British Geriatrics Society
Improving healthcare
for older people



SCoOP



# GERIATRIC MEDICINE Acute Hospitals Outcomes Report 2024/25

An overview of outcomes of acute geriatric medicine services in Scotland

1495 UNIVERSITY OF ABERDEEN

# Contents

SCoOP Scottish Care of Older People Project


**What is SCOoP?.** ..... **3**

**Working Group and Steering Groups** ..... **4**

**What data does SCoOP report on?** ..... **5**

**Foreword.** ..... **6**

**Executive Summary** ..... **7**

**Admission Demographics** ..... **9**

**Hospital at Home Services** ..... **13**

**Hospital admissions and discharges under geriatric medicine** ..... **17**

**Individual hospital dashboards** ..... **24**

**Individual Hospital Reports**

Aberdeen Royal Infirmary ..... 36

Borders General Hospital ..... 37

Dumfries & Galloway Royal Infirmary ..... 38

Royal Forth Valley Royal Hospital ..... 39

Glasgow Royal Infirmary ..... 40

Inverclyde Royal Hospital ..... 41

Ninewells Hospital ..... 42

Perth Royal Infirmary ..... 43

Queen Elizabeth University Hospital ..... 44

Raigmore Hospital ..... 45

Royal Alexandra Hospital ..... 46

Royal Infirmary of Edinburgh at Little France ..... 47

St John's Hospital ..... 48

University Hospital Crosshouse ..... 49

University Hospital Hairmyres ..... 50

University Hospital Monklands ..... 51

University Hospital Wishaw ..... 52

Victoria Hopsital ..... 53

Western General Hospital ..... 54

# What is SCoOP?

SCoOP Scottish Care of Older People Project

**"SCoOP is a Scottish national evaluation project focusing on care of older people across Scotland in both primary and secondary care settings."**

This is a joint initiative set up in late 2016 by Healthcare Improvement Scotland, the British Geriatrics Society (BGS), and the University of Aberdeen as the lead academic institution. This programmatic work is carried out as a BGS National Audit of Older People's Care in Scotland.

The SCoOP is overseen by a Steering Group with representation from NHS Health Boards in Scotland, BGS Scotland and the UK BGS, other Scottish academic Institutions, and relevant professional societies/specialties.

SCoOP has the following overarching aims:

- To evaluate the variation in service provision for older people who require health and social care in various settings to serve as a driver for standardisation and improvement of care across Scotland
- To provide benchmarking tools for various care aspects of older people in Scottish NHS health and social care settings to support improvement work in services across Scotland
- To provide a health intelligence and knowledge transfer hub for service users, health care providers and policy makers through annual evaluation cycles



# SCoOP Working and Steering Groups

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Professor Susan Shenkin,
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*NHS Fife*

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*NHS Ayrshire & Arran*

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# What data does SCoOP report on?

The SCoOP Acute Hospitals Report uses data aggregated by Public Health Scotland (PHS) within the Scottish Morbidity Records (SMR) – mandatory returns made by each Health Board. The dataset includes both SMR01 (acute inpatient) and SMR01E (geriatric long stay / Hospital Based Complex Clinical Care).

SMR01 only includes episodes of care following hospital admission – Emergency Department activity is not captured.

All episodes of care with Geriatric Medicine (speciality code AB) involvement were included, except where the primary diagnosis was stroke. This report focusses on the 19 acute hospitals in Scotland that report patient care episodes under geriatric medicine care. It is understood that many episodes of specialist geriatric care are delivered under 'general internal medicine' coding – this cannot be captured by SCoOP – our aim is to highlight how this risks under-representing our speciality in Scotland.

PHS applies probabilistic matching to link together continuous periods of treatment to avoid double-counting (e.g. moving between geriatric medicine and geriatric long stay, or between different consultants). However, where analysis has been grouped at a Board Level, it is possible that episodes could be counted twice. For example, episodes of care spanning multiple hospitals in the same Board, or where hospital care is stepped-down to hospital at home.

Hospital at home is defined using a standard indicator on SMR01 returns and follows the same rules for allocation of specialty. Readmissions are considered for any return to any hospital, regardless of specialty of care in that readmitted episode.

A core purpose of SCoOP is to bring together data that shows variation between national coded data and local clinical knowledge – only by moving towards standardised measures can we begin to understand unwarranted variation.

# Foreword

This annual SCoOP report continues to show the variation between acute geriatrics units across Scotland in terms of activity, outcomes and the populations they serve. However, it also highlights common themes that all units continue to see a picture of rising demands on all units – more patients who are frailer. Each unit will have its own challenges in delivering care for their patients – staffing, geography, unmet need but participation in taking part in this project ensures that we can use the output to build better services for the future. Data is vital to convincing decision makers about the need for new services and that they are effective. The SCOOP report can be used for that.

The SCOOP report will not give medical managers and leaders all the answers to building a truly 21st century fit for our patients, but it is a good point to start from. It is not intended to give us all a blueprint to build the perfect service for older people's care in Scotland. However individual units will be able to use it to tailor their service to meet the demands in a service with increasingly tighter resources. It is also published in a way that even the most data-phobic can read easily.

Therefore, I want to encourage you all to take the time to digest the information and use it as a means to start a conversation of what your service needs as go into the next quarter of the 21st century. I also finally want to thank everyone involved in producing this report.

**Dr Alison Falconer**
*Chair of the Scottish Council of BGS*

# Executive Summary

- There were 40,924 admissions to geriatric medicine across the 19 included hospitals in 2024/25. This represents a rise of 1,328 (+3.3%) on the last SCoOP report in 2022/23.
- Age and socioeconomic deprivation statistics remain largely static on the previous report.
- Hospital at home admissions have increased substantially since the last report in 2022/23 (+23%), although with a small fall in the last year. There are now 12 boards reporting these services (+3 on 2022/23) and NHS Lothian is the first to record more episodes of hospital at home care than under inpatient geriatric medicine.
- In general boards with larger increases in hospital at home activity saw smaller rises (or even reductions) in hospital-based episodes, but with wide variation and many developing hospital at home services this should not be over-interpreted.
- Expected variation in hospital and board-level admissions was minor – 10 hospitals saw numbers increase in 2024/25 while 9 reported reductions. Queen Elizabeth University Hospital remains the largest contributor to geriatric admissions in Scotland, passing 6,000 for the first time, although the standardised admission rate for >65 years olds fell slightly in NHS GG&C for the first time. In these standardised estimates, 7 times more people >65 years old were admitted under geriatric medicine in the most active board (Forth Valley) compared to least. This suggests coding variation as well as different service models.
- Year-on-year change in median length of stay showed improvements in 10/19 sites and no change in a further 7/19 sites – this is substantially better than at the last SCoOP report in 2022/23. While differences remain, total variation across Scotland has fallen.
- Same day acute geriatric discharges remain rare, but rates increased in 14/19 acute hospitals. Aberdeen Royal Infirmary continues to discharge more than double the proportion of patients on the day of admission, compared to any other site.

# Admissions to geriatric medicine 2024/25

By sex, age and quintiles of socioeconomic deprivation

| Hospital | Admissions | Female | Age Group Distribution (%) | | | | Deprivation Distribution by Quintile* (%) | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | % | 65-74 | 75-84 | 85-94 | 95+ | Q1 | Q2 | Q3 | Q4 | Q5 |
| Dumfries & Galloway Royal Infirmary | 444 | 60 | 6 | 39 | 51 | 4 | 6 | 22 | 45 | 18 | 9 |
| Raigmore Hospital | 522 | 53 | 12 | 40 | 43 | 6 | 8 | 19 | 31 | 35 | 7 |
| Inverclyde Royal Hospital | 605 | 65 | 12 | 40 | 43 | 4 | 48 | 13 | 14 | 11 | 14 |
| St John's Hospital | 788 | 56 | 15 | 42 | 39 | 4 | 17 | 34 | 22 | 15 | 13 |
| University Hospital Crosshouse | 1021 | 53 | 22 | 44 | 31 | 3 | 35 | 23 | 15 | 16 | 10 |
| Borders General Hospital | 1134 | 55 | 12 | 37 | 45 | 6 | 6 | 22 | 42 | 25 | 6 |
| Perth Royal Infirmary | 1685 | 59 | 9 | 35 | 48 | 8 | 6 | 14 | 26 | 32 | 22 |
| Aberdeen Royal Infirmary | 1806 | 58 | 8 | 39 | 47 | 6 | 6 | 17 | 19 | 27 | 30 |
| Royal Infirmary Edinburgh | 1813 | 60 | 4 | 38 | 51 | 7 | 9 | 27 | 17 | 16 | 31 |
| Western General Hospital | 1827 | 60 | 9 | 35 | 49 | 7 | 11 | 19 | 12 | 16 | 41 |
| Royal Alexandra Hospital | 2035 | 60 | 13 | 40 | 42 | 5 | 25 | 25 | 21 | 13 | 17 |
| Victoria Hospital | 2090 | 63 | 13 | 42 | 40 | 5 | 19 | 28 | 18 | 21 | 13 |
| Ninewells Hospital | 2360 | 58 | 8 | 39 | 47 | 7 | 22 | 19 | 17 | 24 | 18 |
| University Hospital Wishaw | 2466 | 61 | 16 | 43 | 37 | 3 | 33 | 32 | 16 | 13 | 6 |
| University Hospital Monklands | 2722 | 59 | 20 | 45 | 33 | 2 | 34 | 29 | 18 | 13 | 6 |
| University Hospital Hairmyres | 3436 | 60 | 12 | 44 | 40 | 4 | 18 | 28 | 25 | 13 | 16 |
| Glasgow Royal Infirmary | 3509 | 60 | 15 | 44 | 38 | 3 | 49 | 20 | 10 | 11 | 9 |
| Forth Valley Royal Hospital | 4276 | 58 | 17 | 40 | 39 | 4 | 18 | 24 | 23 | 19 | 15 |
| Queen Elizabeth University Hospital | 6385 | 61 | 7 | 44 | 44 | 5 | 33 | 19 | 11 | 15 | 22 |
| **Total** | **40924** | | | | | | | | | | |

*Deprivation Quintile 1 (QI) most deprived; Quintile 5 (Q5) least deprived

# Demographics of patients admitted under acute geriatric services

- There is significant variation in the age of patients cared for under geriatric medicine by hospital – for example the proportion of patients >85 years old which accounts for 34% of admissions at Crosshouse Hospital, but 58% at the Royal Infirmary of Edinburgh.

- Patients aged >85 years old form the majority of geriatric medicine admissions for 7 of 19 units in Scotland – this is unchanged from the last SCoOP report.

- There is stark variation in deprivation levels of admitted patients, from 6% in the most deprived quintile (SIMD Q1) at the Borders General Hospital to 49% of admissions to Glasgow Royal Infirmary.

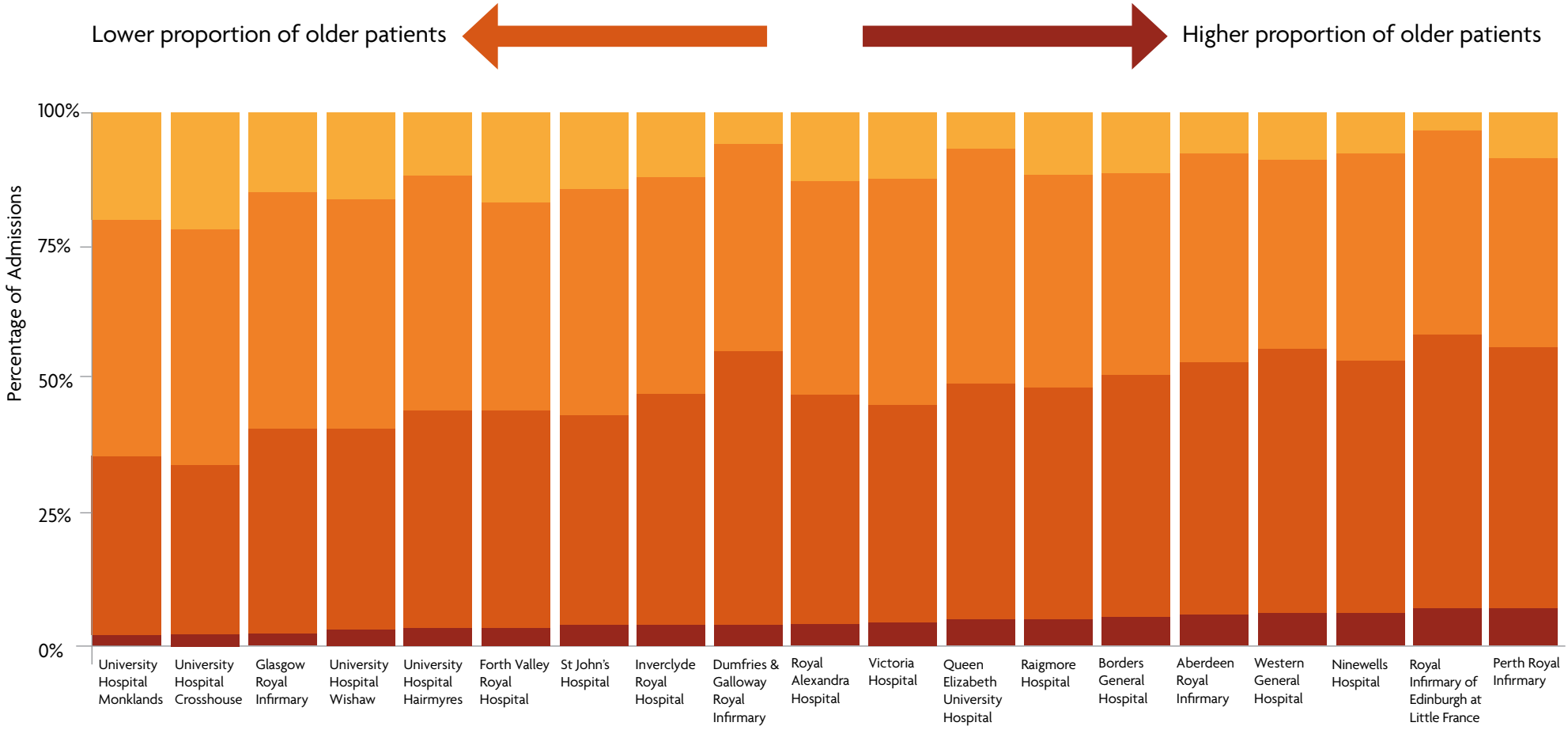


# Age distribution of admissions

SCoOP Scottish Care of Older People Project

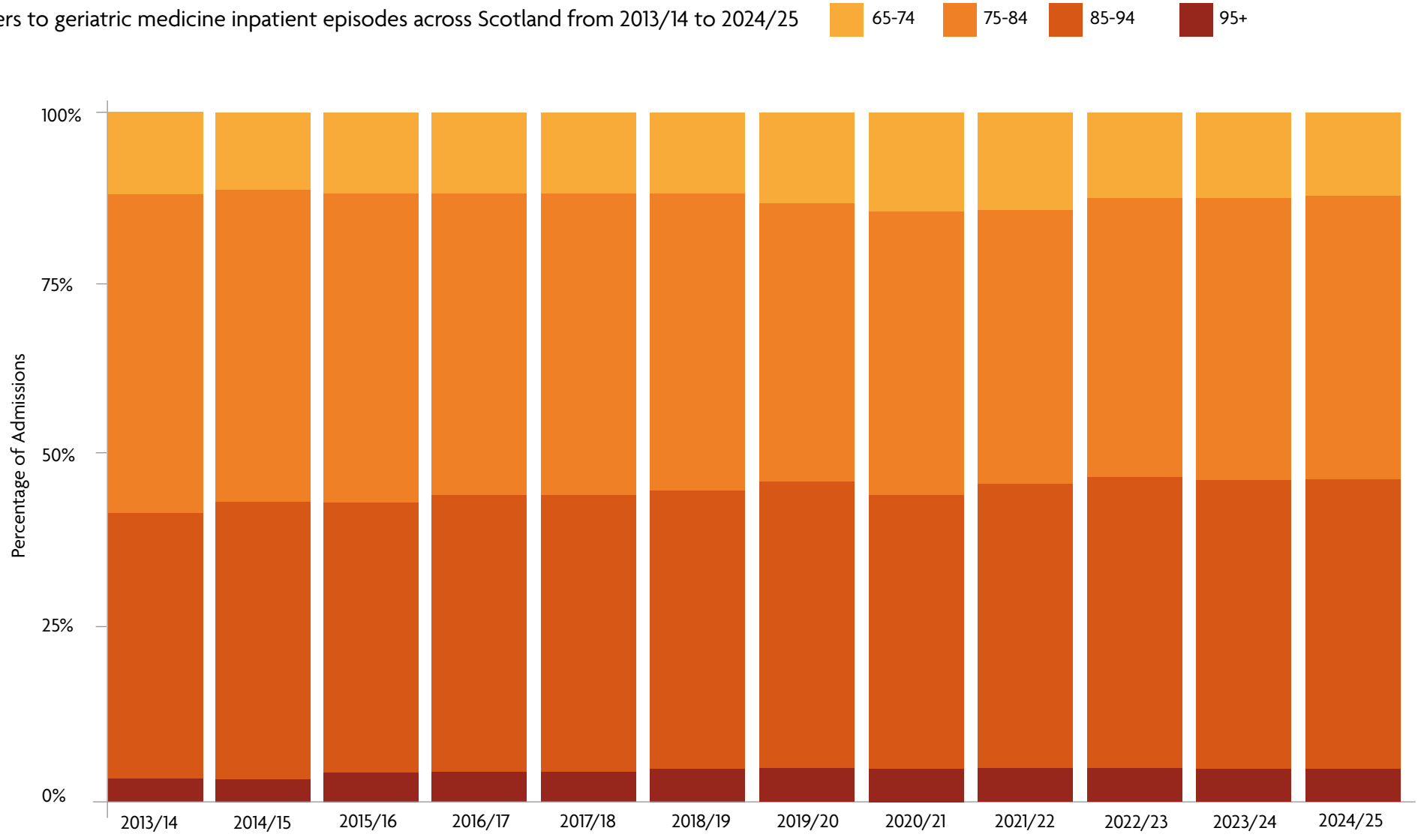
Refers to geriatric medicine inpatient episodes in 2024/25

65-74 75-84 85-94 95+



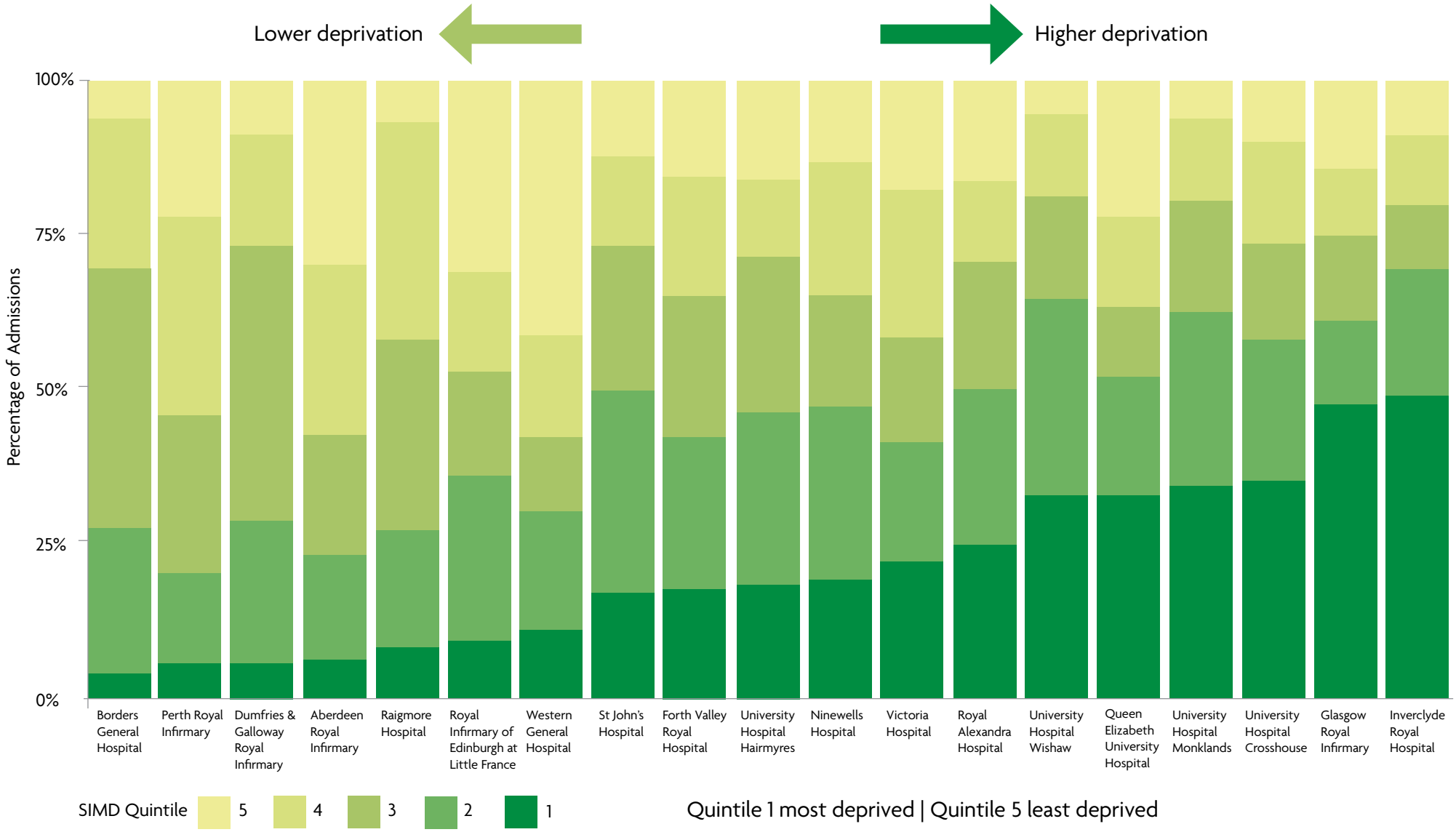
# Age distribution trend for admissions over time

Refers to geriatric medicine inpatient episodes across Scotland from 2013/14 to 2024/25



# Deprivation index distribution of admissions

Refers to geriatric medicine inpatient episodes in 2024/25



# Hospital at home services

- 12 health boards now provide data on hospital at home services. This includes NHS Western Isles where acute inpatient geriatric medicine data are not available.

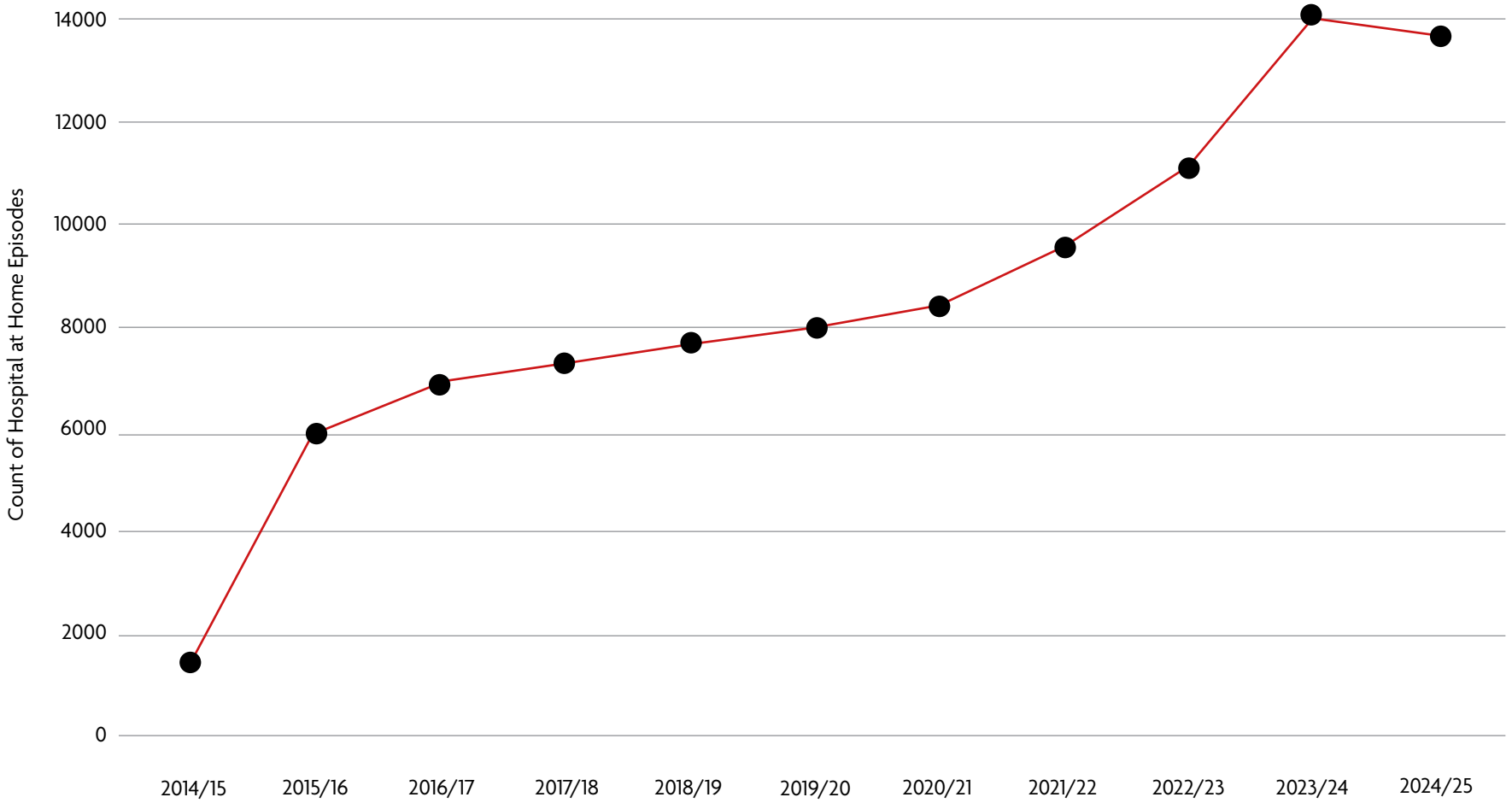
- While numbers have been increasing, 4 boards reported fewer episodes of hospital at home care in 2024/25 than the prior years, with a notable fall in Lanarkshire to levels similar to the last SCoOP report in 2022/23. As a result, total hospital at home episodes in Scotland stood at 13,749 in 2024/25, a slight drop on the prior year.

- Standardising for population size >65 years old, NHS Western Isles treated the most cases in hospital at home, and has grown substantially since the last SCoOP to over 700 per 10k people aged >65 years old – more than double the rate of any other health board.



