an atlas to aid in the delivery of intermediate care, plus many more.

Supporting health and social care partnerships (HSCPs)

31
14



We provided improvement support to all 31 HSCPs and all 14 NHS territorial boards.

Funding local improvements

£2.9m



In 2017-18, the ihub provided £2.9m (30% of ihub total budget) in grants and awards to fund local improvement work.

Supporting improvement in mental health

38



38 teams across Scotland joined the new Mental Health Access Improvement Support Team (MHAIST) in 2017-18.

Supporting learning about what works across Scotland

17
54 | **109**



We supported 17 national learning networks, delivered 54 learning events and 109 webinars.

Sharing knowledge and learning online

266,363



ihub.scot received 266,363 web page views. In addition, more than 40,000 documents, including reports, toolkits and other improvement resources, were downloaded from our website. Among the most popular are our Anticipatory Care Planning (ACP) toolkit and Sepsis toolkit.

Reducing pressure ulcers

550



Thanks to our work since 2013, over 550 patients a year in acute hospitals are spared the pain and additional treatment required for pressure ulcers, resulting in approximately £2.2 million (if all grade 2) and £5.5 million (if all grade 4) efficiency savings. In 2017, we spread the positive impact of our work in this area into care homes.

Delivering quality improvement training

100%




100% of attendees at Board Quality Improvement (QI) masterclasses would recommend it.

Facilitating 'right time conversations'

752
72 | **107**




752 care experience conversations led to 72 new improvement opportunities being tested and 107 improvements embedded into practice.

Reducing restraint

14
57%



14 mental health wards showed a reduction in restraining patients of up to 57% since 2012.

Reducing self-harm

6
70%



Six mental health wards showed a reduction in the rates of patients who self harm of up to 70% since 2012.

Decreasing HSMR

9.2%



Hospital standardised mortality ratios (HSMR) decreased by 9.2% during January to March 2018, compared to the same period in 2014.

Reducing cardiac arrest

16
26%



Cardiac arrests across 16 acute hospitals were reduced by 26%, which is 22 fewer per month.

Decreasing sepsis mortality rate

21%



Since 2012, 30 day mortality from sepsis has decreased by 21%.

Reducing neonatal mortality

17.4%



Our Maternity and Children's Quality Improvement Collaborative (MCQIC) contributed to a 17.4% reduction in neonatal mortality since 2013.

Improving paediatric intensive care

2
86%



We've seen an 86% reduction in ventilator associated pneumonia in the two paediatric intensive care units since 2013.

Increasing ACPs logged on eKIS

12%



The number of anticipatory care plans (ACPs) logged on electronic Key Information Summaries (eKIS) increased by 24,160 (12%).