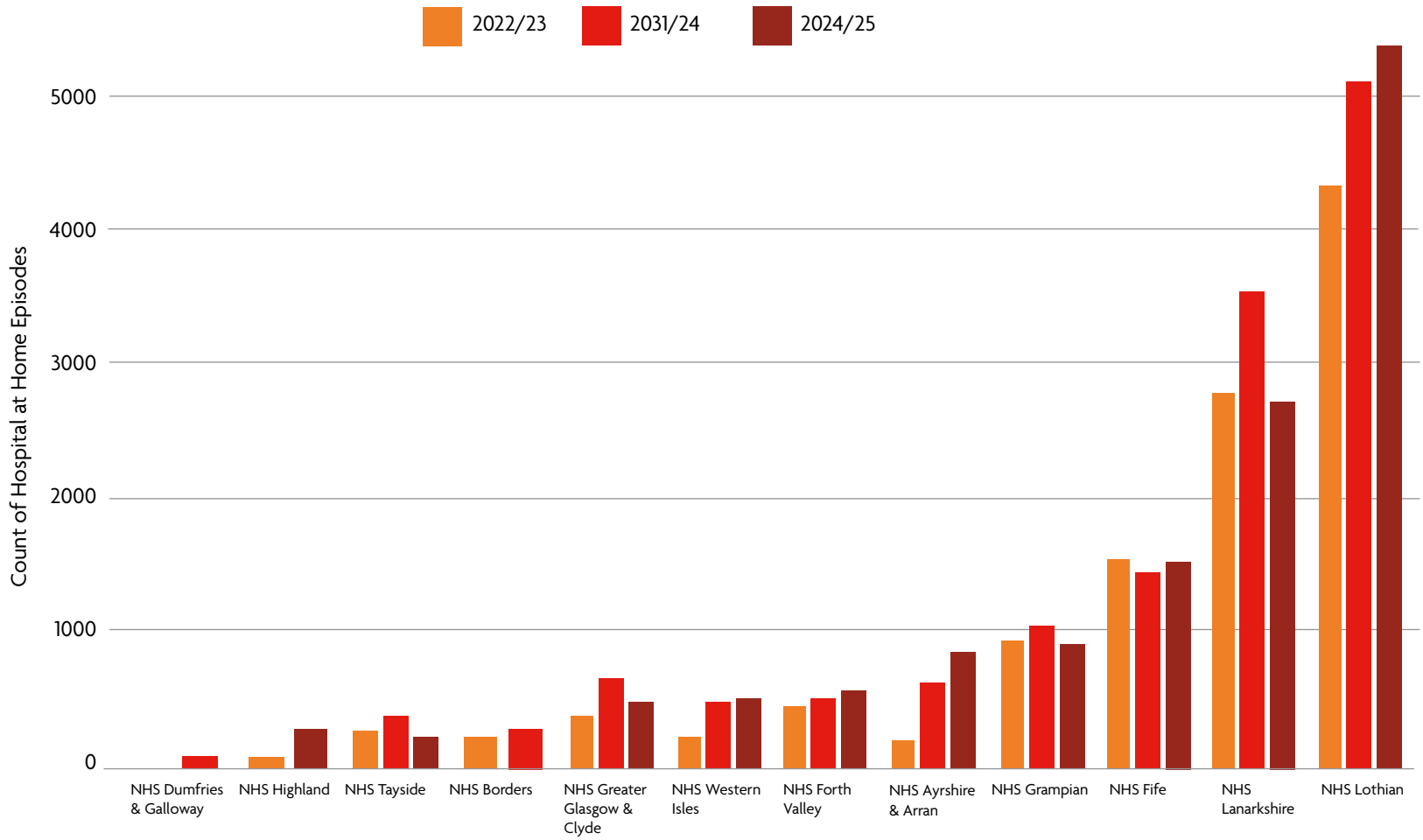
# Hospital at home admission trends over time

Refers to geriatric medicine coded hospital at home episodes across Scotland from 2014/15 to 2024/25



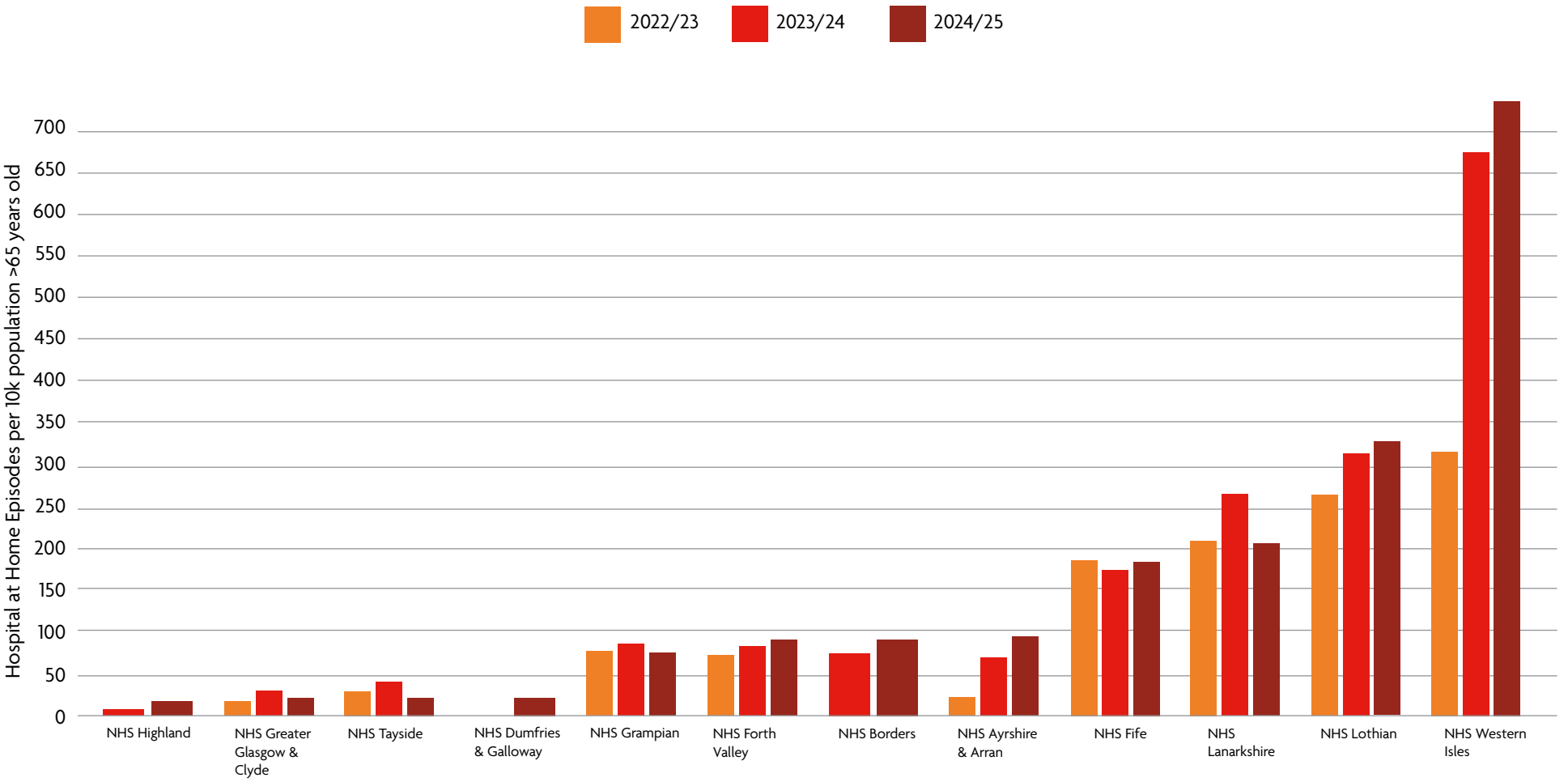
# Hospital at home admission count by board

Refers to geriatric medicine coded hospital at home episodes in the Scottish Morbidity Record over the last 3 years



# Hospital at home admission count by board per 10k people >65 years old

Uses National Records of Scotland (NRS) mid-year population estimate for 2022



# Hospital admissions and discharges under geriatric medicine

- Admission numbers have remained broadly consistent with the previous year, with Queen Elizabeth Hospital Glasgow remaining the most active geriatric medicine site in Scotland reaching over 6,000 admissions in 2024/25.

- Combining data at a board level for those with multiple contributing hospitals allows standardisation to older population estimates. Using this approach, NHS Forth Valley treated the most cases under geriatric medicine. The variation between boards was extreme in this standardised view – from 63 per 10k >65 years old (NHS Highland) to 678 per 10k >65 years old (NHS Forth Valley). This gap has narrowed slightly on the last SCoOP report but still likely reflects coding differences as well as different service models.

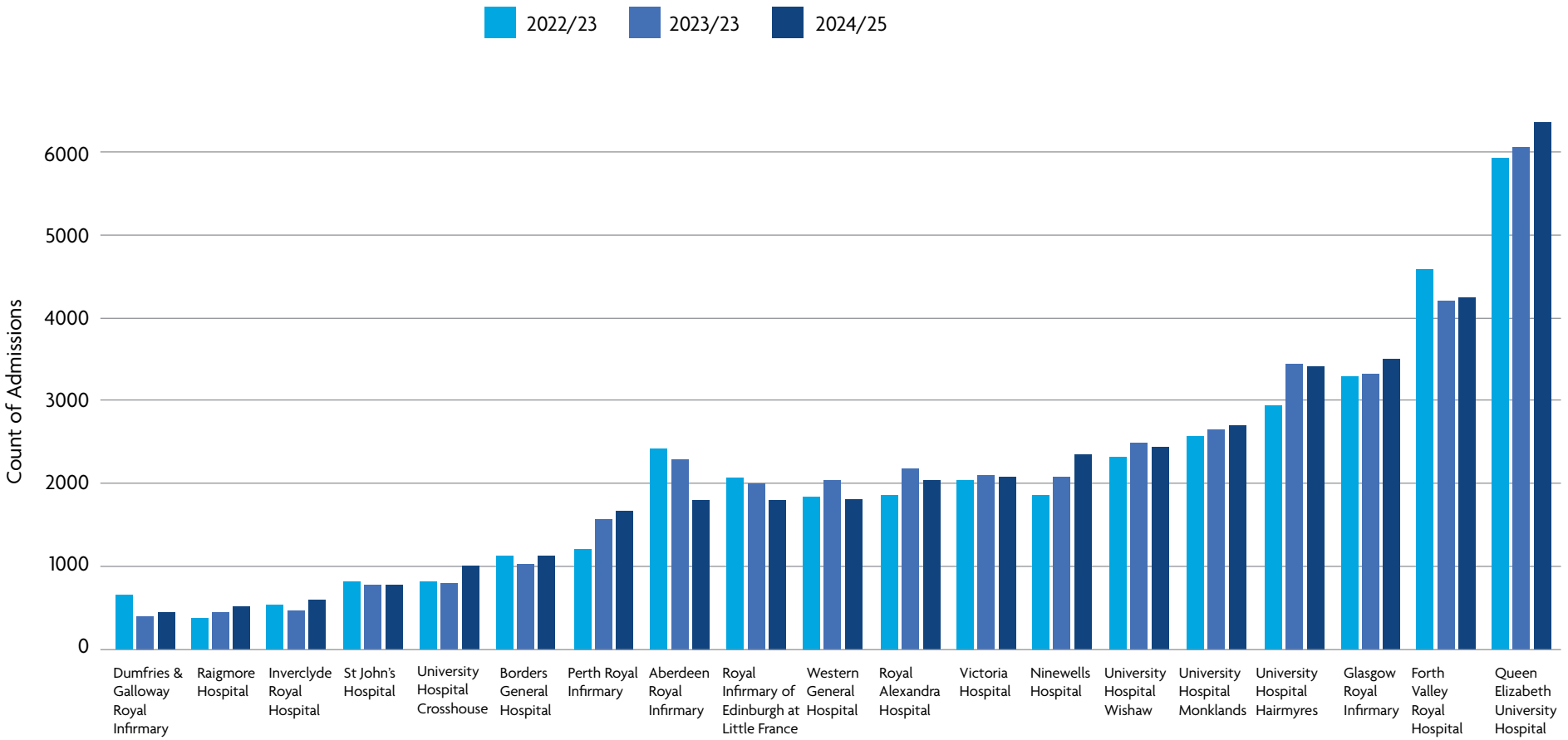
- Length of stay data has improved year-on-year at most sites and only 2/19 saw stays lengthen. While there remains wide variation, between sites (from Aberdeen Royal Infirmary at 2 days to Inverclyde Royal Hospital at 31 days) this gap has narrowed and overall variation across Scotland has reduced.

- Same day discharges remain rare, but there are encouraging trends towards increased rates in 14/19 hospitals.



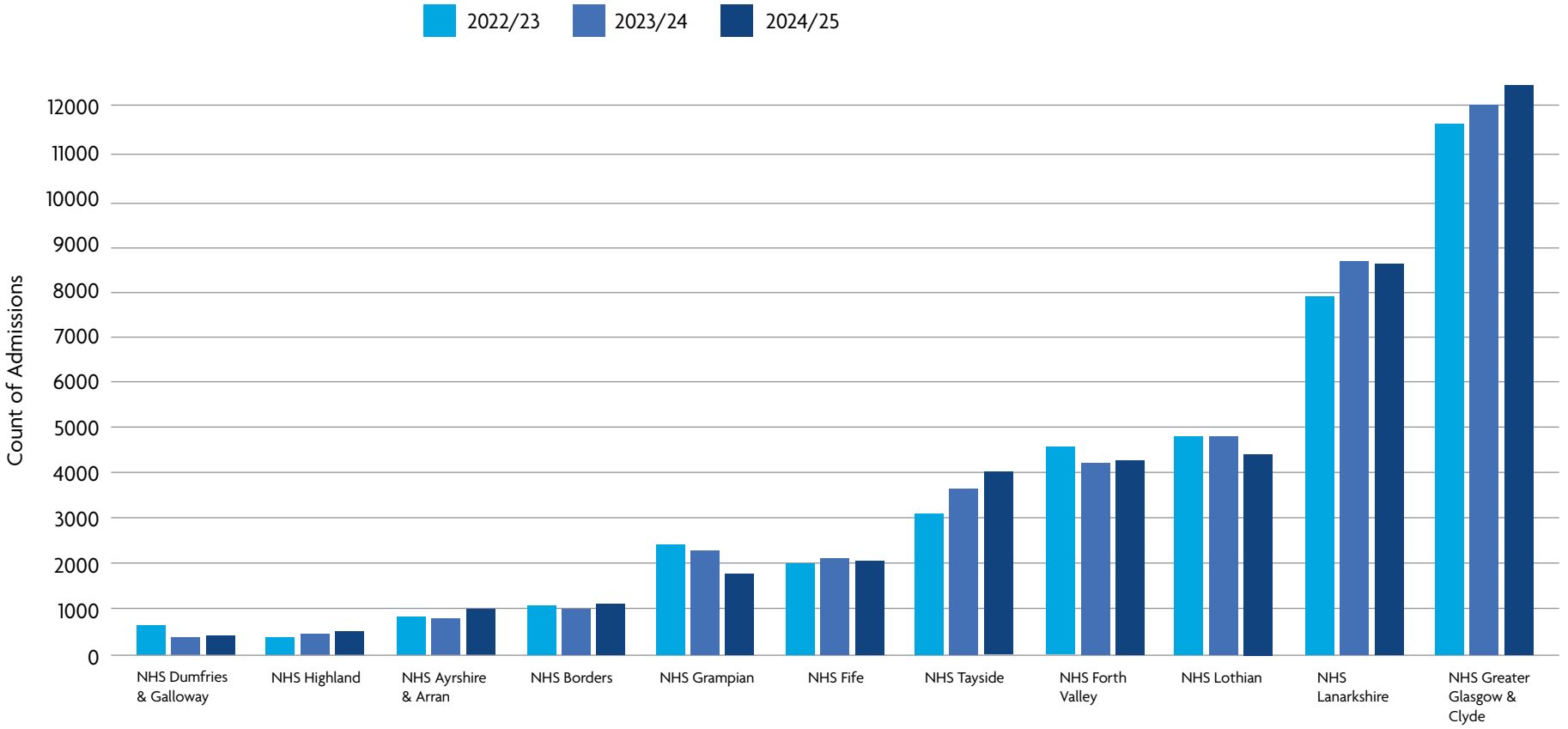
# Acute geriatric acute hospital activity

Refers to geriatric medicine inpatient admissions over last 3 SCoOP cycles



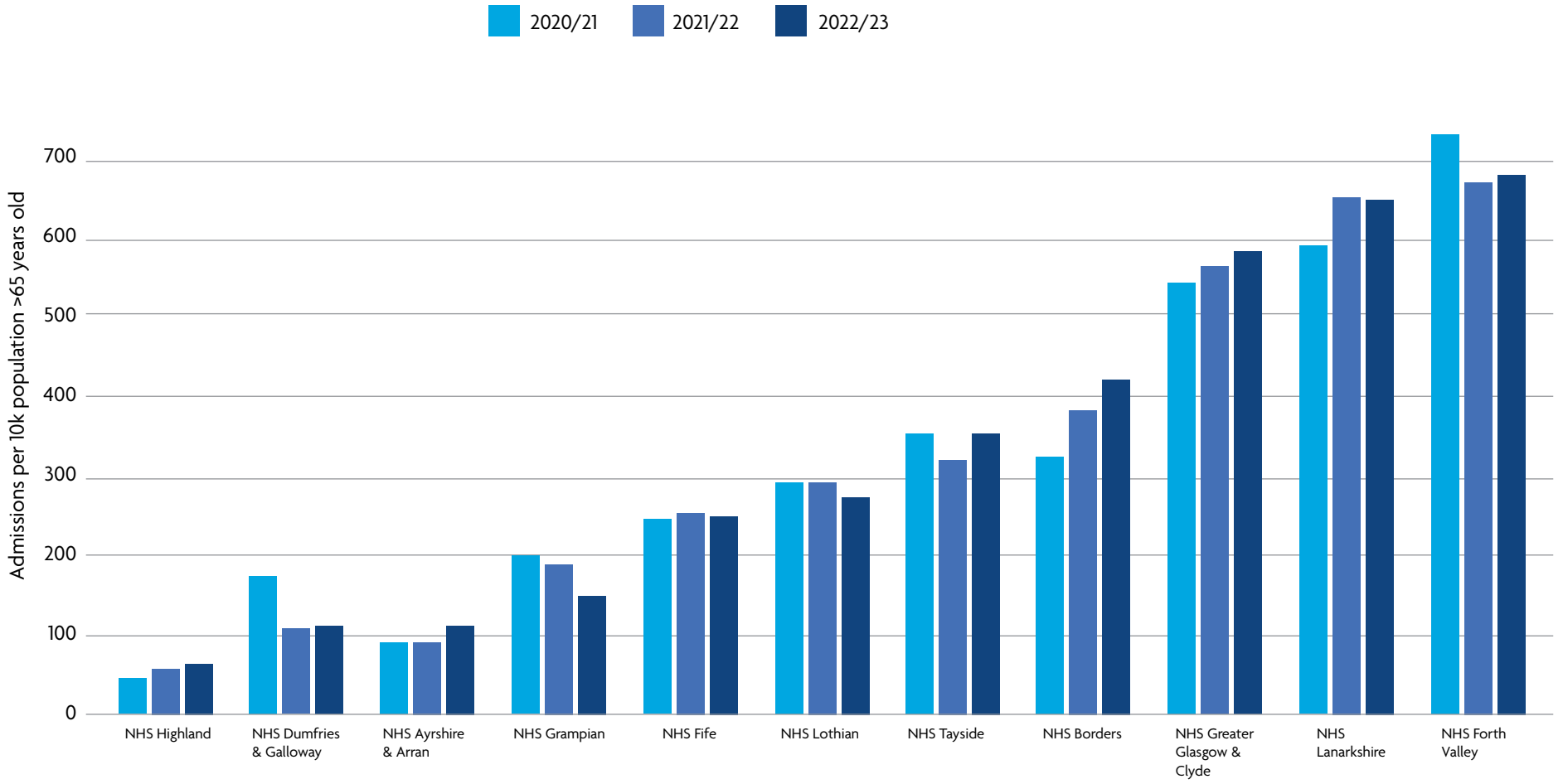
# Acute geriatric activity by board

Refers to geriatric medicine inpatient admissions over last 3 years (only represents the 19 acute hospitals included in SCoOP)



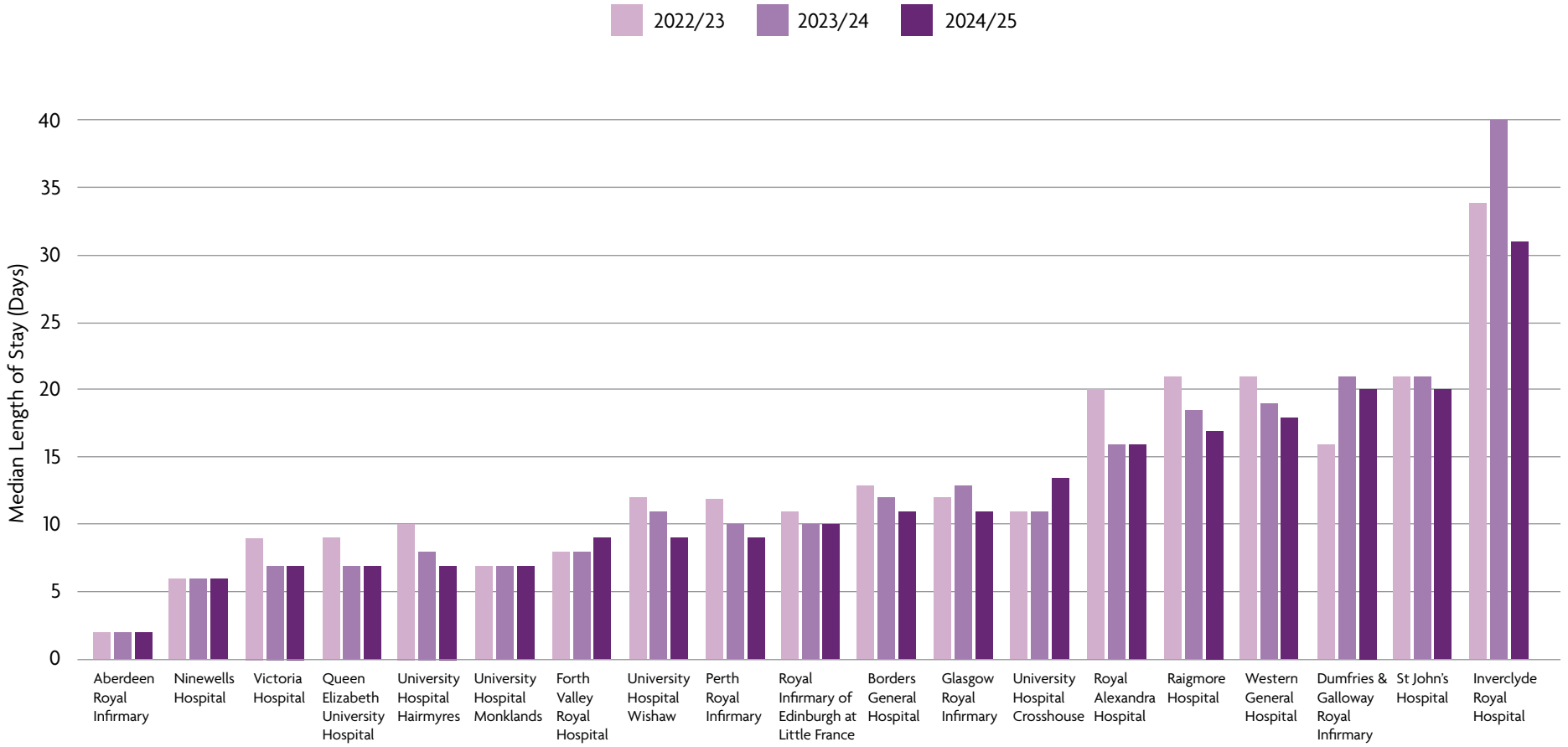
# Acute geriatric activity by board per 10k people >65 years old

Uses National Records of Scotland (NRS) mid-year population estimate for 2024



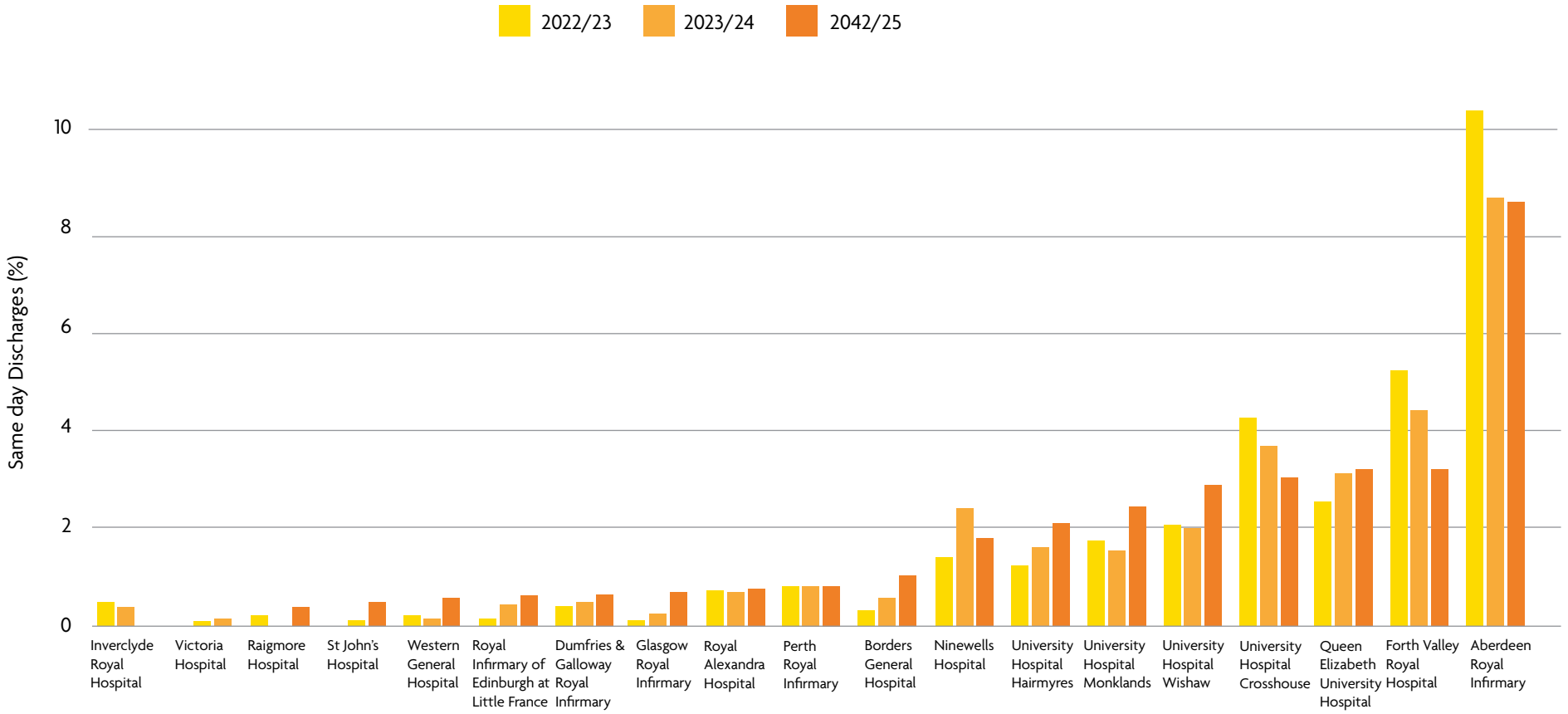
# Median length of stay for acute geriatric admissions

Refers to geriatric medicine inpatient episodes over last 3 years



# Same-day acute geriatric discharges

Refers to geriatric medicine inpatient admissions of one day over last 3 SCoOP cycles

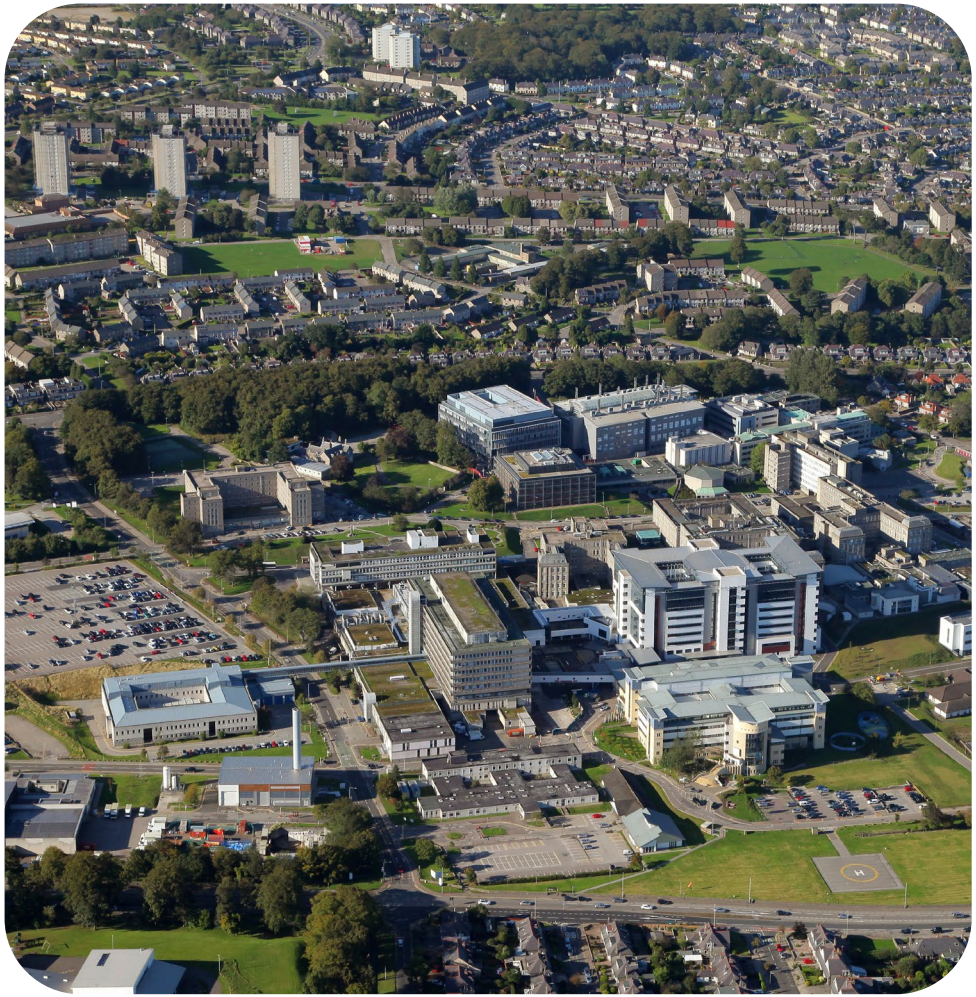


# Board Level Reports

- The following pages show absolute and relative change in hospital and hospital at home admissions in 2024/25 (compared to the prior year) for the 11 health boards where these data are available for SCoOP.

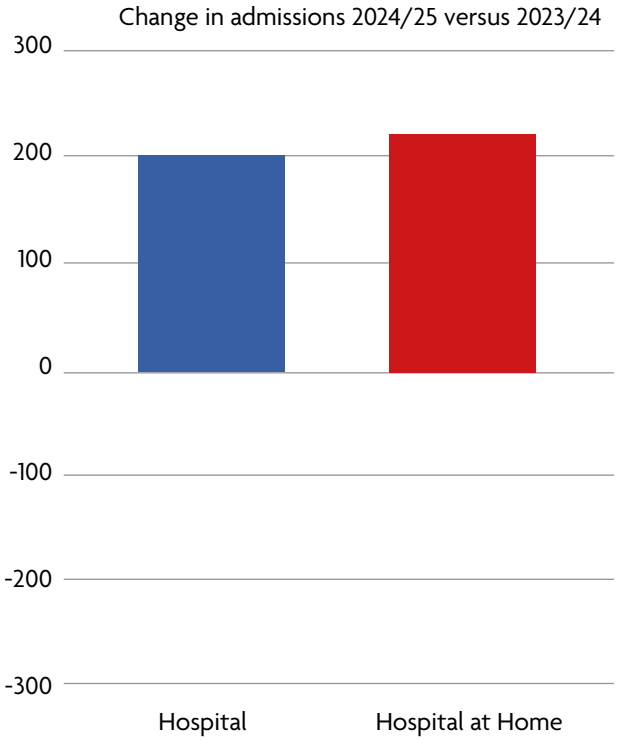
- In 7 cases, health boards only contribute one acute hospital's data to SCoOP, but four boards (NHS GG&C, Lanarkshire, Lothian and Tayside) have multiple hospitals which are added together for these charts.

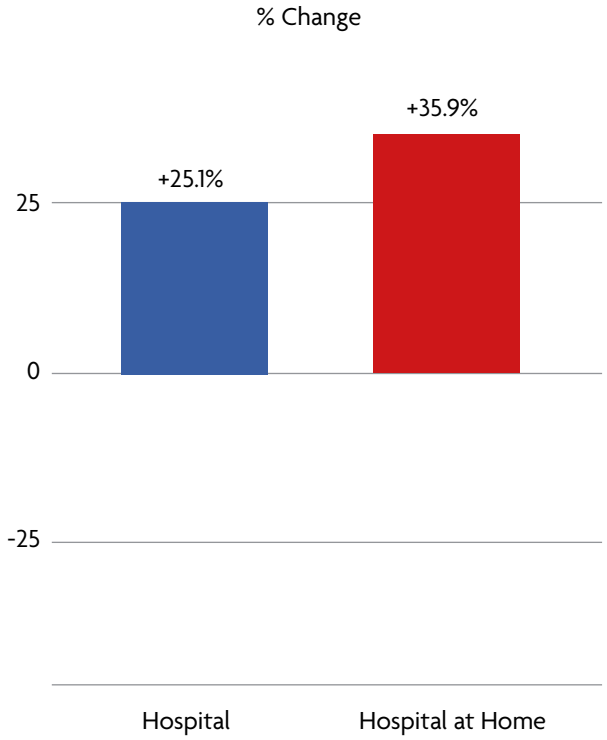
- These pages also provide an opportunity for some local context to be added to these data, accepting the limitations of these nationally reported data to capture all clinical activity in geriatric medicine.



# NHS Aryshire & Arran

**Contributing acute hospital:**
University Hospital Crosshouse



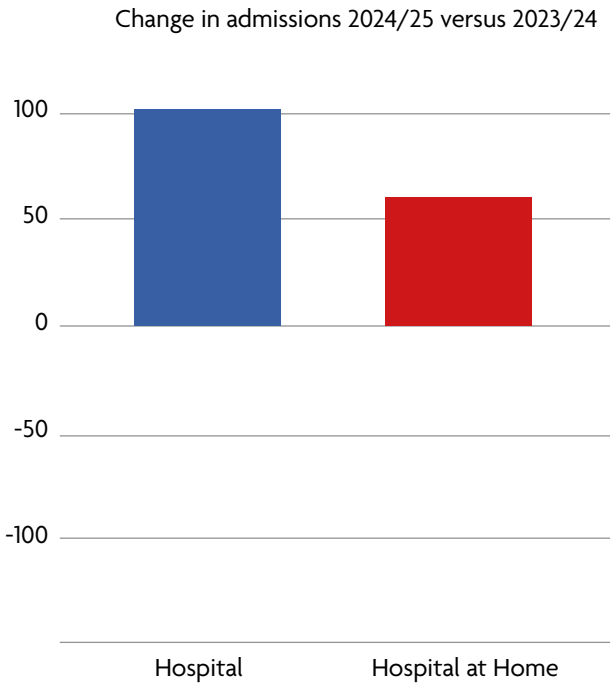



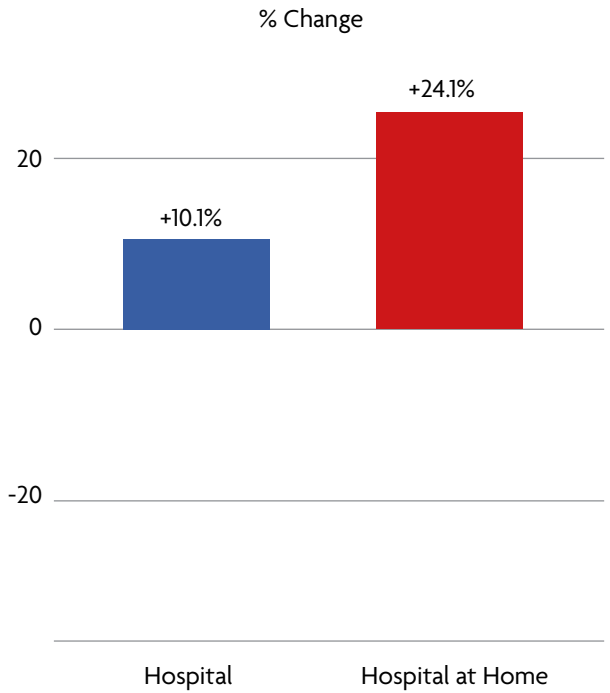

**University Hospital Ayr was historically included in SCoOP but there have been minimal geriatric medicine coded admissions there in recent years.**

Ayrshire & Arran has seen sustained increase in activity in the most recent year, with the highest % growth in geriatric medicine hospital admissions in Scotland. This has been matched by large increases in hospital at home activity – this service has been growing substantially year-on-year.

# NHS Borders

**Contributing acute hospital:**
Borders General Hospital

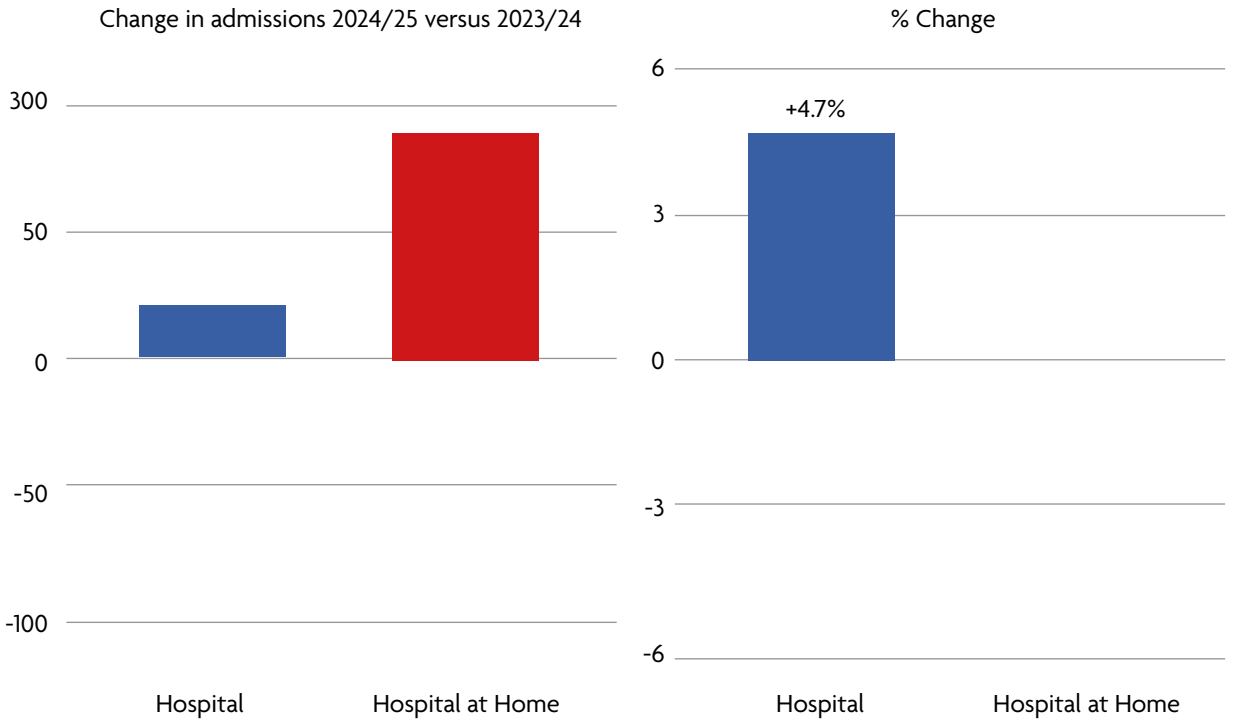



Borders has seen increasing inpatient geriatric medicine activity over the last year, but an even bigger percentage increase in the relatively recently developed hospital at home service – this is increasing quickly from a small base in prior years.

# NHS Dumfries & Galloway

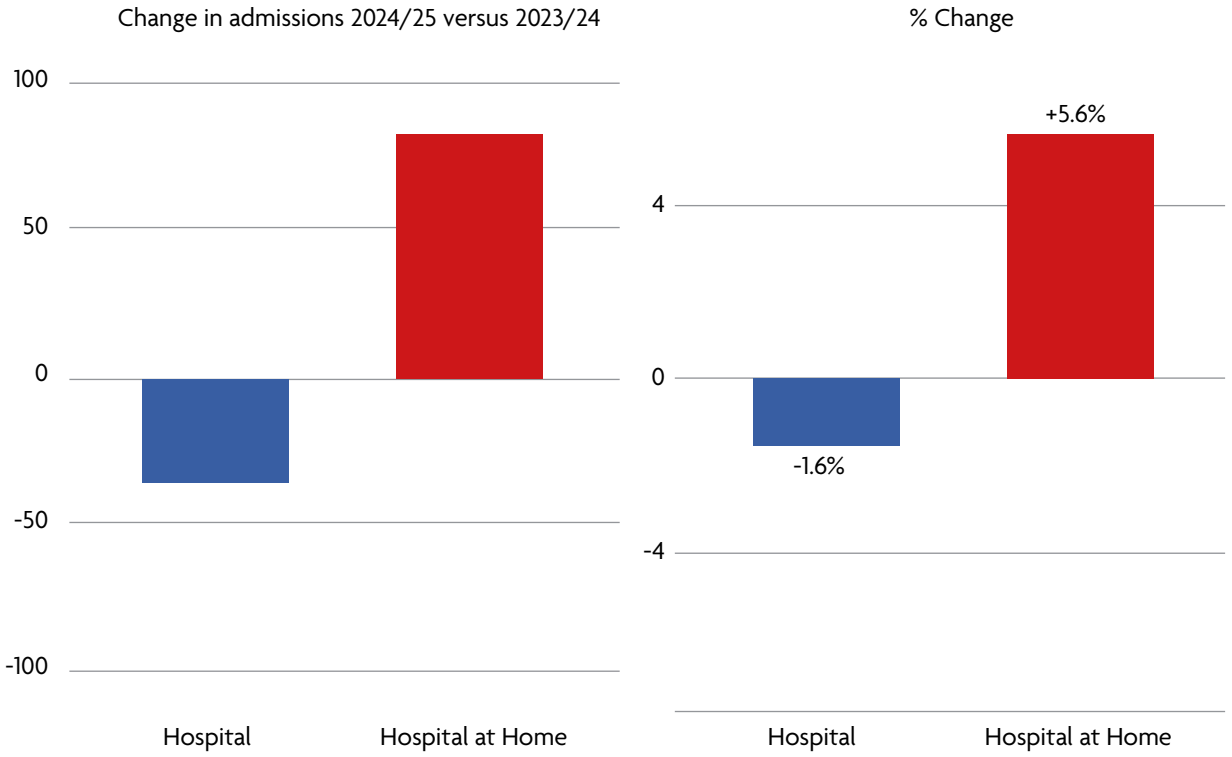
**Contributing acute hospital:**
Dumfries & Galloway Royal Infirmary




Dumfries & Galloway has seen a small year-on-year increase in hospital geriatric medicine activity, but patients are now being seen in their hospital at home service as of 2024/25 (% change not shown as prior year figures very small).

# NHS Fife

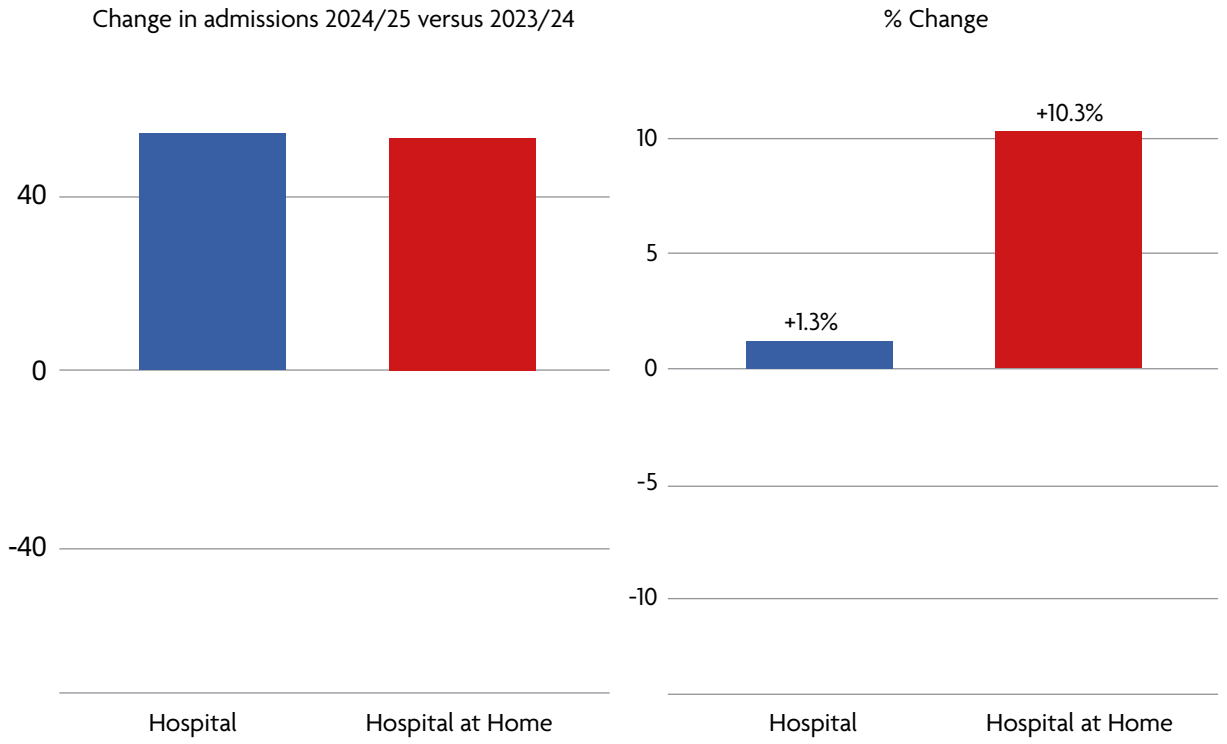
**Contributing acute hospital:**
Victoria Hospital




Fife hospital at home services have seen increased admissions over the last year after a small drop previously. This has been associated with a small fall in hospital admissions under geriatric medicine.

# NHS Forth Valley

**Contributing acute hospital:**
Forth Valley Royal Hospital



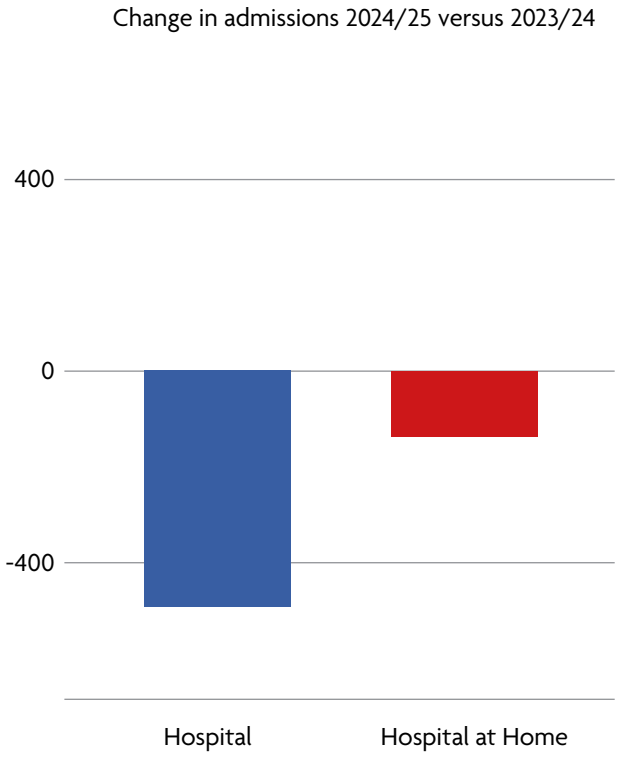


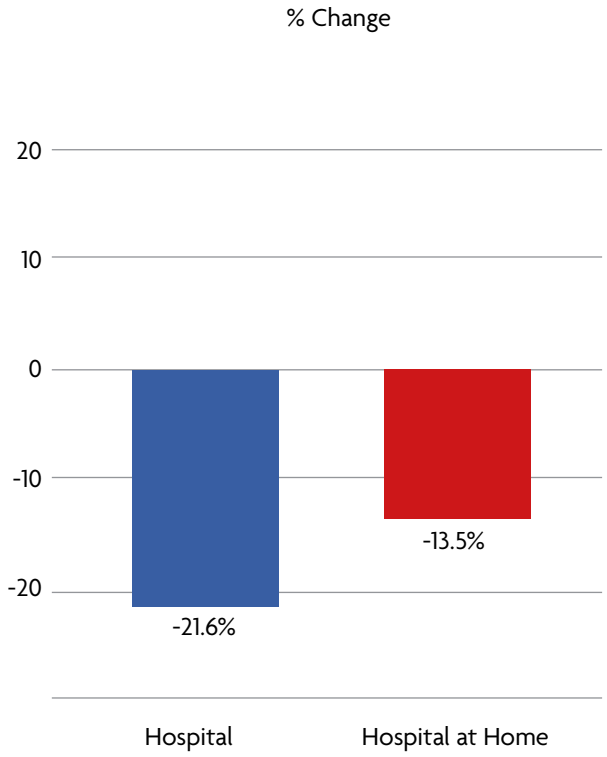


Forth Valley hospital at home continues to see substantial year-on-year growth with more stable hospital admission numbers. Interrogation following the last SCoOP report suggests even greater hospital at home growth, with significantly more activity not being coded in the standard manner (via the Scottish Morbidity Record) and so not yet visible in this report.

# NHS Grampian

**Contributing acute hospital:**
Aberdeen Royal Infirmary



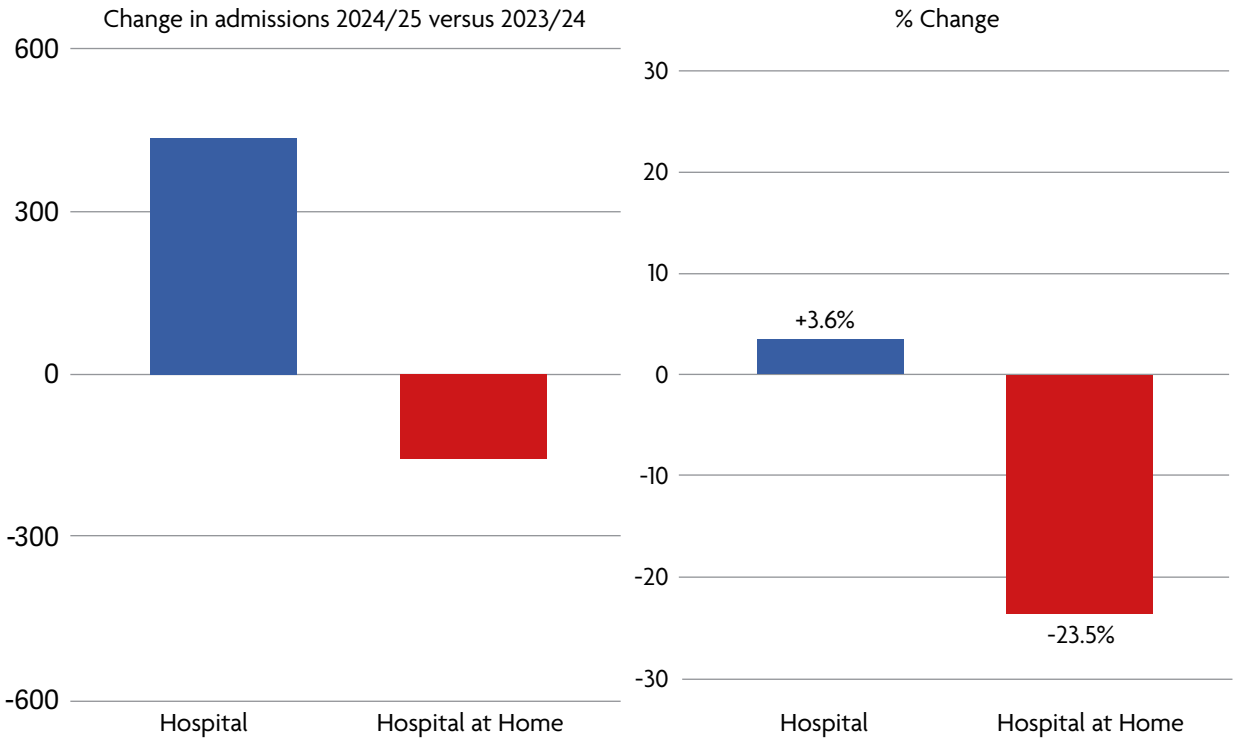




**Dr Gray's Hospital was removed from the data for small numbers (disclosure rules)**

Grampian has seen declines in coded numbers of admissions to both hospital and hospital at home services. For the hospital, this in part may relate to higher level of input to ED and Acute Admission Unit with more shorter admissions coded under acute medicine rather than any change in geriatric medicine service model.

# NHS Greater Glasgow & Clyde

**Contributing acute hospitals:**
Queen Elizabeth University Hospital, Royal Alexandra Hospital, Glasgow Royal Infirmary and Inverclyde Royal Hospital



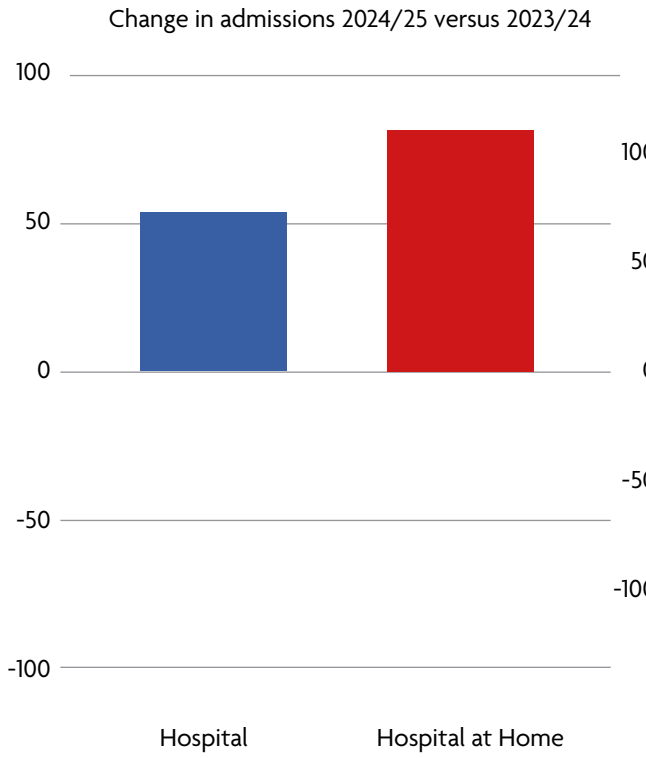


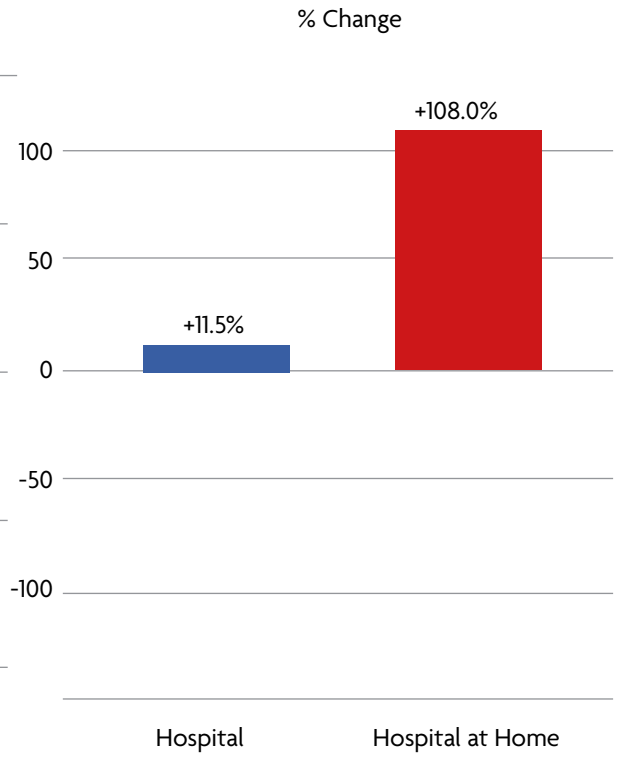


Sustained ongoing small increases in hospital admissions under geriatric medicine have been matched by very small number of hospital at home cases that have fallen slightly over the last 12 months. The absolute reduction is approximately 25% hospital at home admissions equate to about 150, approximately 4% rise equates to about 450 acute hospital admissions.

# NHS Highland

**Contributing acute hospital:**
Raigmore Hospital



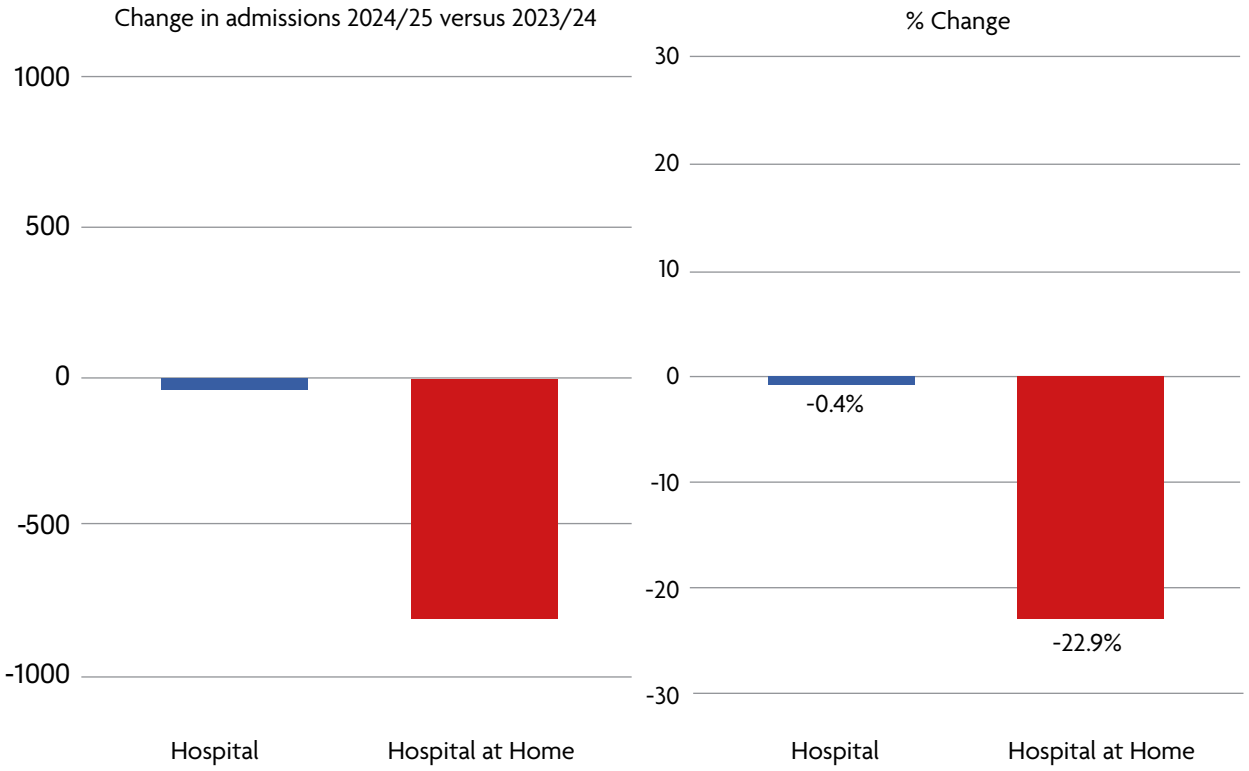




**Caithness Hospital, Lorn & Islands Hospital and Belford Hospital not included for low or zero geriatric admission numbers.**

Highland's hospital at home service has expanded with a doubling in episodes of care over the last year, while admissions to Raigmore hospital have also continued to rise significantly.

# NHS Lanarkshire

**Contributing acute hospitals:**
University Hospital Monklands, University Hospital Hairmyres, University Hospital Wishaw



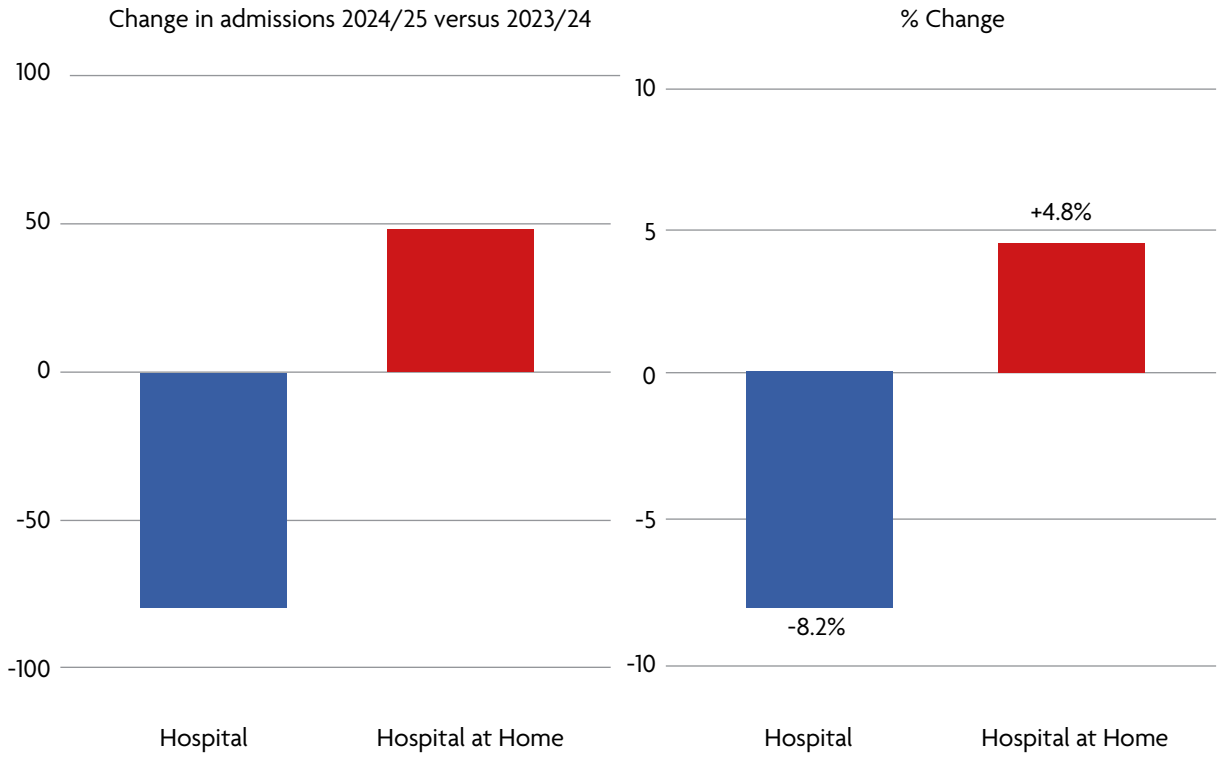




There has been a marked fall in coded hospital at home activity over the last year in Lanarkshire, with numbers returning to levels seen in 2022/23. In the last year admissions to the three contributing hospitals have remained broadly flat.

# NHS Lothian

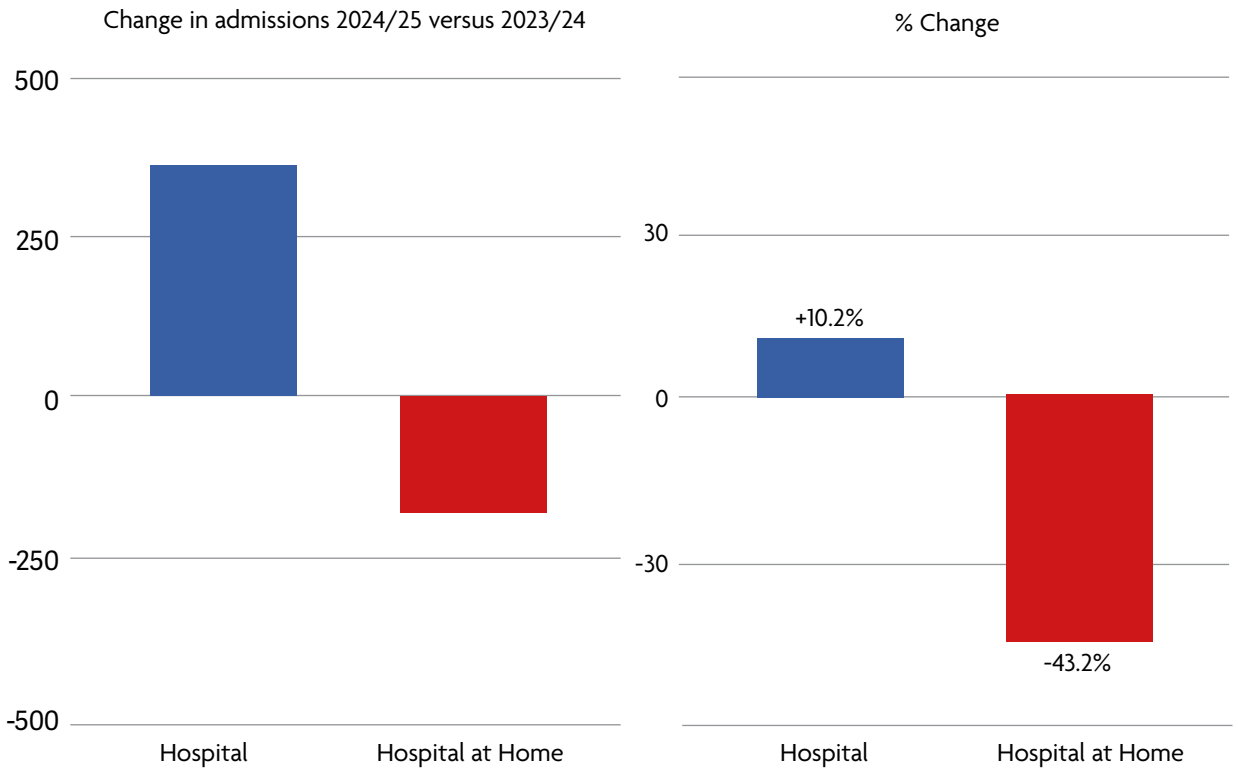
**Contributing acute hospitals:**
Royal Infirmary of Edinburgh, Western General Hospital, St John's Hospital




Lothian has seen continued growth in its hospital at home services, which have more episodes of care in the latest year than hospital geriatric medicine for the first time. The drop in hospital admissions is also associated with the introduction of new dedicated Emergency Department and front door frailty services focussed on admission prevention, often leveraging expanded hospital at home support.

# NHS Tayside

**Contributing acute hospitals:**
Ninewells Hospital, Perth Royal Infirmary




Hospital at home coded episodes have fluctuated in recent years in Tayside, but have fallen year-on-year, with associated ongoing substantial rises in hospital admissions to both Ninewells and PRI. In 2024-2025, the Hospital at Home Service within Perth & Kinross HSCP was non operational. This would likely account for significant reduction in hospital at home admissions in the year 2024/25.

# Individual hospital dashboards

- The following pages show individual hospital data on admissions, trends over time and comparative outcomes (length of stay, same-day discharges, readmissions and deaths).

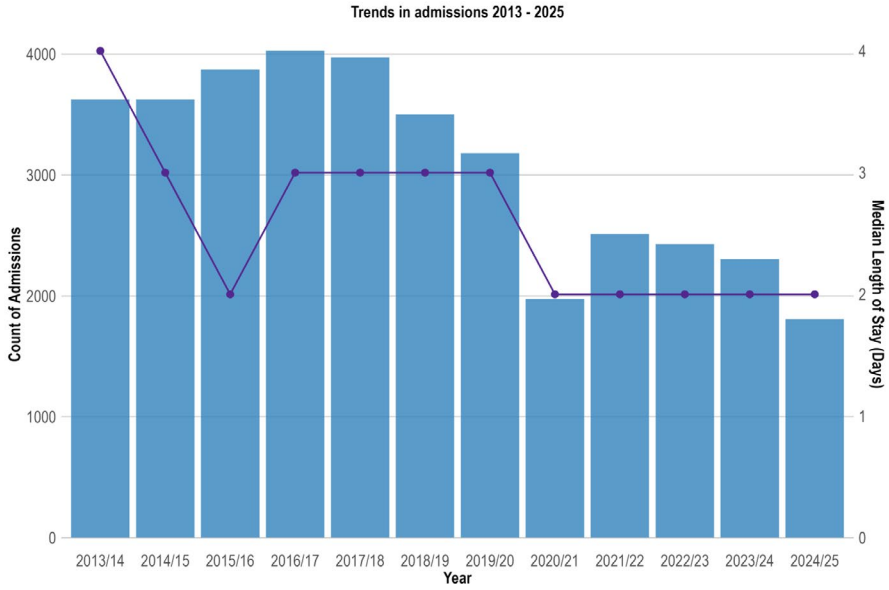
- 'Rank' refers to the position out of the 19 hospitals included in this report, where 1st place represents the site with the largest number (e.g. admissions) or most optimised performance (e.g. lowest readmissions) in each measure as appropriate.

- The 'radar' plot attempts to show the balance of these potentially competing outcomes (e.g. shorter length of stay but higher readmissions). The larger the shaded area, the better overall balanced performance of a hospital across all measures relative to others.

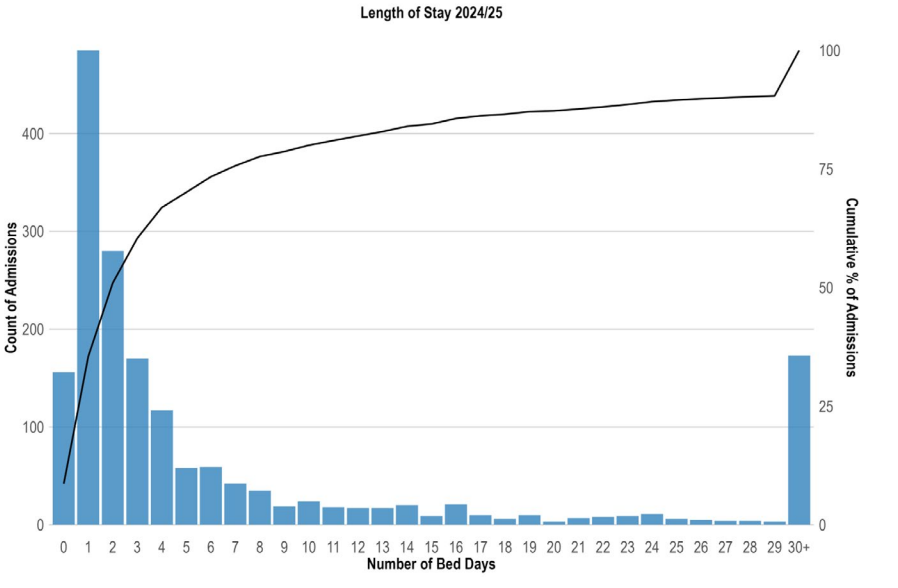
# Aberdeen Royal Infirmary

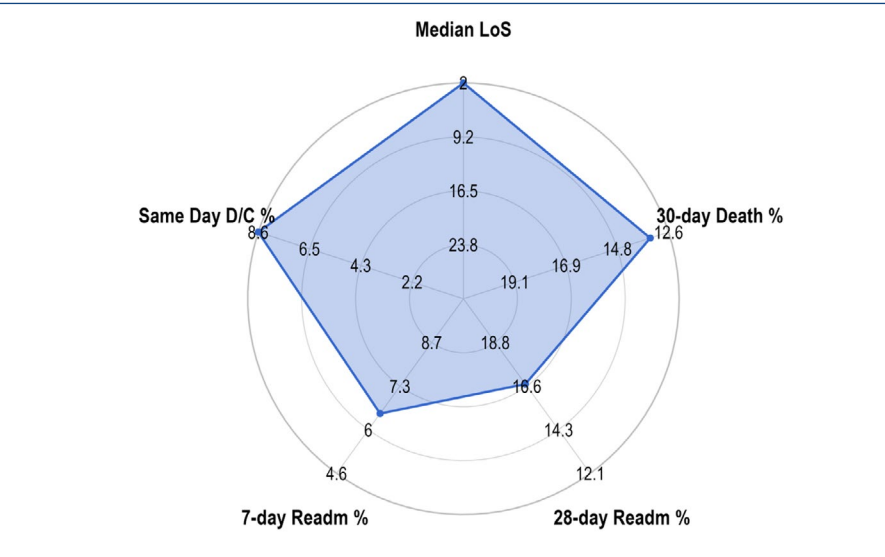
SCoOP Scottish Care of Older People Project

| Aberdeen Royal Infirmary | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 1,806 | -498 | 12 | -5 ▼ |
| Admissions over 85 years (%) | 53.0 | 0 | 6 | +1 ▲ |
| Admissions in SIMD Quintile 1 (%) | 6.0 | 0 | 16 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 2 | 0 | 1 | 0 |
| Same Day Discharges (%) | 8.6 | 0 | 1 | 0 |
| Readmissions at 7 days (%) | 6.5 | -1.8 | 10 | +7 ▲ |
| Readmissions at 28 days (%) | 16.7 | -2.4 | 11 | +4 ▲ |
| Mortality at 30 days (%) | 13.4 | -1.4 | 2 | +3 ▲ |




**Above:** Summary of performance and change between 2023/24 and 2024/25. **Top right:** Trend in admissions since 2013 (bars) and median length of stay (line). **Below:** Distribution of admission length of stay in 2024/25. **Bottom right:** Radar plot comparing outcome measures to other sites in Scotland. each 'spoke' is scaled for the lowest and highest performance in Scotland. Better performance is closer to the outside of the radar, resulting in bigger shaded area.

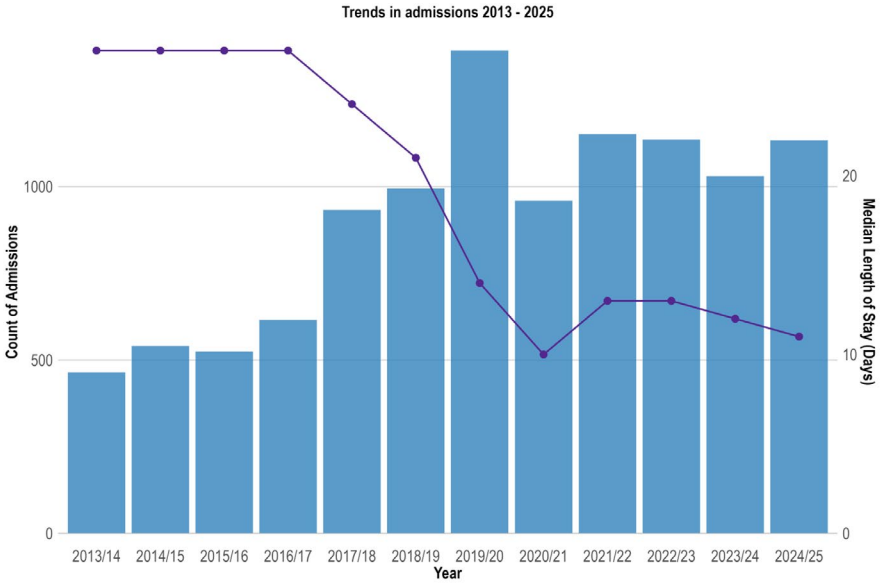


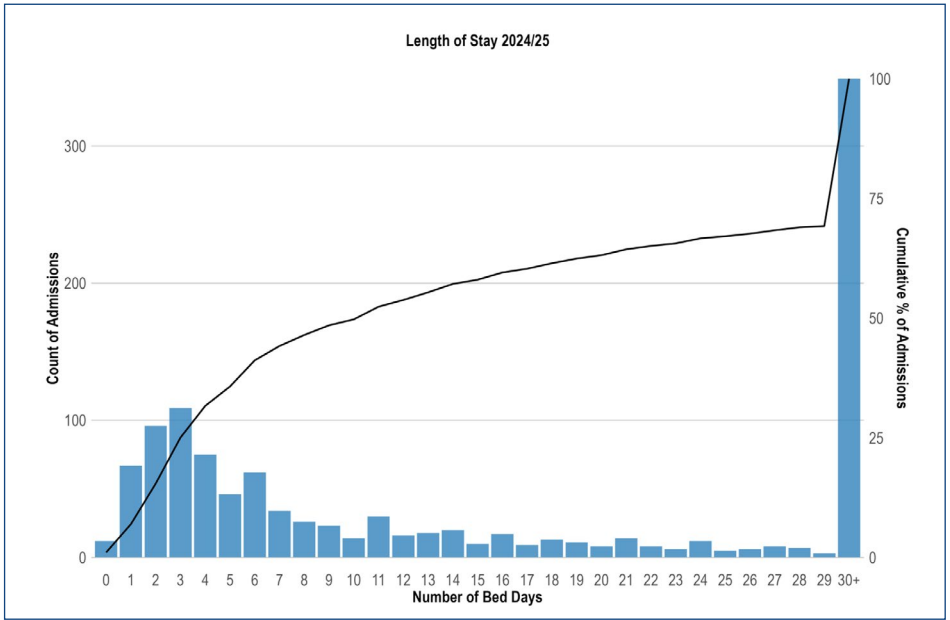
# Borders General Hospital

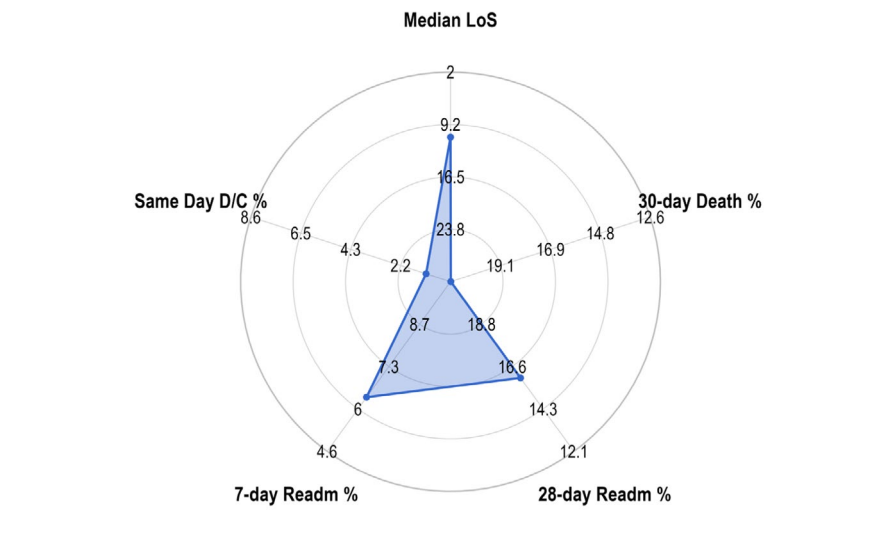
SCoOP Scottish Care of Older People Project

| Borders General Hospital | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 1,134 | +104 | 14 | 0 |
| Admissions over 85 years (%) | 50.0 | -4 | 7 | -3 ▼ |
| Admissions in SIMD Quintile 1 (%) | 5.0 | 0 | 19 | -2 ▼ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 11 | -1 | 11 | +1 ▲ |
| Same Day Discharges (%) | 1.1 | +0.5 | 9 | +2 ▲ |
| Readmissions at 7 days (%) | 6.3 | -0.3 | 9 | +1 ▲ |
| Readmissions at 28 days (%) | 16.0 | +1 | 8 | -4 ▼ |
| Mortality at 30 days (%) | 21.3 | -3.1 | 18 | +1 ▲ |




**Above:** Summary of performance and change between 2023/24 and 2024/25. **Top right:** Trend in admissions since 2013 (bars) and median length of stay (line). **Below:** Distribution of admission length of stay in 2024/25. **Bottom right:** Radar plot comparing outcome measures to other sites in Scotland. each 'spoke' is scaled for the lowest and highest performance in Scotland. Better performance is closer to the outside of the radar, resulting in bigger shaded area.

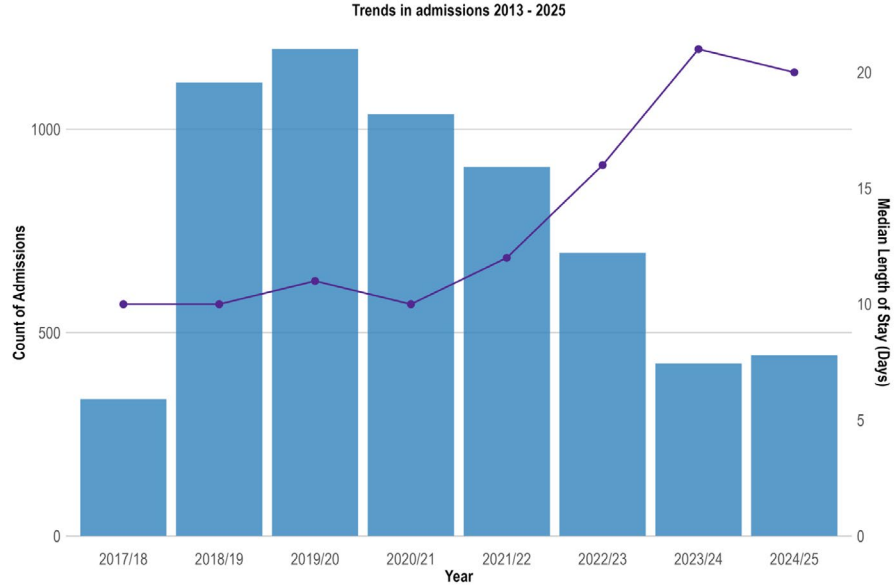


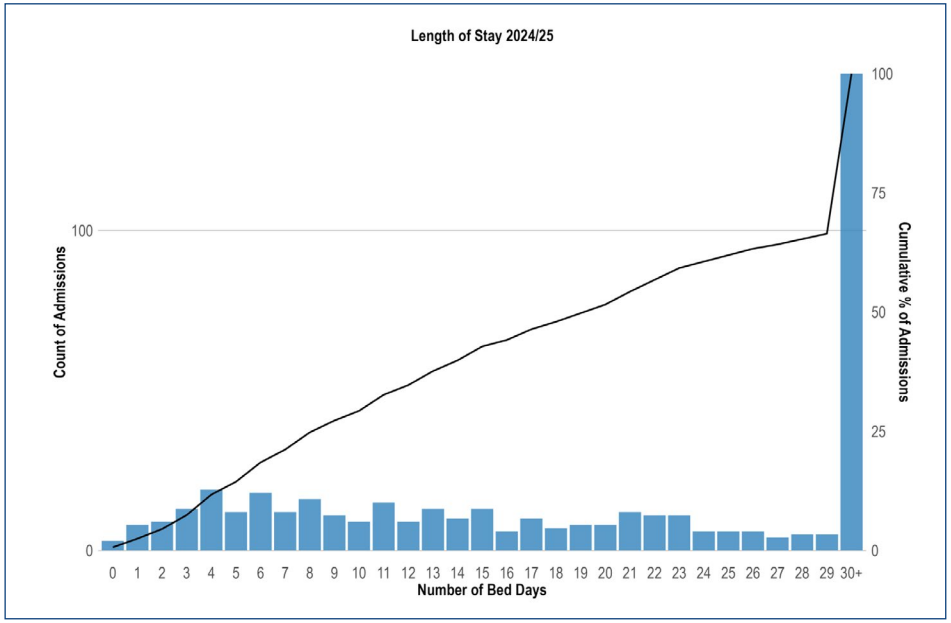



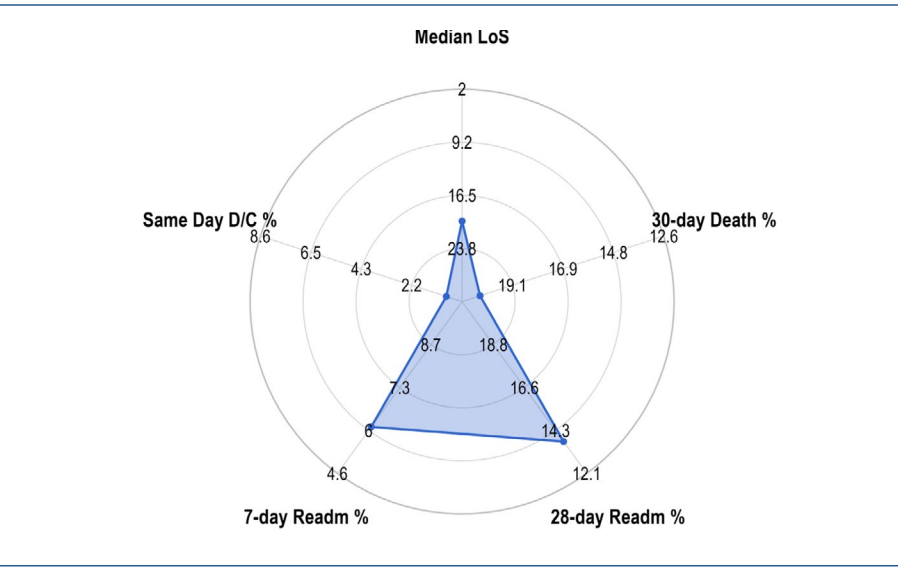
# Dumfries & Galloway Royal Infirmary

SCoOP Scottish Care of Older People Project

| Dumfries & Galloway Royal Infirmary | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 444 | +20 | 19 | 0 |
| Admissions over 85 years (%) | 54.0 | -4 | 4 | -2 ▼ |
| Admissions in SIMD Quintile 1 (%) | 6.0 | 0 | 17 | +1 ▲ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 20 | -1 | 17 | 0 |
| Same Day Discharges (%) | 0.7 | +0.2 | 13 | -1 ▼ |
| Readmissions at 7 days (%) | 6.1 | +1.6 | 7 | -5 ▼ |
| Readmissions at 28 days (%) | 13.7 | -1.6 | 3 | +3 ▲ |
| Mortality at 30 days (%) | 20.5 | -2.4 | 17 | +1 ▲ |



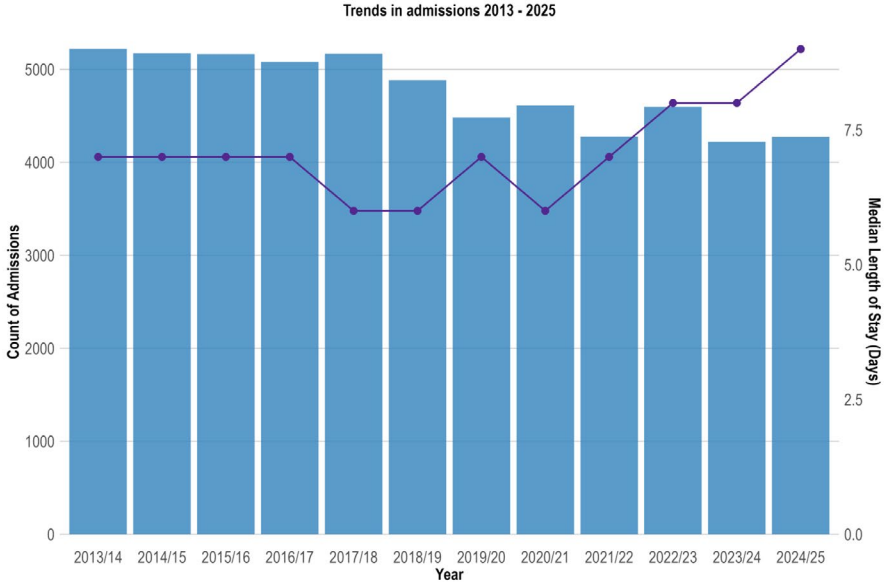



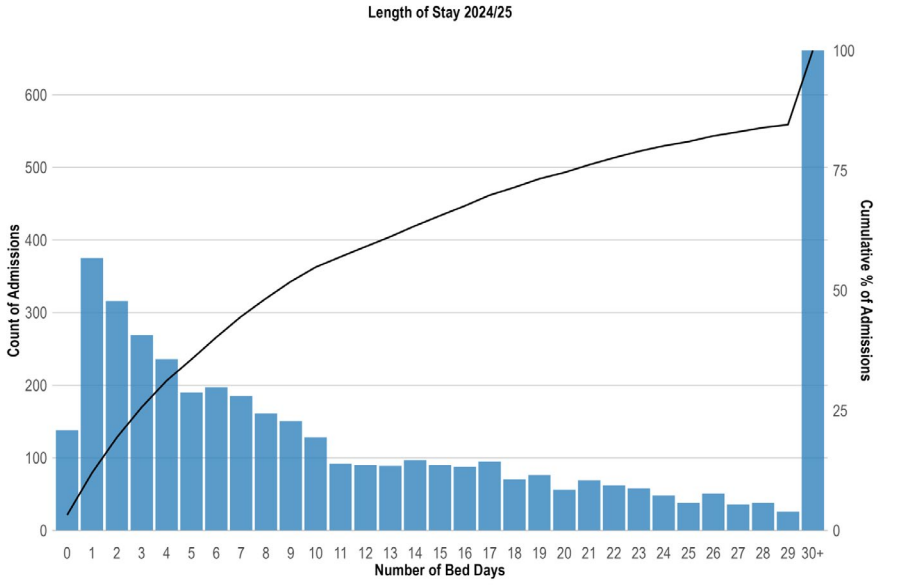

**Above:** Summary of performance and change between 2023/24 and 2024/25. **Top right:** Trend in admissions since 2013 (bars) and median length of stay (line). **Below:** Distribution of admission length of stay in 2024/25. **Bottom right:** Radar plot comparing outcome measures to other sites in Scotland. each 'spoke' is scaled for the lowest and highest performance in Scotland. Better performance is closer to the outside of the radar, resulting in bigger shaded area.

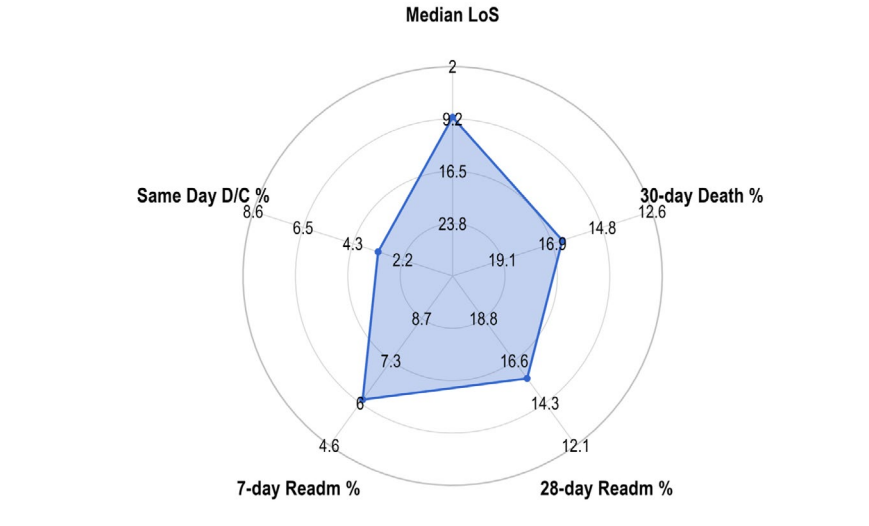
# Forth Valley Royal Hospital

| Forth Valley Royal Hospital | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 4,276 | +55 | 2 | 0 |
| Admissions over 85 years (%) | 42.0 | +3 | 15 | +2 ▲ |
| Admissions in SIMD Quintile 1 (%) | 17.0 | 0 | 11 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 9 | +1 | 7 | -1 ▼ |
| Same Day Discharges (%) | 3.2 | -1.2 | 2 | 0 |
| Readmissions at 7 days (%) | 6.1 | +0.1 | 6 | +1 ▲ |
| Readmissions at 28 days (%) | 15.6 | +0.5 | 6 | -1 ▼ |
| Mortality at 30 days (%) | 16.5 | -1.1 | 10 | +2 ▲ |




**Above:** Summary of performance and change between 2023/24 and 2024/25. **Top right:** Trend in admissions since 2013 (bars) and median length of stay (line). **Below:** Distribution of admission length of stay in 2024/25. **Bottom right:** Radar plot comparing outcome measures to other sites in Scotland. each 'spoke' is scaled for the lowest and highest performance in Scotland. Better performance is closer to the outside of the radar, resulting in bigger shaded area.

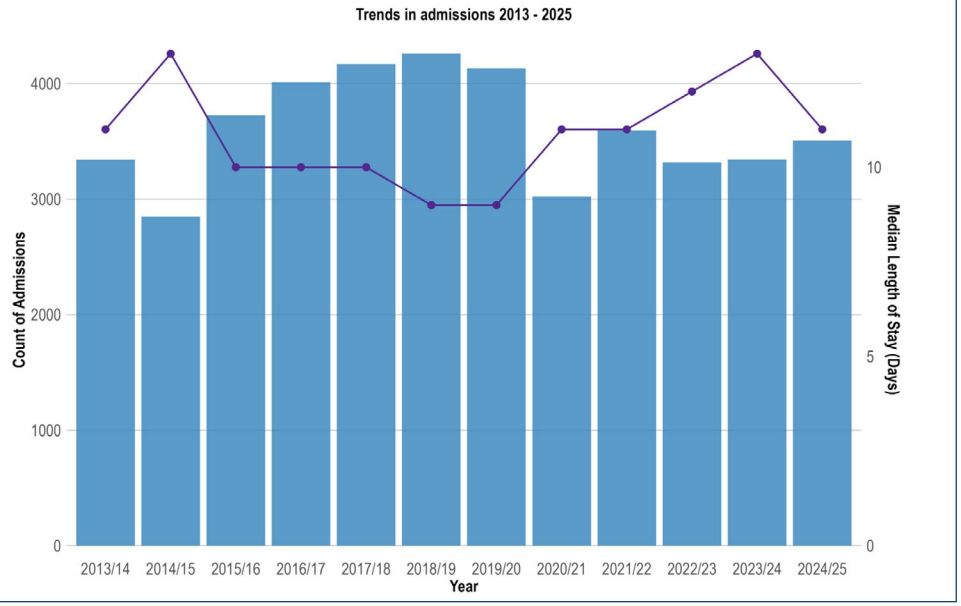


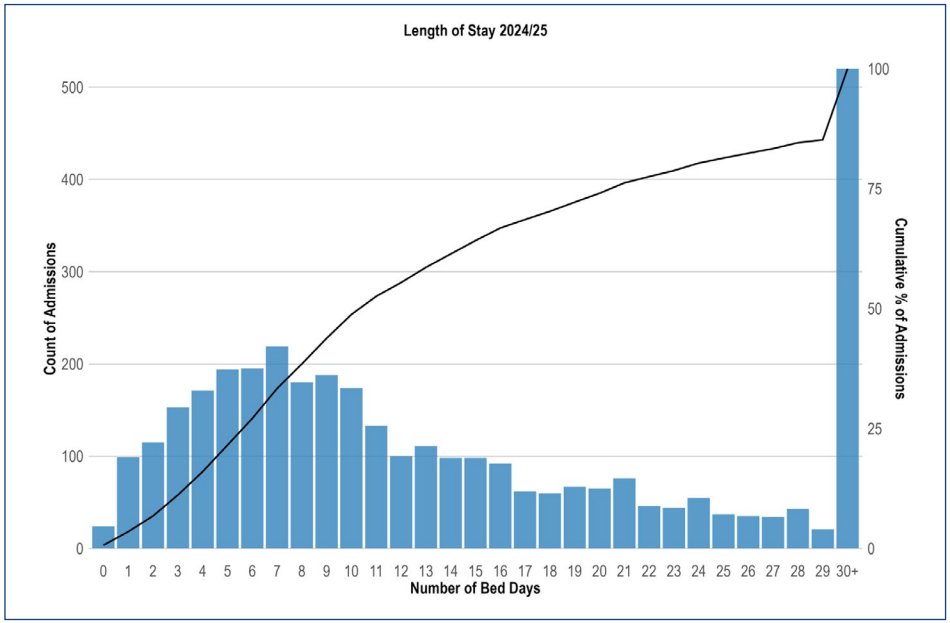
# Glasgow Royal Infirmary

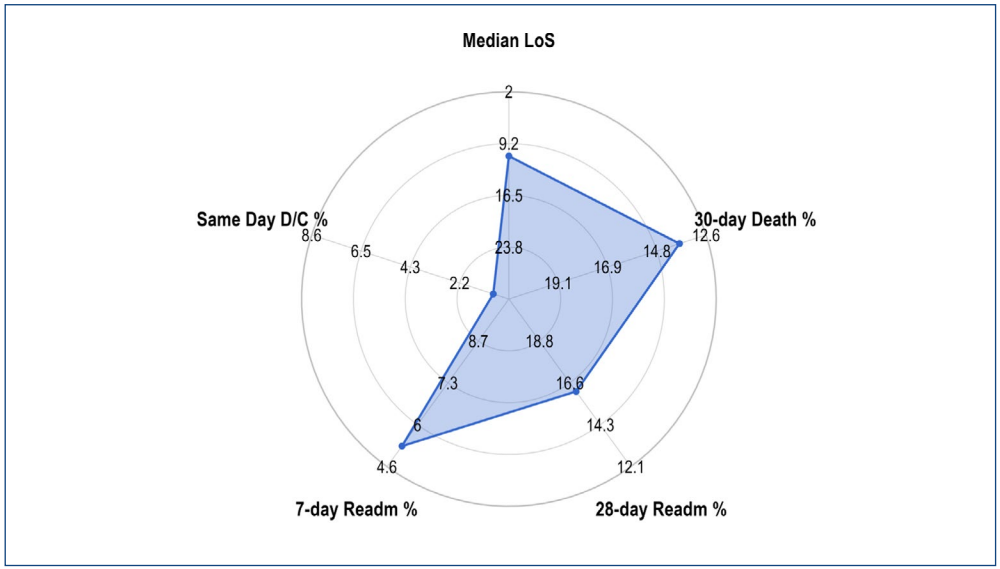
SCoOP Scottish Care of Older People Project

| Glasgow Royal Infirmary | | | | |
|---|---|---|---|---|
| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
| Admissions | 3,509 | +166 | 3 | +1 ▲ |
| Admissions over 85 years (%) | 40.0 | -2 | 16 | -3 ▼ |
| Admissions in SIMD Quintile 1 (%) | 49.0 | +1 | 1 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 11 | -2 | 11 | +2 ▲ |
| Same Day Discharges (%) | 0.7 | +0.4 | 12 | +3 ▲ |
| Readmissions at 7 days (%) | 5.3 | -1.1 | 4 | +5 ▲ |
| Readmissions at 28 days (%) | 16.1 | -1.9 | 10 | +2 ▲ |
| Mortality at 30 days (%) | 13.8 | -0.8 | 4 | 0 |




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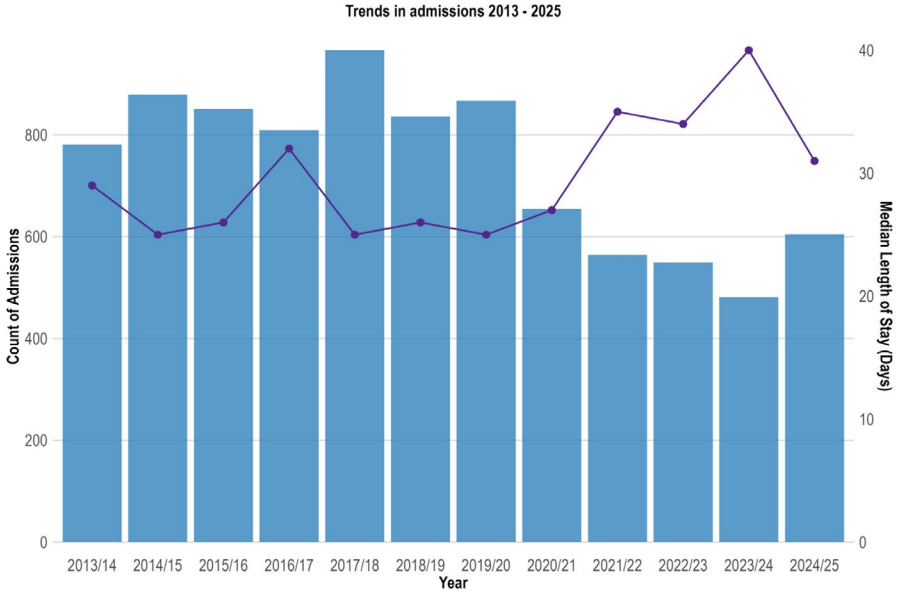


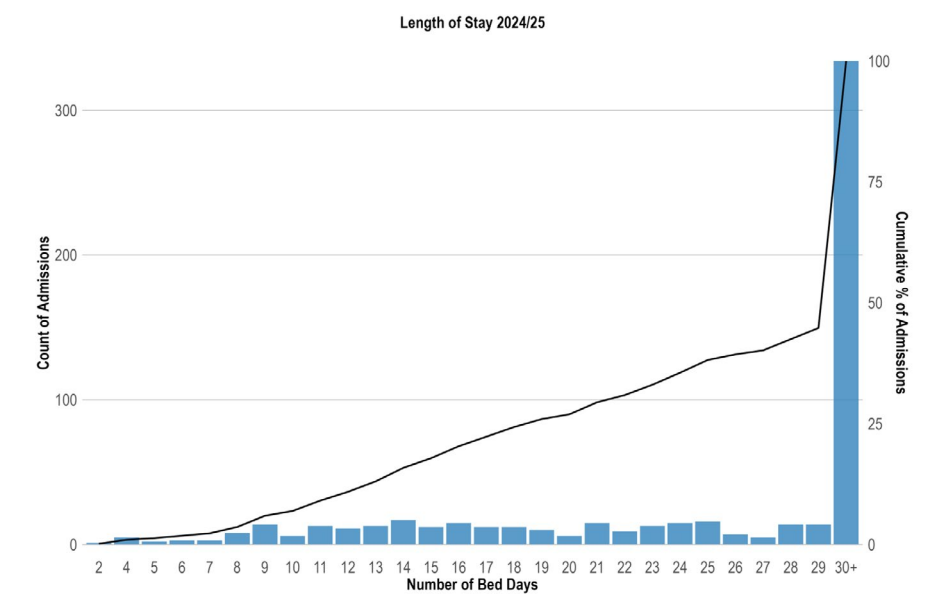
# Inverclyde Royal Hospital

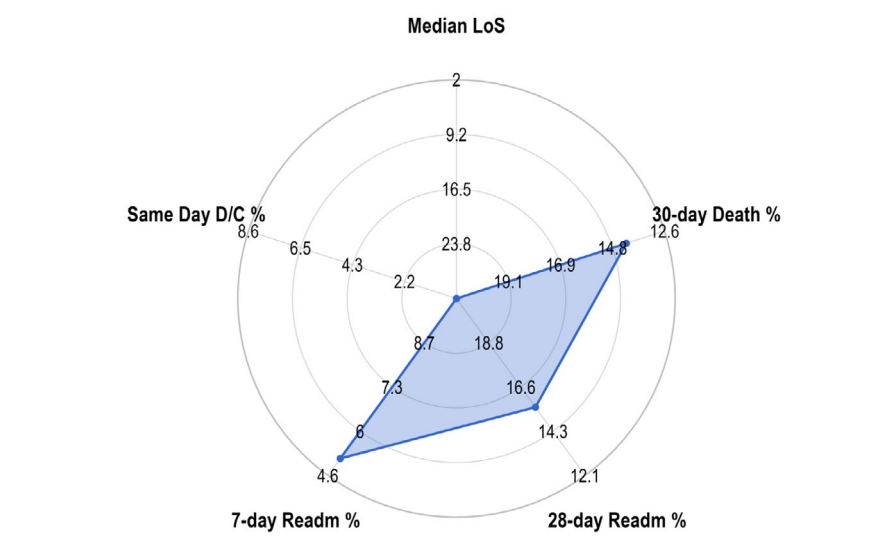
SCoOP Scottish Care of Older People Project

| Inverclyde Royal Hospital | | | | |
|---|---|---|---|---|
| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
| Admissions | 605 | +124 | 17 | 0 |
| Admissions over 85 years (%) | 47.0 | 0 | 10 | 0 |
| Admissions in SIMD Quintile 1 (%) | 47.0 | +1 | 2 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 31 | -9 | 19 | 0 |
| Same Day Discharges (%) | 0.0 | -0.4 | 19 | -5 ▼ |
| Readmissions at 7 days (%) | 5.1 | -0.1 | 3 | 0 |
| Readmissions at 28 days (%) | 15.5 | +1.8 | 5 | -3 ▼ |
| Mortality at 30 days (%) | 14.2 | -5.5 | 5 | +12 ▲ |




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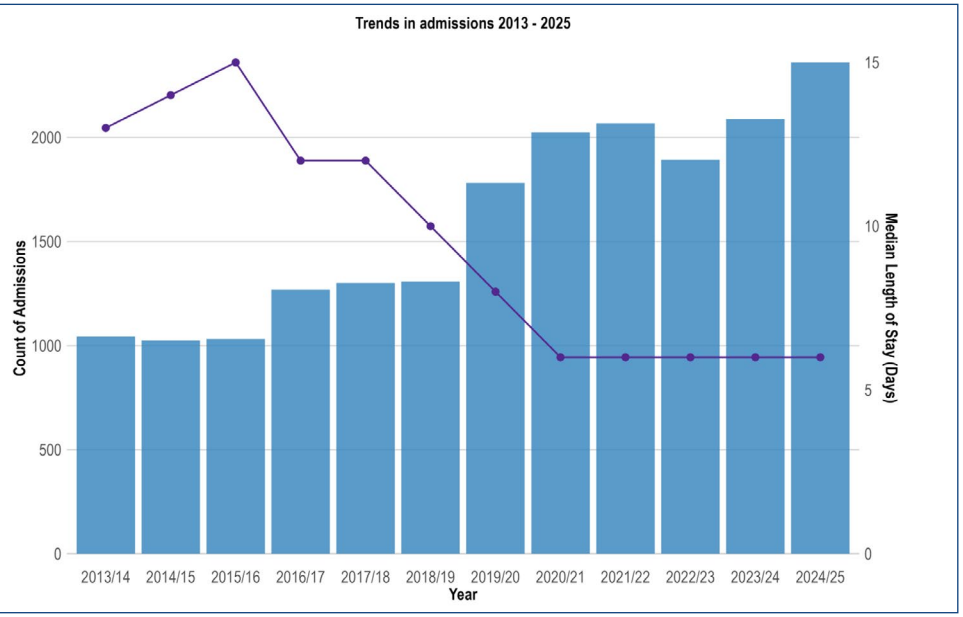


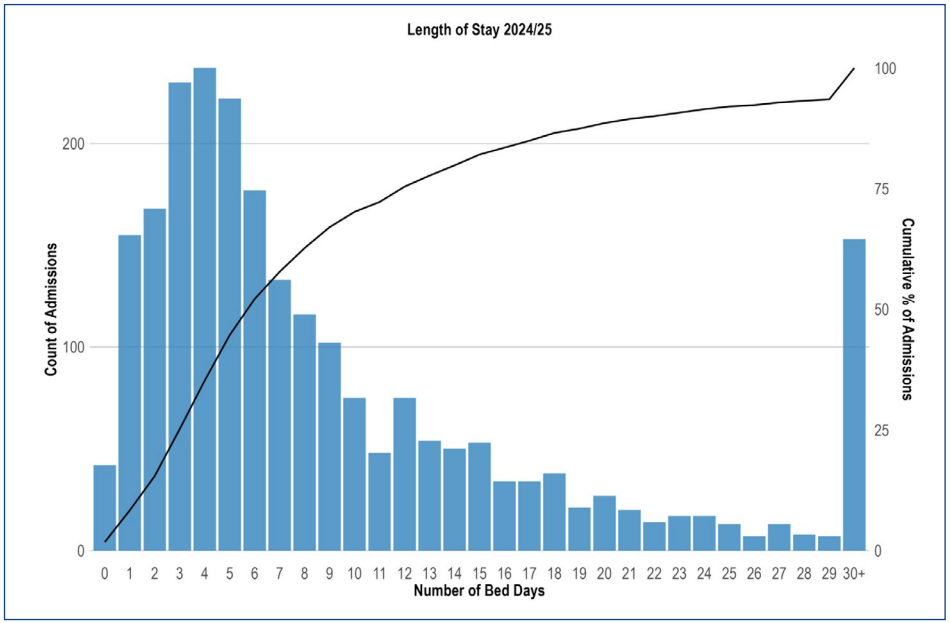
# Ninewells Hospital

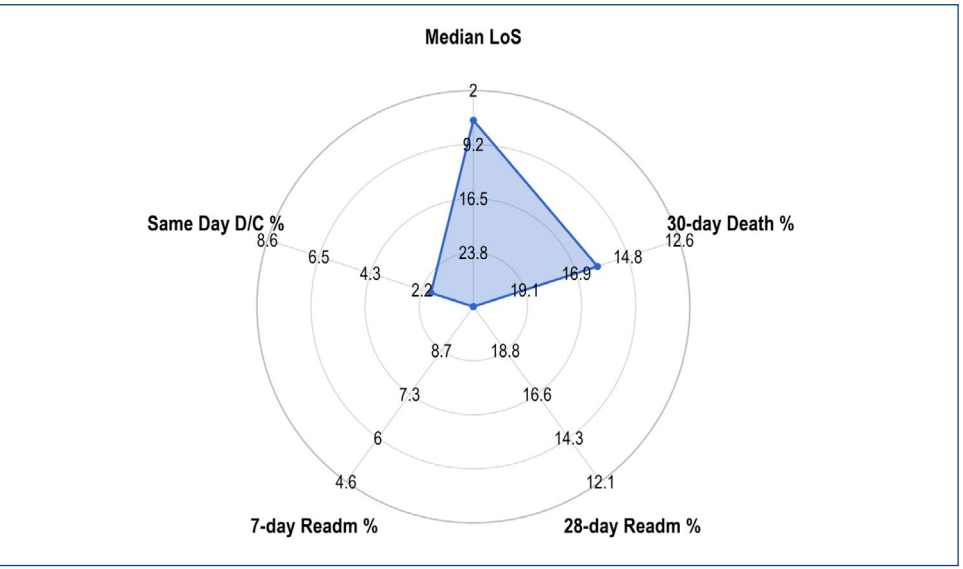
SCoOP Scottish Care of Older People Project

| Ninewells Hospital | | | | |
|---|---|---|---|---|
| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
| Admissions | 2,360 | +272 | 7 | +3 ▲ |
| Admissions over 85 years (%) | 53.0 | -1 | 5 | +1 ▲ |
| Admissions in SIMD Quintile 1 (%) | 22.0 | 0 | 8 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 6 | 0 | 2 | 0 |
| Same Day Discharges (%) | 1.8 | -0.6 | 8 | -3 ▼ |
| Readmissions at 7 days (%) | 10.1 | -0.1 | 19 | 0 |
| Readmissions at 28 days (%) | 21.1 | 0 | 19 | 0 |
| Mortality at 30 days (%) | 16.1 | -0.7 | 9 | 0 |




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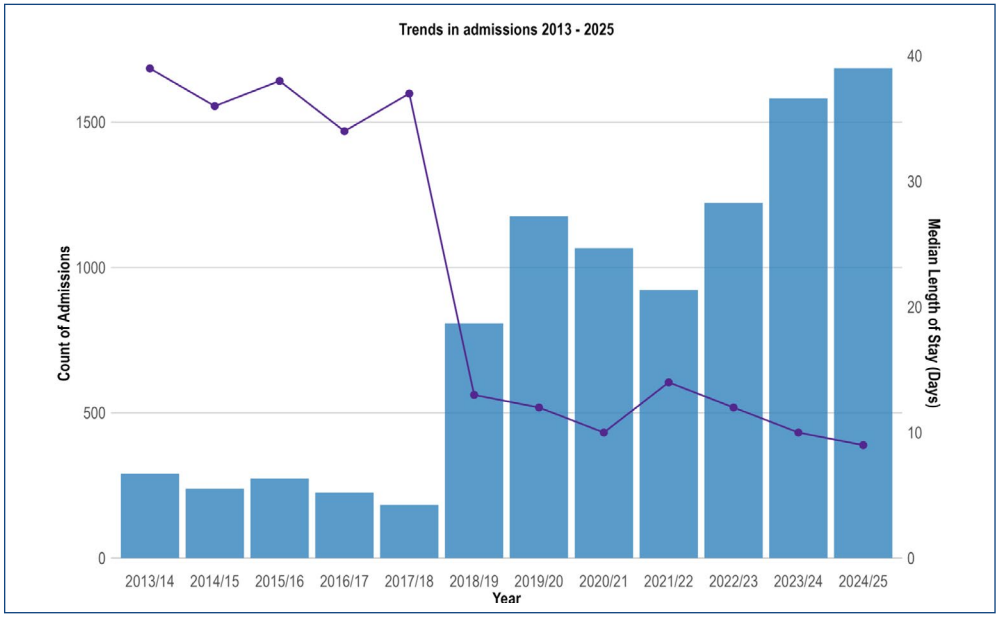



# Perth Royal Infirmary

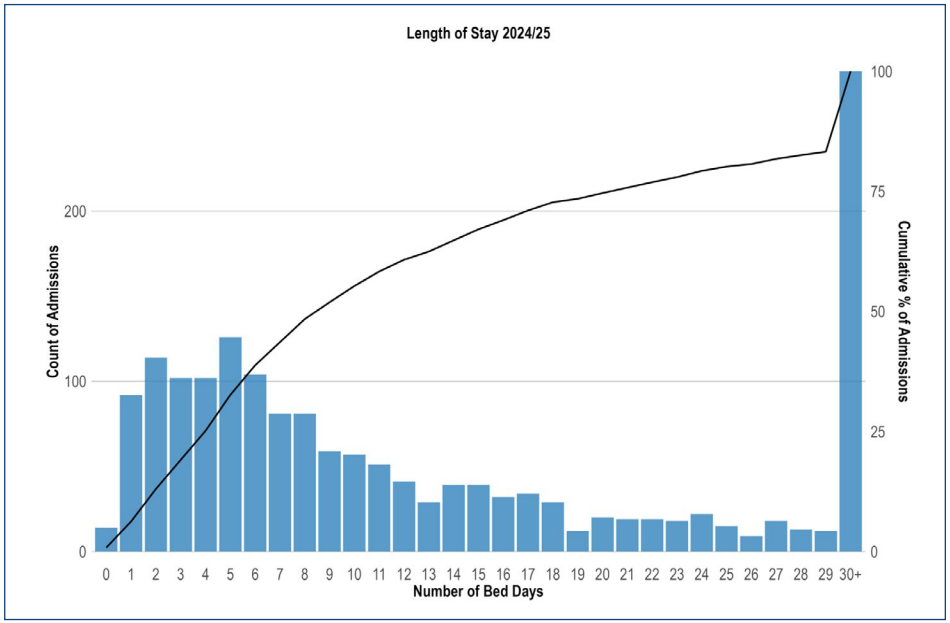


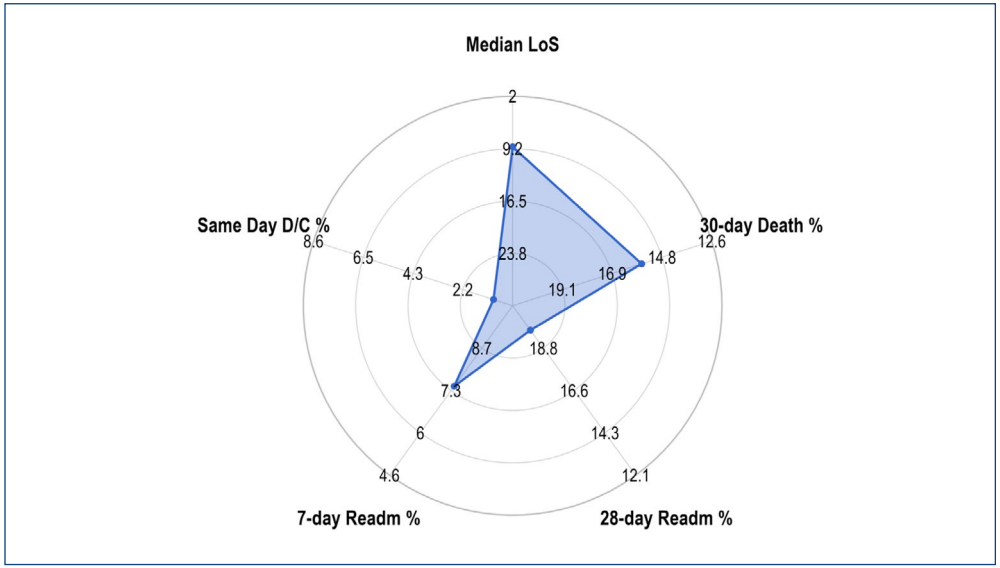
Perth Royal Infirmary

| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 1,685 | +103 | 13 | 0 |
| Admissions over 85 years (%) | 55.0 | -2 | 2 | +1 ▲ |
| Admissions in SIMD Quintile 1 (%) | 5.0 | 0 | 18 | +1 ▲ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 9 | -1 | 7 | +1 ▲ |
| Same Day Discharges (%) | 0.8 | 0 | 10 | -1 ▼ |
| Readmissions at 7 days (%) | 7.5 | -0.8 | 15 | +1 ▲ |
| Readmissions at 28 days (%) | 19.8 | +0.2 | 17 | -1 ▼ |
| Mortality at 30 days (%) | 15.7 | -0.3 | 8 | -1 ▼ |




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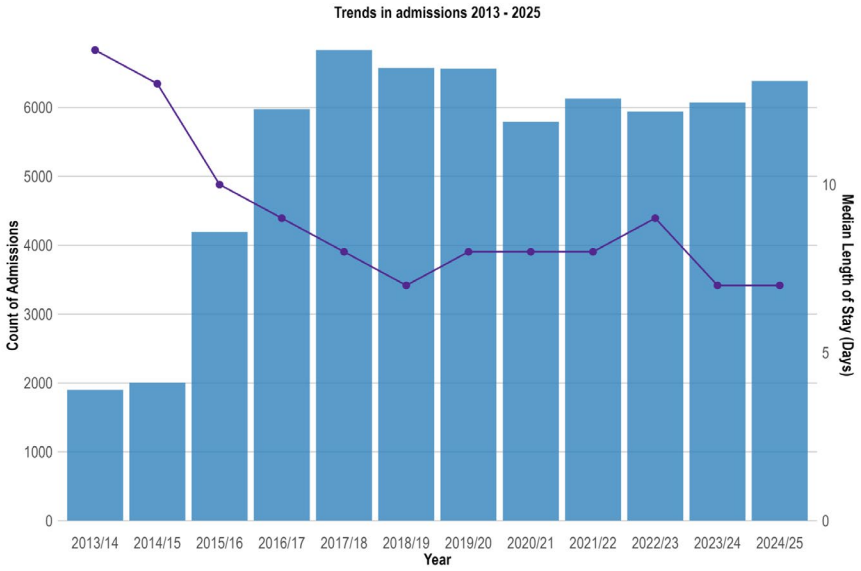


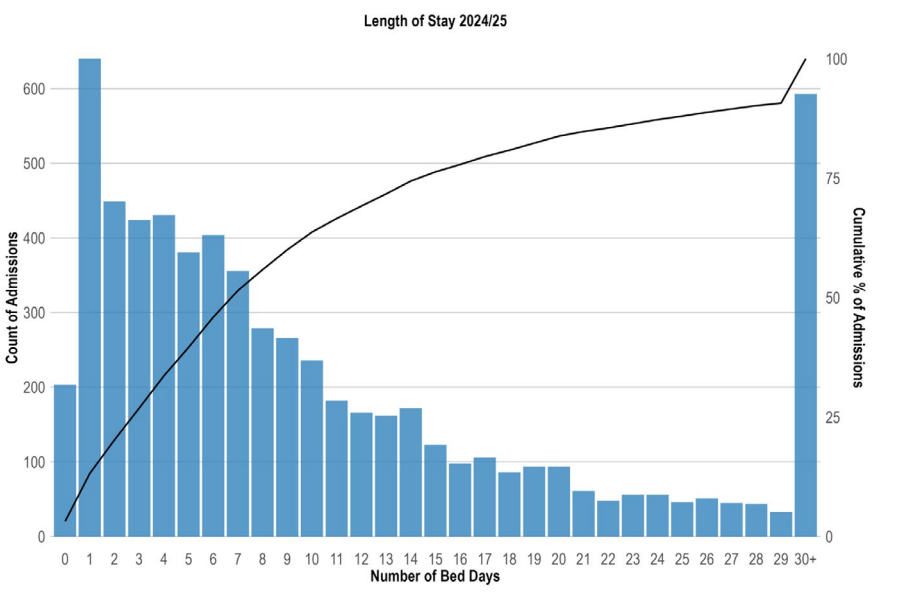
# Queen Elizabeth University Hospital

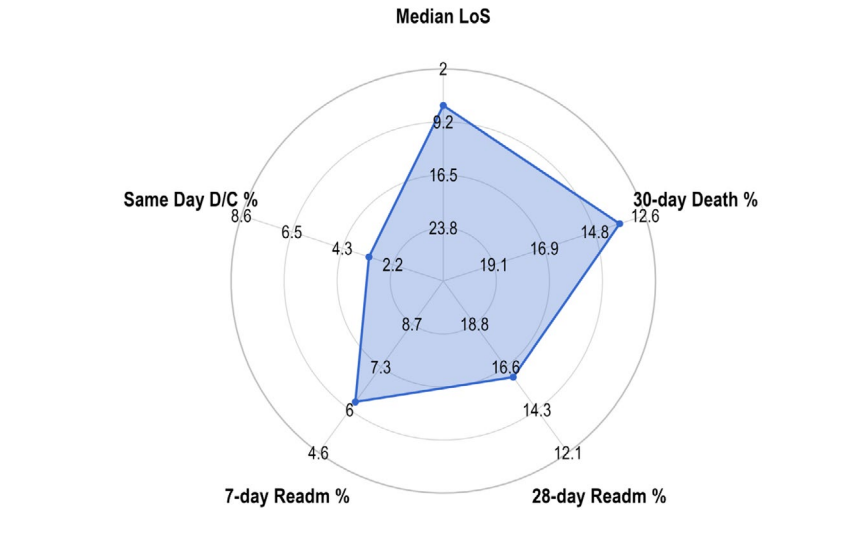
SCoOP Scottish Care of Older People Project

| Queen Elizabeth University Hospital | | | | |
|---|---|---|---|---|
| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
| Admissions | 6,385 | +314 | 1 | 0 |
| Admissions over 85 years (%) | 49.0 | 0 | 8 | 0 |
| Admissions in SIMD Quintile 1 (%) | 33.0 | 0 | 5 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 7 | 0 | 3 | 0 |
| Same Day Discharges (%) | 3.2 | 0 | 3 | +1 ▲ |
| Readmissions at 7 days (%) | 6.2 | +0.7 | 8 | -3 ▼ |
| Readmissions at 28 days (%) | 16.0 | +1.8 | 9 | -6 ▼ |
| Mortality at 30 days (%) | 13.7 | -1.6 | 3 | +3 ▲ |




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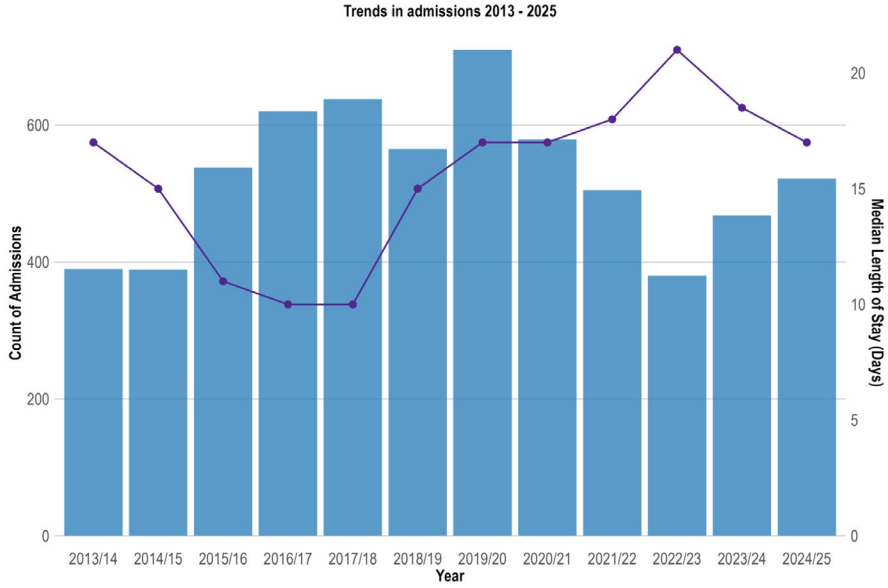


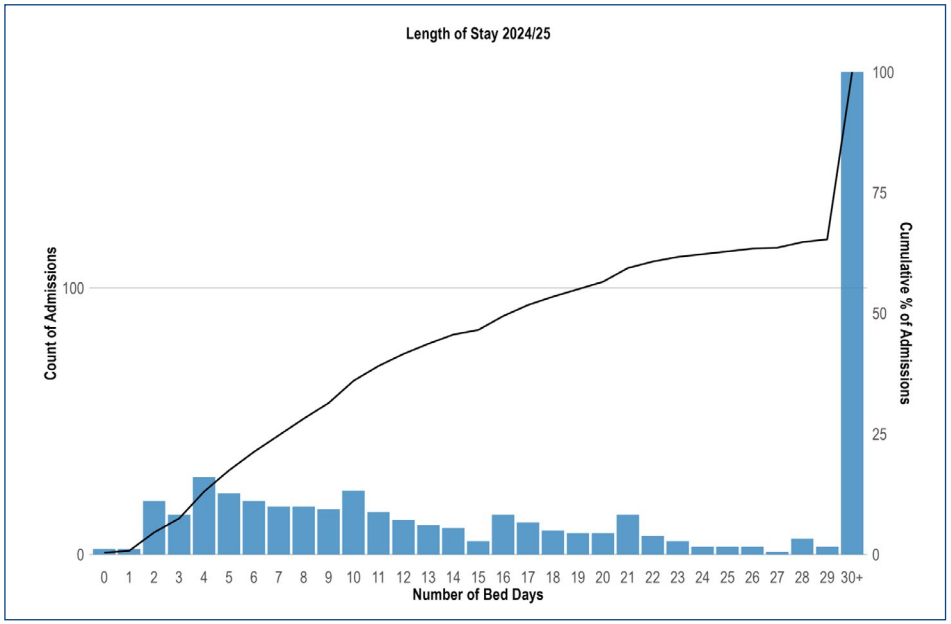
# Raigmore Hospital

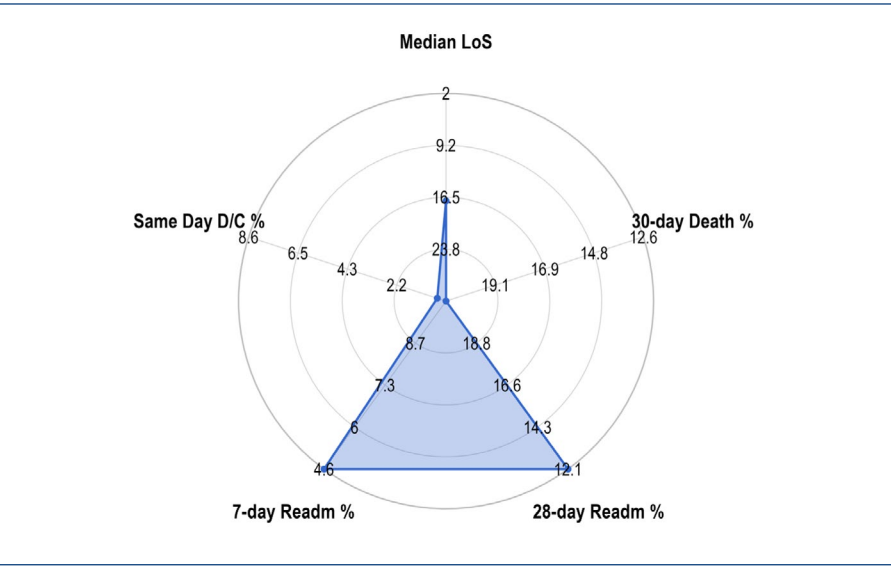
SCoOP Scottish Care of Older People Project

| Raigmore Hospital | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 522 | +54 | 18 | 0 |
| Admissions over 85 years (%) | 48.0 | +6 | 9 | +5 ▲ |
| Admissions in SIMD Quintile 1 (%) | 8.0 | 0 | 15 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 17 | -1 | 15 | 0 |
| Same Day Discharges (%) | 0.4 | +0.4 | 17 | +2 ▲ |
| Readmissions at 7 days (%) | 4.6 | +2.5 | 1 | 0 |
| Readmissions at 28 days (%) | 12.1 | +0.7 | 1 | 0 |
| Mortality at 30 days (%) | 21.3 | +3.5 | 19 | -6 ▼ |




**Above:** Summary of performance and change between 2023/24 and 2024/25. **Top right:** Trend in admissions since 2013 (bars) and median length of stay (line). **Below:** Distribution of admission length of stay in 2024/25. **Bottom right:** Radar plot comparing outcome measures to other sites in Scotland. each 'spoke' is scaled for the lowest and highest performance in Scotland. Better performance is closer to the outside of the radar, resulting in bigger shaded area.

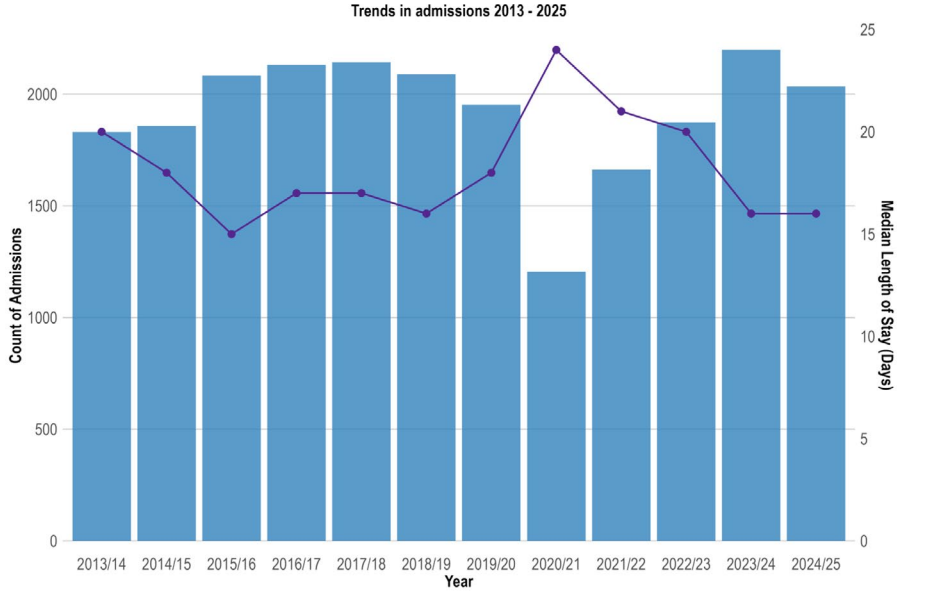


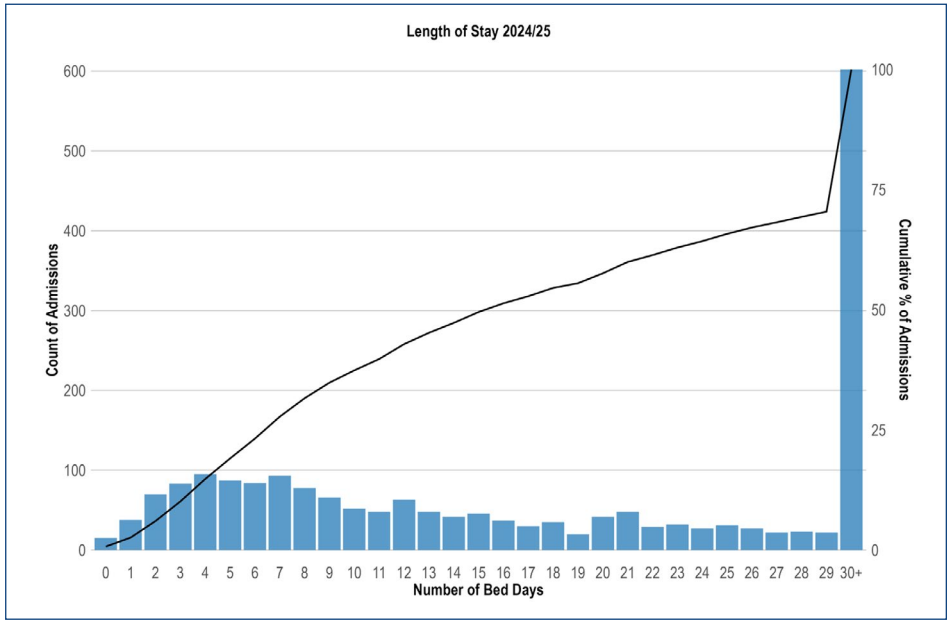
# Royal Alexandra Hospital

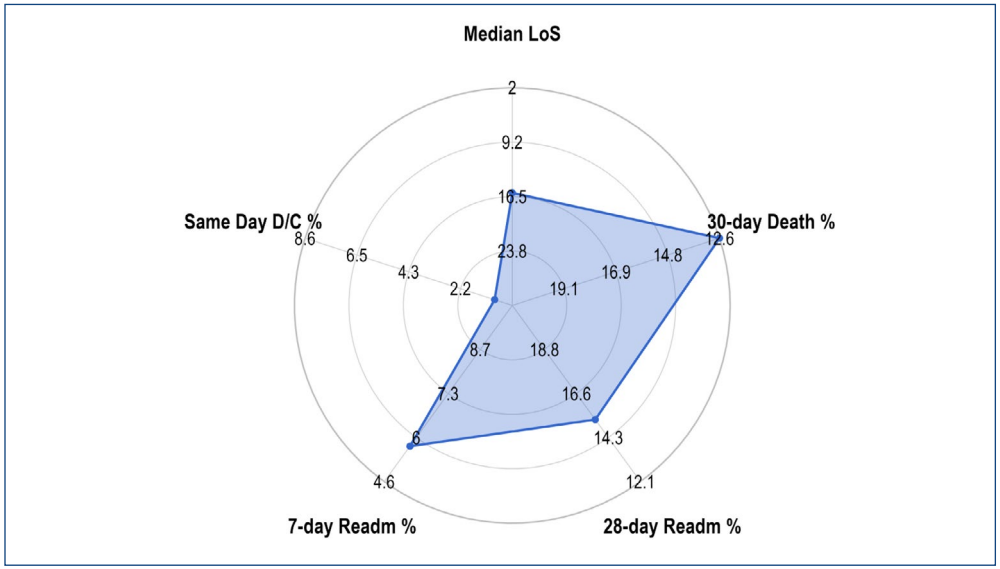
SCoOP Scottish Care of Older People Project

| Royal Alexandra Hospital | | | | |
|---|---|---|---|---|
| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
| Admissions | 2,035 | -163 | 9 | -1 ▼ |
| Admissions over 85 years (%) | 47.0 | 0 | 11 | -2 ▼ |
| Admissions in SIMD Quintile 1 (%) | 25.0 | 0 | 7 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 16 | 0 | 14 | 0 |
| Same Day Discharges (%) | 0.7 | +0.1 | 11 | -1 ▼ |
| Readmissions at 7 days (%) | 5.7 | +0.3 | 5 | -1 ▼ |
| Readmissions at 28 days (%) | 15.2 | -0.8 | 4 | +4 ▲ |
| Mortality at 30 days (%) | 12.6 | -0.2 | 1 | 0 |




**Above:** Summary of performance and change between 2023/24 and 2024/25. **Top right:** Trend in admissions since 2013 (bars) and median length of stay (line). **Below:** Distribution of admission length of stay in 2024/25. **Bottom right:** Radar plot comparing outcome measures to other sites in Scotland. each 'spoke' is scaled for the lowest and highest performance in Scotland. Better performance is closer to the outside of the radar, resulting in bigger shaded area.



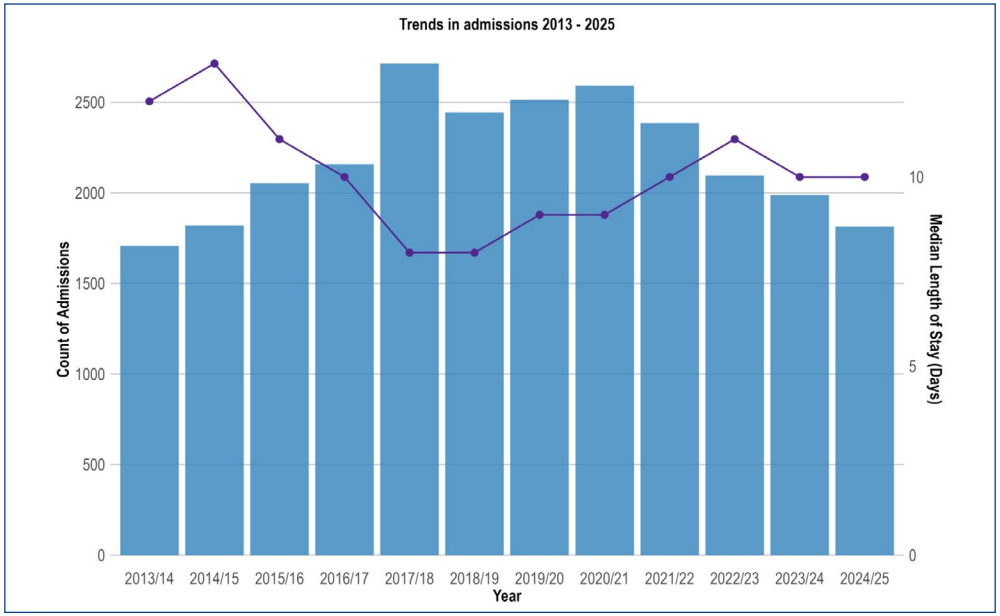



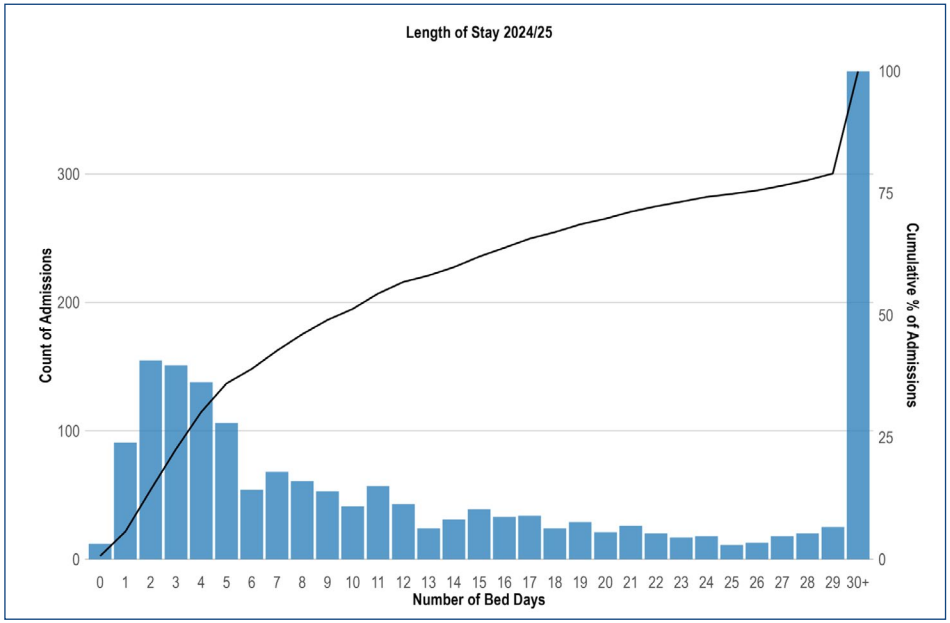
# Royal Infirmary of Edinburgh

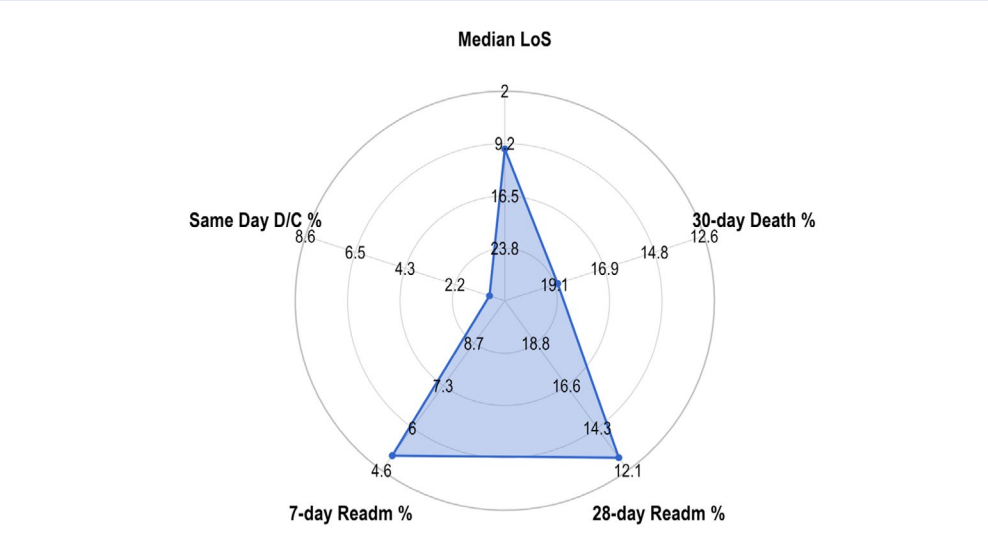
SCoOP Scottish Care of Older People Project

| Royal Infirmary of Edinburgh at Little France | | | | |
|---|---|---|---|---|
| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
| Admissions | 1,813 | -175 | 11 | +1 ▲ |
| Admissions over 85 years (%) | 58.0 | 0 | 1 | 0 |
| Admissions in SIMD Quintile 1 (%) | 9.0 | -2 | 14 | -1 ▼ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 10 | 0 | 10 | -2 ▼ |
| Same Day Discharges (%) | 0.7 | +0.2 | 14 | -1 ▼ |
| Readmissions at 7 days (%) | 5.1 | -1.3 | 2 | +6 ▲ |
| Readmissions at 28 days (%) | 12.7 | -3.3 | 2 | +5 ▲ |
| Mortality at 30 days (%) | 19.0 | -0.1 | 14 | +2 ▲ |

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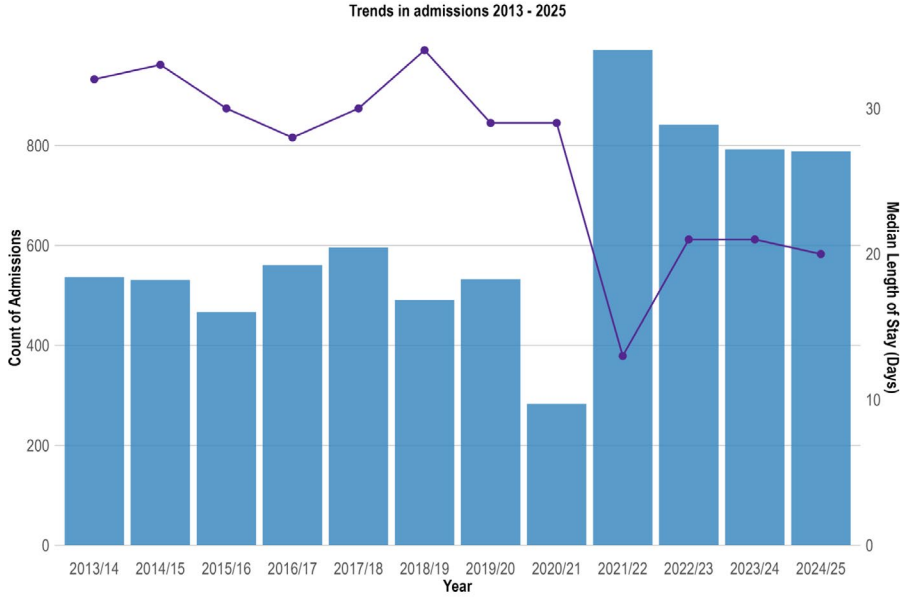



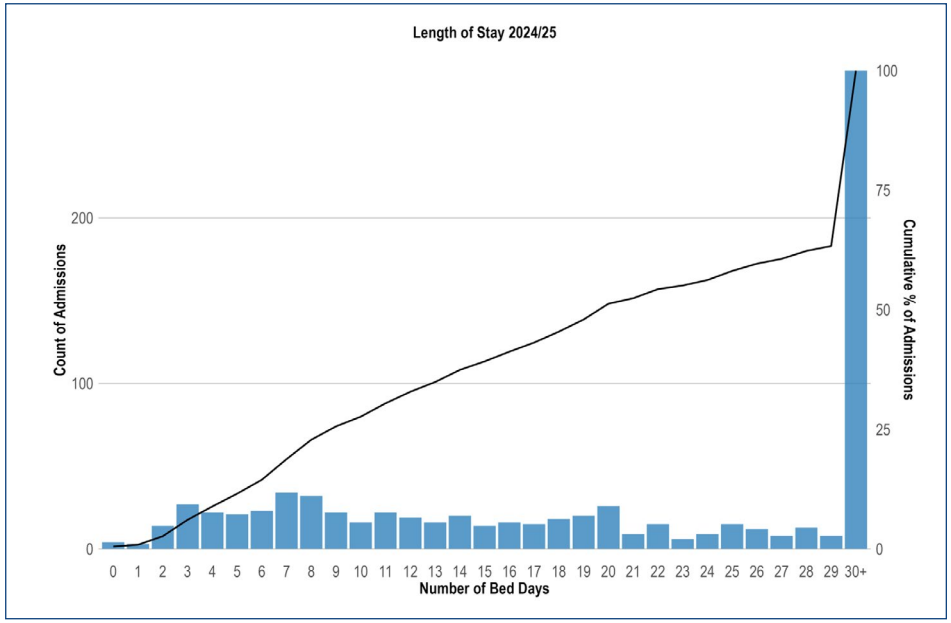
# St John's Hospital

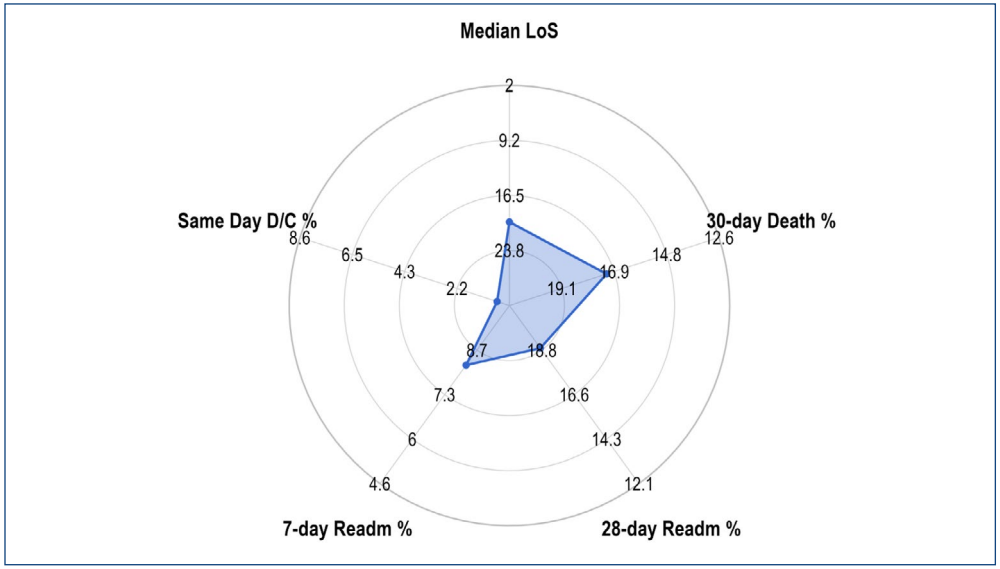
SCoOP Scottish Care of Older People Project

| St John's Hospital | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 788 | -5 | 16 | 0 |
| Admissions over 85 years (%) | 43.0 | +1 | 14 | +2 ▲ |
| Admissions in SIMD Quintile 1 (%) | 17.0 | 0 | 12 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 20 | -1 | 17 | 0 |
| Same Day Discharges (%) | 0.5 | +0.4 | 16 | +1 ▲ |
| Readmissions at 7 days (%) | 8.2 | -1.2 | 17 | +1 ▲ |
| Readmissions at 28 days (%) | 18.9 | -1.5 | 16 | +2 ▲ |
| Mortality at 30 days (%) | 17.3 | +2.8 | 11 | -8 ▼ |




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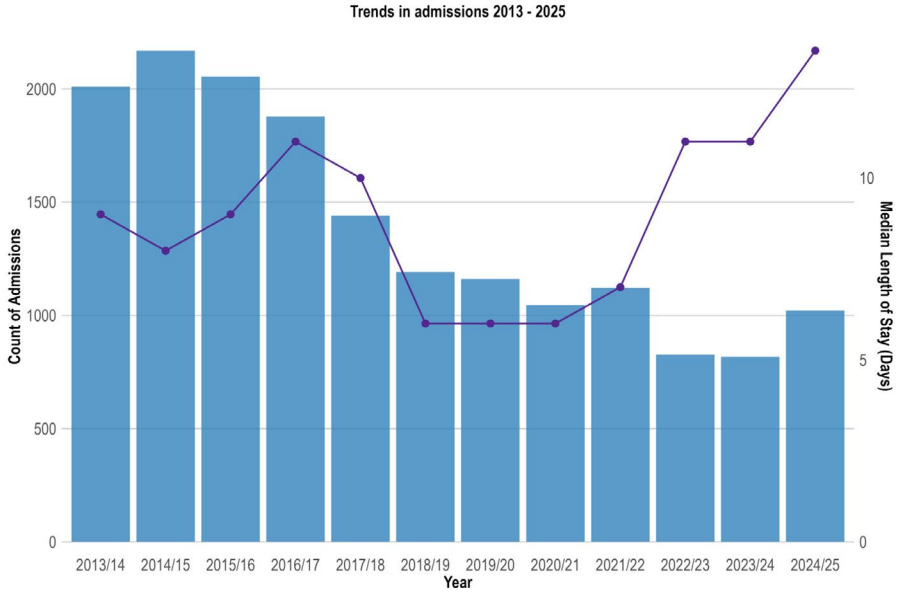


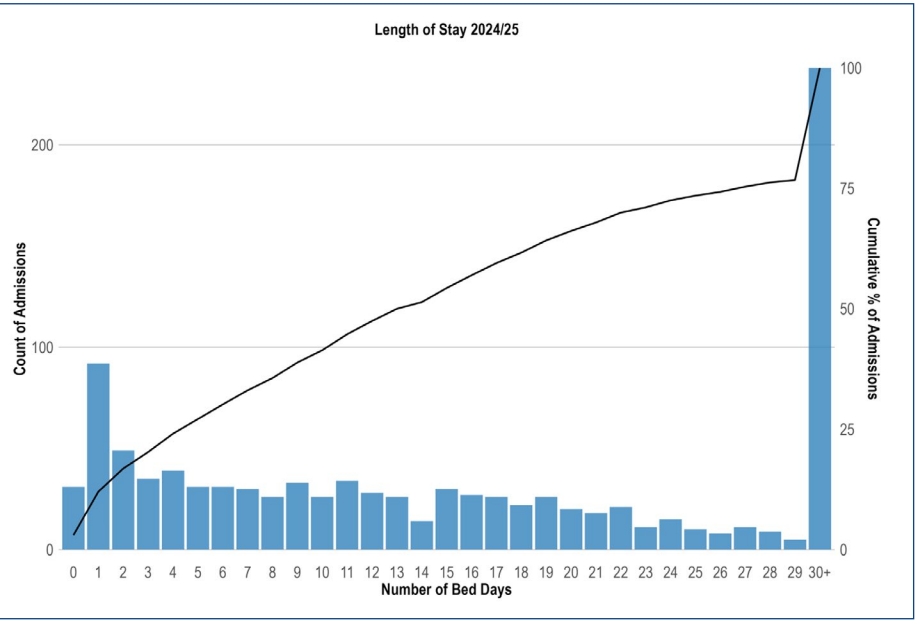



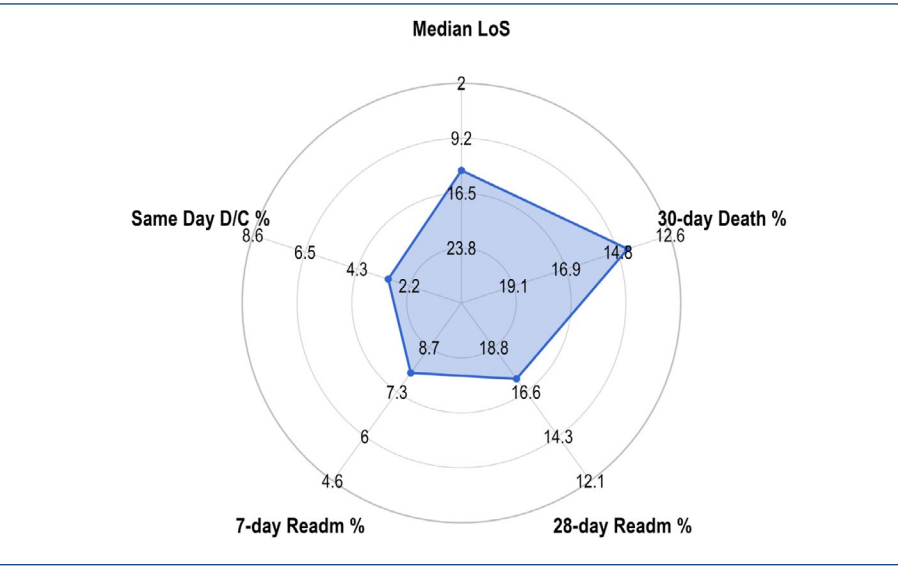
# University Hospital Crosshouse

SCoOP Scottish Care of Older People Project

| University Hospital Crosshouse | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 1,022 | +205 | 15 | 0 |
| Admissions over 85 years (%) | 34.0 | 0 | 19 | 0 |
| Admissions in SIMD Quintile 1 (%) | 34.0 | +3 | 3 | +3 ▲ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 13 | +2 | 13 | -3 ▼ |
| Same Day Discharges (%) | 3.0 | -0.6 | 4 | -1 ▼ |
| Readmissions at 7 days (%) | 7.9 | +2.3 | 16 | -10 ▼ |
| Readmissions at 28 days (%) | 17.2 | -0.2 | 13 | -3 ▼ |
| Mortality at 30 days (%) | 14.4 | +0.9 | 6 | -4 ▼ |



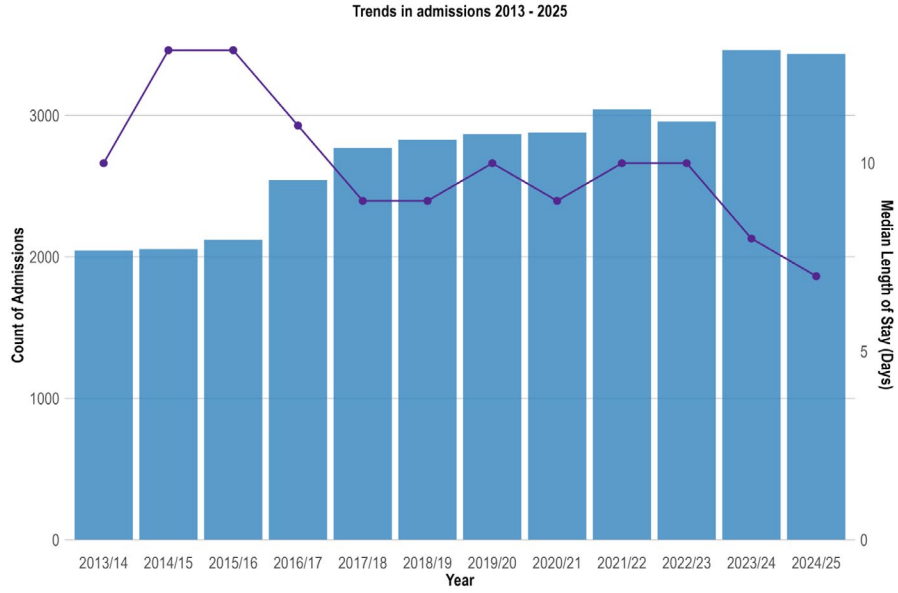




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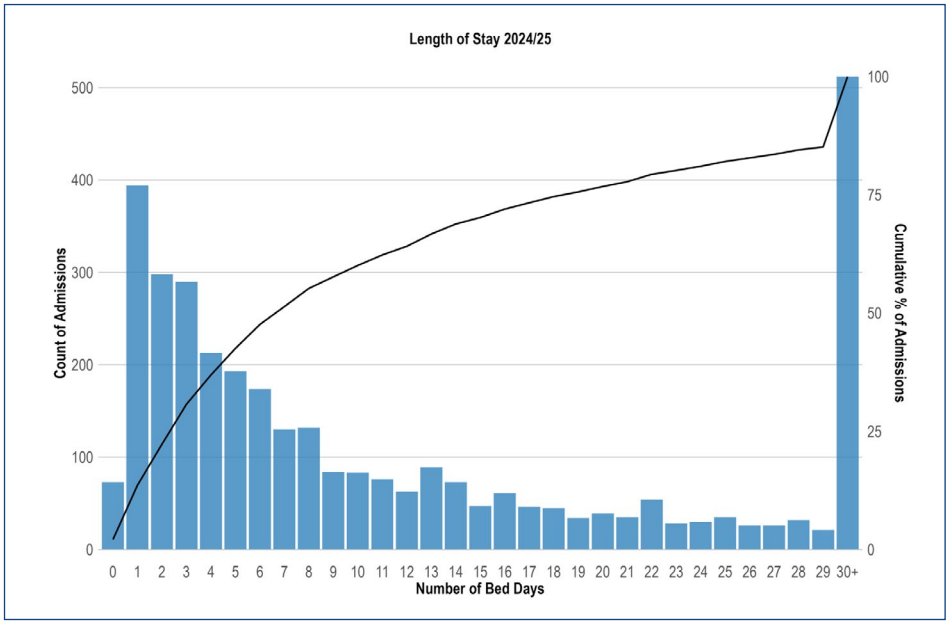
# University Hospital Hairmyres

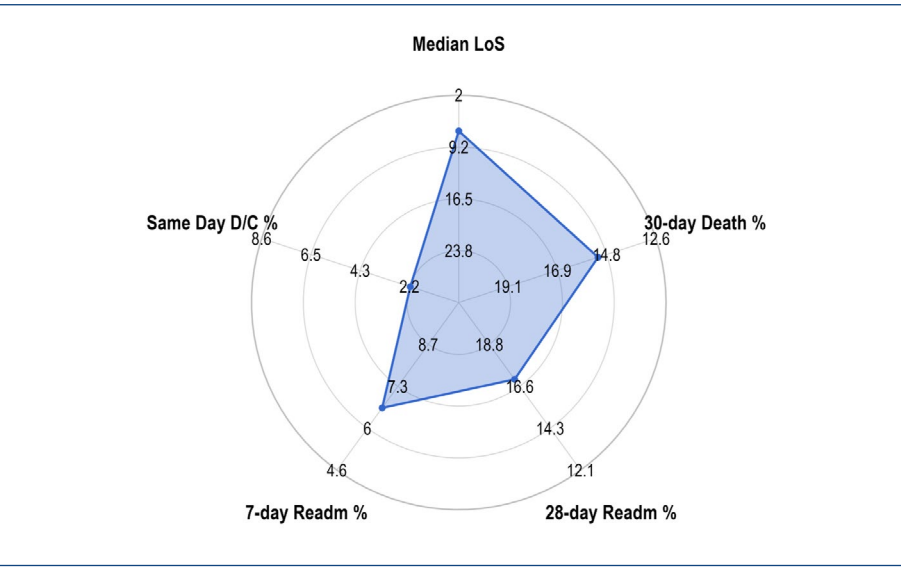
SCoOP Scottish Care of Older People Project

| University Hospital Hairmyres | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 3,436 | -25 | 4 | -1 ▼ |
| Admissions over 85 years (%) | 44.0 | 0 | 13 | -1 ▼ |
| Admissions in SIMD Quintile 1 (%) | 18.0 | -2 | 10 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 7 | -1 | 3 | +3 ▲ |
| Same Day Discharges (%) | 2.1 | +0.5 | 7 | 0 |
| Readmissions at 7 days (%) | 6.6 | -0.8 | 11 | +3 ▲ |
| Readmissions at 28 days (%) | 16.9 | -1.4 | 12 | +2 ▲ |
| Mortality at 30 days (%) | 15.2 | -1.7 | 7 | +3 ▲ |




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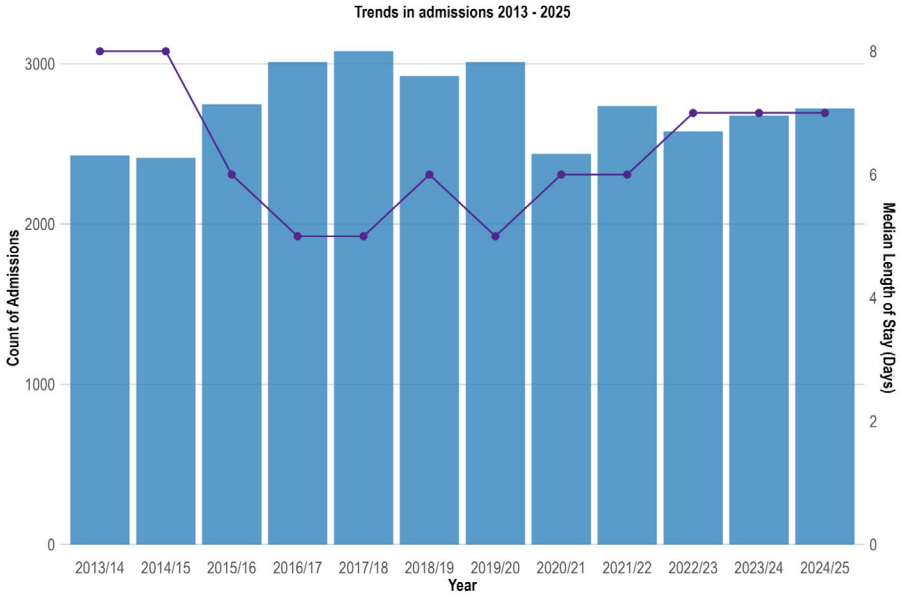


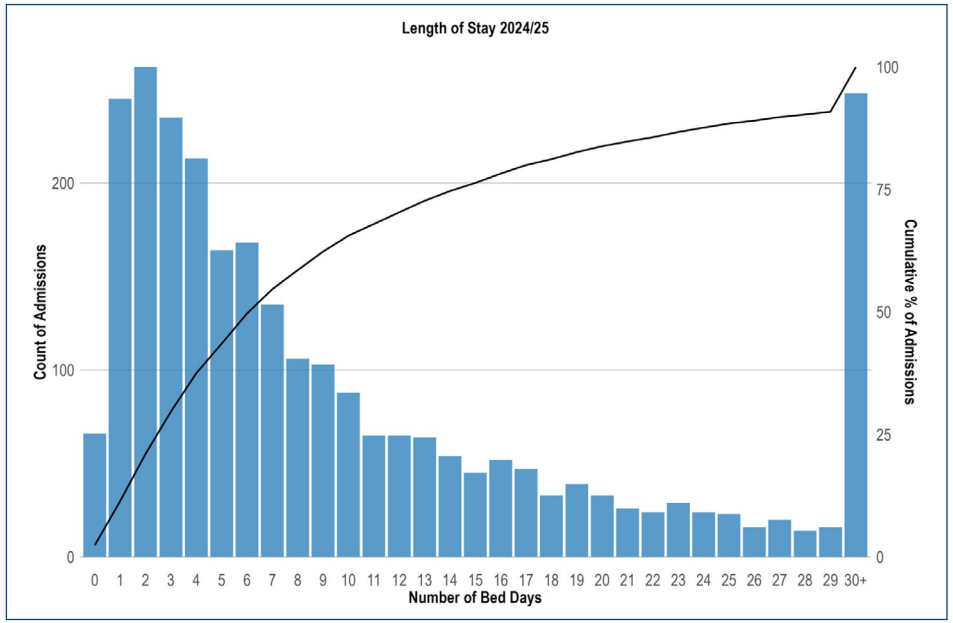
# University Hospital Monklands

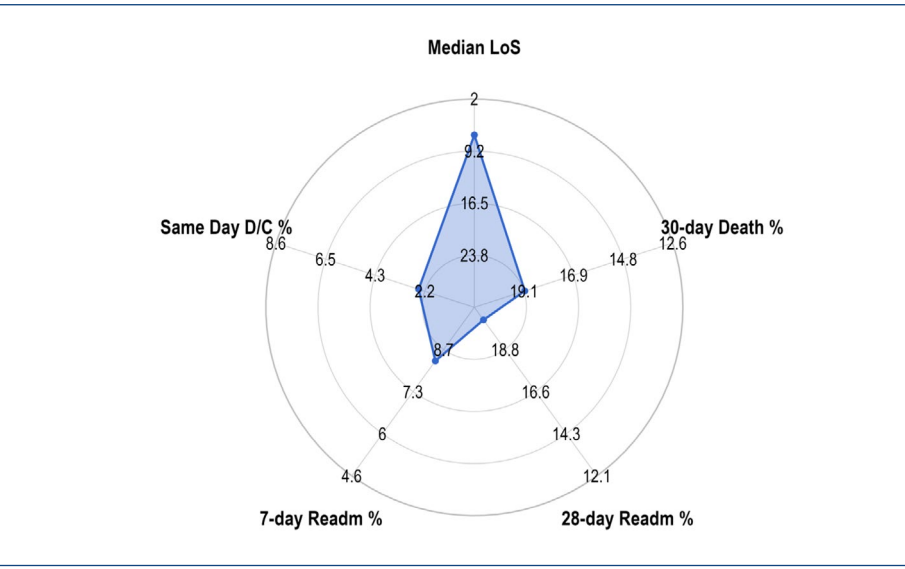
SCoOP Scottish Care of Older People Project

| University Hospital Monklands | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 2,722 | +45 | 5 | 0 |
| Admissions over 85 years (%) | 35.0 | 0 | 18 | 0 |
| Admissions in SIMD Quintile 1 (%) | 34.0 | -1 | 4 | -1 ▼ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 7 | 0 | 3 | 0 |
| Same Day Discharges (%) | 2.4 | +0.9 | 6 | +2 ▲ |
| Readmissions at 7 days (%) | 8.3 | +0.5 | 18 | -3 ▼ |
| Readmissions at 28 days (%) | 20.4 | +0.3 | 18 | -1 ▼ |
| Mortality at 30 days (%) | 19.1 | +0.4 | 15 | -1 ▼ |




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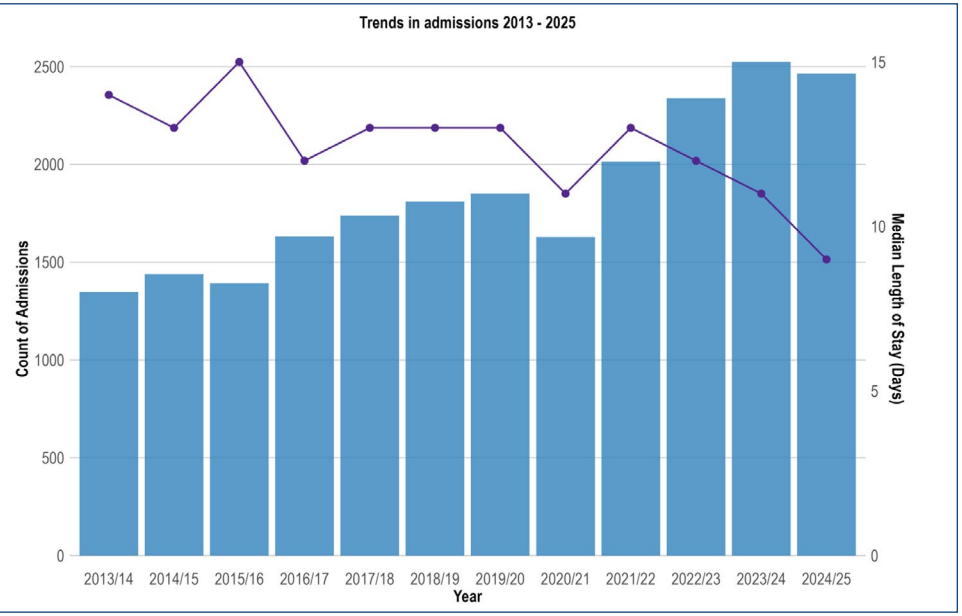



# University Hospital Wishaw

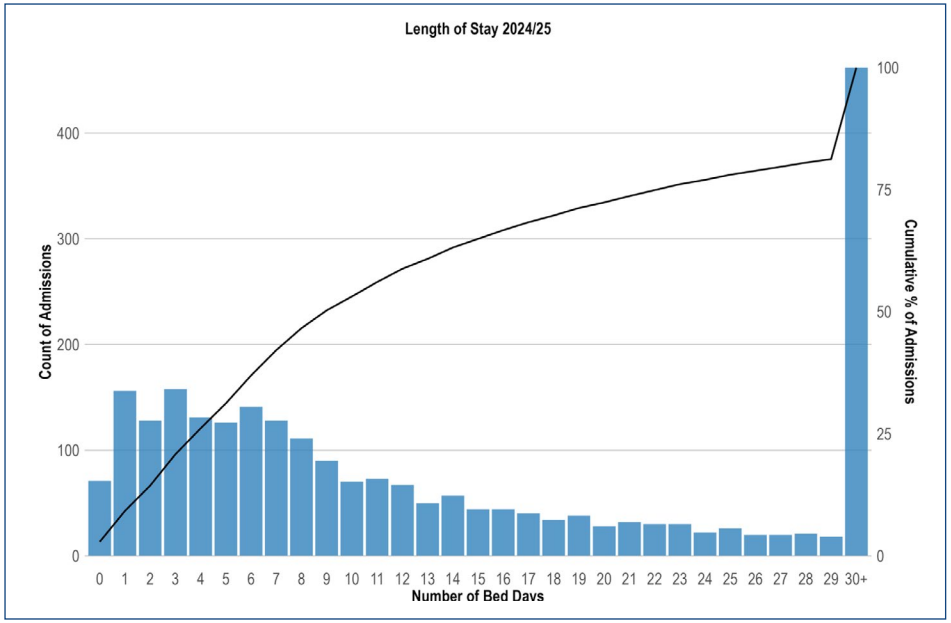
SCoOP Scottish Care of Older People Project

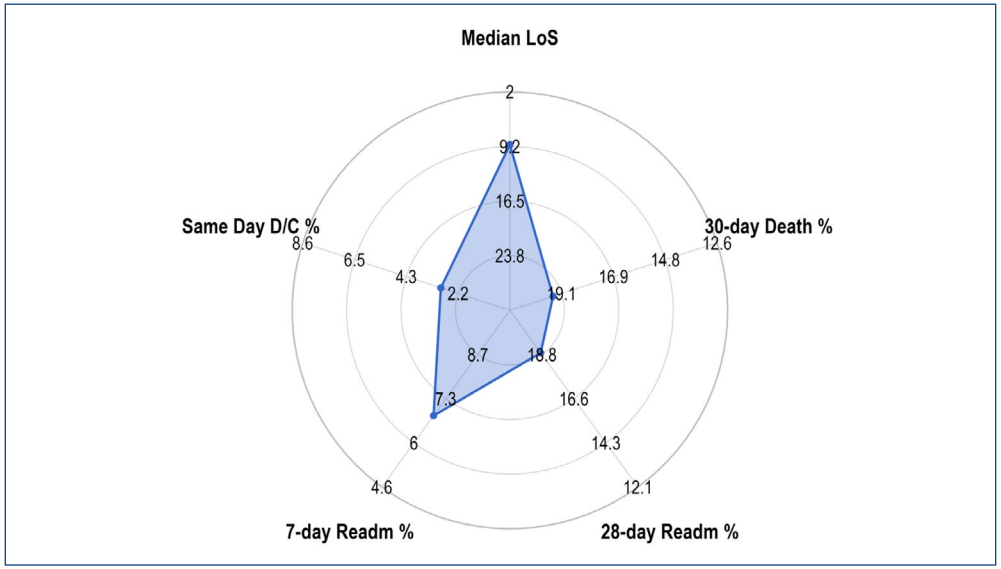
University Hospital Wishaw

| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 2,466 | -58 | 6 | 0 |
| Admissions over 85 years (%) | 40.0 | 0 | 17 | -2 ▼ |
| Admissions in SIMD Quintile 1 (%) | 32.0 | -1 | 6 | -2 ▼ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 9 | -2 | 7 | +3 ▲ |
| Same Day Discharges (%) | 2.9 | +0.9 | 5 | +1 ▲ |
| Readmissions at 7 days (%) | 6.8 | -0.5 | 12 | +1 ▲ |
| Readmissions at 28 days (%) | 18.9 | +0.9 | 15 | -4 ▼ |
| Mortality at 30 days (%) | 19.5 | +0.4 | 16 | -1 ▼ |



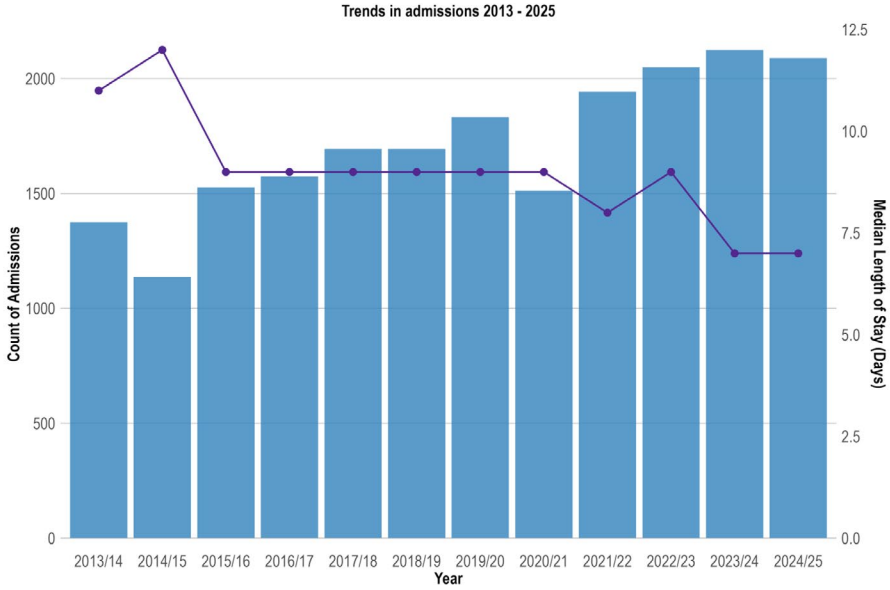

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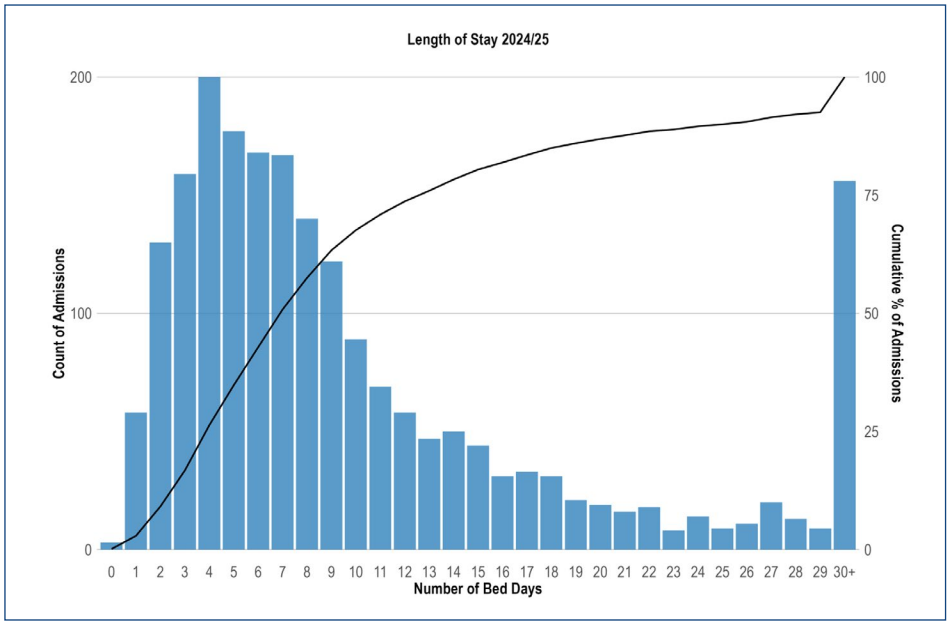


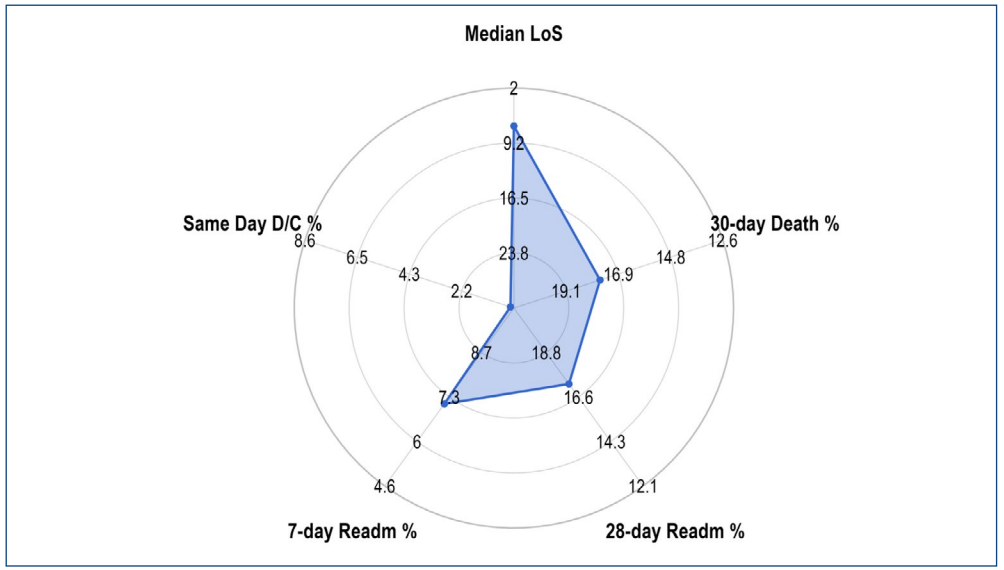



# Victoria Hospital

| Victoria Hospital | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
|---|---|---|---|---|
| Admissions | 2,090 | -35 | 8 | +1 ▲ |
| Admissions over 85 years (%) | 45.0 | 0 | 12 | -1 ▼ |
| Admissions in SIMD Quintile 1 (%) | 19.0 | -1 | 9 | 0 |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 7 | 0 | 3 | 0 |
| Same Day Discharges (%) | 0.1 | 0 | 18 | 0 |
| Readmissions at 7 days (%) | 7.1 | +0.1 | 14 | -3 ▼ |
| Readmissions at 28 days (%) | 17.2 | -0.8 | 14 | -1 ▼ |
| Mortality at 30 days (%) | 17.7 | +0.7 | 13 | -2 ▼ |



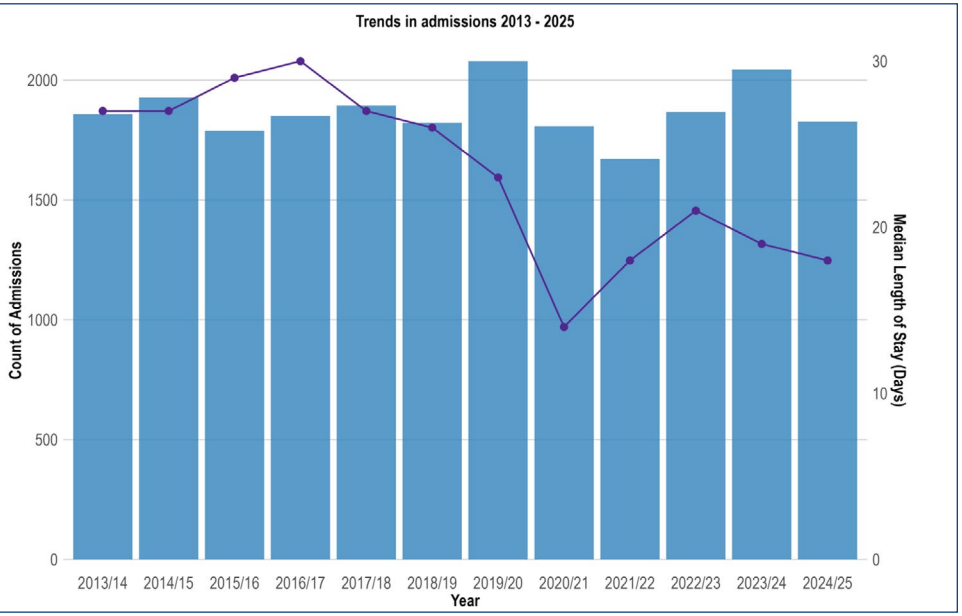




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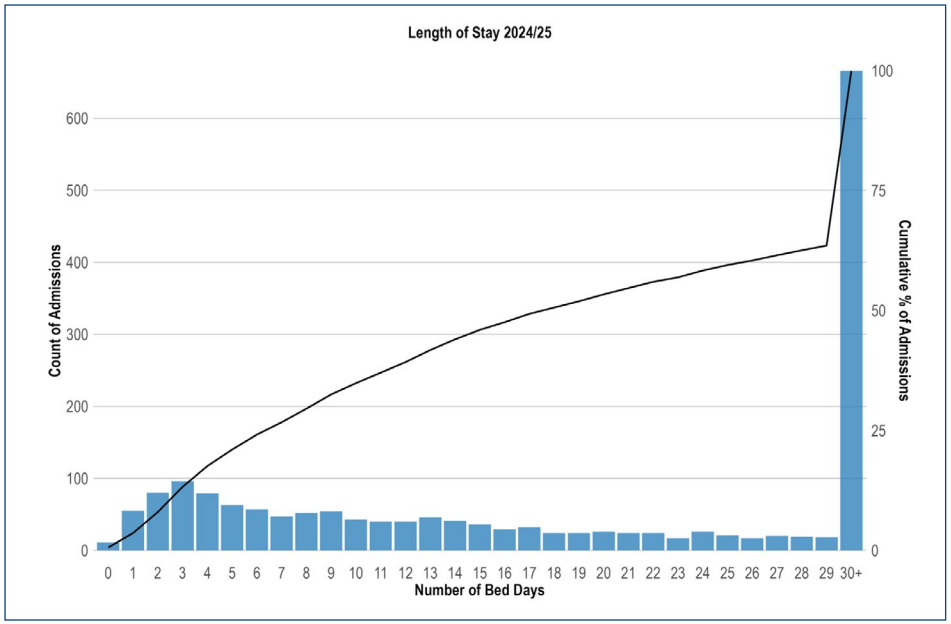
# Western General Hospital

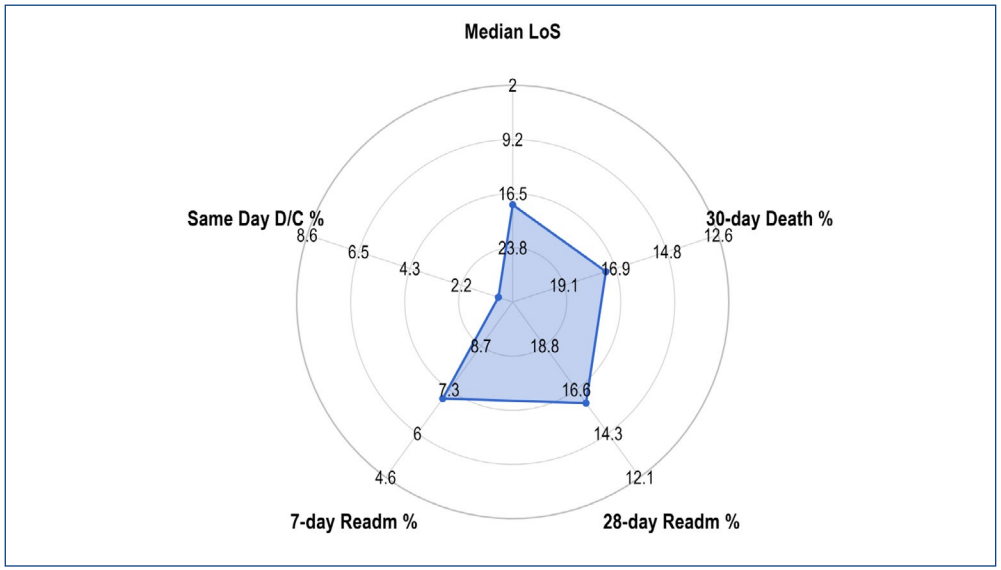
SCoOP Scottish Care of Older People Project

| Western General Hospital | | | | |
|---|---|---|---|---|
| | 2024/25 Data | Change on 2023/24 | Scotland Rank | Rank Change vs 2023/24 |
| Admissions | 1,827 | -216 | 10 | +1 ▲ |
| Admissions over 85 years (%) | 55.0 | 0 | 3 | +2 ▲ |
| Admissions in SIMD Quintile 1 (%) | 11.0 | +1 | 13 | +1 ▲ |
| ***Outcome Measures*** | | | | |
| Median Length of Stay (Days) | 18 | -1 | 16 | 0 |
| Same Day Discharges (%) | 0.6 | +0.4 | 15 | +1 ▲ |
| Readmissions at 7 days (%) | 7.1 | 0 | 13 | -1 ▼ |
| Readmissions at 28 days (%) | 15.9 | -0.6 | 7 | +2 ▲ |
| Mortality at 30 days (%) | 17.4 | +1 | 12 | -4 ▼ |




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British Geriatrics Society
Improving healthcare
for older people

# SCoOP

1495 UNIVERSITY OF ABERDEEN

# GERIATRIC MEDICINE Acute Hospital Outcomes 2024/25 Report

An overview of outcomes of acute geriatric medicine services in Scotland



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DESIGN: WLS1025