The West Dunbartonshire Health and Social Care Partnership Board's:

- Mission is to improve the health and wellbeing of West Dunbartonshire.
- Purpose is to plan for and ensure the delivery of high quality health and social care services to and with the communities of West Dunbartonshire.
- Core values are protection; improvement; efficiency; transparency; fairness; collaboration; respect; and compassion.

Introduction

Welcome to West Dunbartonshire Health and Social Care Partnership's third Public Performance Report for 2016/17.

Building on our Strategic Plan for 2016-2019 we are committed to providing clear and transparent updates on our progress in key priority areas; on an ongoing basis.

More information about Health and Social Care Partnership services is available on our website at www.wdhscp.org.uk.

We are always keen to receive feedback, so whether you want to provide constructive comments on the contents of this report or any of our services more generally, please contact us at www.wdhscp.org.uk/contact-us/headquarters/.

Mr Soumen Sengupta
Head of Strategy, Planning & Health Improvement
99 children and young people were referred to CAMHS in Qtr3 2016/17. The average time from referral to treatment continues to be well below the 18 week target at 6.5 weeks.

213 children had an MMR immunisation at 24 months (96.4%) and 283 children had an MMR immunisation at 5 years (97.3%) in Qtr3 2016/17 meeting the March 2017 target of 95%.
366 of the 404 looked after children were looked after in the community (90.6%) in Qtr3 2016/17 continuing to exceed our March 2017 target of 90%.

Of the 11 looked after children who happened to be BME (Black & Minority Ethnic), 9 were looked after in the community (82%) in Qtr3 2016/17.

1 of the 2 children (50%) who left care in Qtr3 2016/17 entered a positive destination.

This indicator relates to a very small number of children and therefore the percentage can fluctuate significantly.

18,702 children (99.8%) had an identified named person against a 2015 mid-year 0 to 18 year old population of 18,734 in Qtr3 2016/17.

It is expected that the March 2017 target of 100% will be achieved as this indicator will be calculated against a more accurate 2016 mid-year population figure from National Records of Scotland (NRS).
Supporting Older People

Delayed Discharges

The Scottish Government have changed the way delayed discharges are counted from 1st July 2016. The previous figure for delays of more than 14 days has been included in the chart for context/comparison.

There were 0 delays of more than 3 days for non-complex cases in Qtr3 2016/17 in line with the national target.

485 bed days were lost to delayed discharge for people aged 65 and over in Qtr3 2016/17. With a year to date total of 1,954, it is likely we will meet our March 2017 target of no more than 3,210 bed days lost.

74 bed days were lost to delayed discharge for Adults with Incapacity (AWI) aged 65 and over in Qtr3 2016/17 making a year to date total of 647.

Although performance in Qtr2 and Qtr3 has greatly improved we have already exceeded our March 2017 target of 466 bed days lost.
There were 1,052 emergency admissions of people aged 65 and over in Qtr3 2016/17. As our year to date rate is 199 (3,160 admissions), performance would require to improve considerably during Qtr4 to meet our March 2017 target of no more than 236 admissions per 1,000 population which equates to 3,750 admissions.

There were 11,419 unplanned acute bed days used by people aged 65 and over in Qtr3 2016/17. As our year to date rate is 2,112, we are likely to be very close to the March 2017 target of no more than 2,831 bed days per 1,000 population. 
4,333 people attended A&E in Qtr3 2016/17. With a Qtr3 rate of 1,562 we expect to be well below the March 2017 target rate of no more than 1,750 attendances per 100,000 population each month (by rolling year).

There were 2,648 non-elective inpatient admissions in Qtr3 2016/17 making a year to date total of 8,096. This is a new indicator from NHS GGC and a target has yet to be confirmed.
The proportion of people aged 65 and over dying in hospital rather than at home or in a homely setting continues to decrease, and in Qtr3 2016/17 is lower than at any point since April 2015 at 42.2%. We expect to meet the March 2017 target of 45.9%.

169 people received a reablement service in Qtr3 2016/17 making a year to date total of 479. We expect to provide more reablement interventions in the year than the March 2017 target of 545.
1,669 people had an Anticipatory Care Plan (ACP) in place in Qtr3 2016/17. We expect to sustain the level of ACPs above the March 2017 target of 1,400 throughout 2016/17.

116 out of 169 people (69%) achieved their agreed personal outcomes through a reablement service in Qtr3 2016/17: 62% of men and 72% of women. The March 2017 target is 65%.

Equalities monitoring from January 2016.
6,940.5 hours of homecare per week were provided to 1,171 people aged 65 and over in Qtr3 2016/17. This equates to a rate of 436.7 hrs per 1,000 population which is below our March 2017 target of 550.

306 people received 20 or more interventions per week (26.1%). This is below the 30% target which is due to be achieved by the end of March 2017.

Work is underway to improve recording compliance rates within the new homecare scheduling system.
244 people aged 65 and over with intensive needs received 10 or more hours of care at home in Qtr3 2016/17. Performance will require to improve considerably to meet the March 2017 target of 37%.

This indicator is published by the Local Government Benchmarking Framework and measures volume rather than appropriate targeting or alternative supports which may augment homecare such as telecare.

1,095 of 1,171 people aged 65 and over received personal care at home in Qtr3 2016/17 exceeding the March 2017 target of 90%.

782 people aged 65 and over with complex needs were living in a homely setting in Qtr3 2016/17. We are very slightly below the March 2017 target of 98% at 97.5%.

*A change in the 2015/16 guidance for the collection of Continuing Care data will affect comparability with previous figures. Scottish Government are currently examining options to resolve this and this may result in an update to the data presented here.
618 people (68.8%) aged 65 and over admitted to hospital twice or more received an assessment of their needs in Qtr 3 2016/17.

280 people (31.2%) did not have an assessment which is well within our March 2017 target of no more than 40% of people not being assessed.

99 people on the Palliative Care Register died in Qtr 3 2016/17, 27 of whom died in hospital: 15 people (23%) due to cancer and 12 people (34%) due to non-cancer conditions.

Year to date figures indicate that the 30% target for cancer deaths in hospital should be achieved at March 2017. Performance will require to improve in Qtr 4 in relation to non-cancer deaths in hospital to meet the 35% target.
All 13 people newly diagnosed with dementia were offered post-diagnostic support in Qtr3 2016/17 meeting the 100% target for March 2017.

1,572 people from West Dunbartonshire and 17,655 from across NHS GGC were referred to the MSK service in Qtr3 2016/17. The 90% seen within 4 weeks target is proving to be difficult to achieve across NHS GGC.
Compliance with the Formulary Preferred List continues to exceed the March 2017 target of 78% at 80.4% in Qtr 3 2016/17.

WDHSCP’s prescribing cost target is the average cost across NHS Greater Glasgow & Clyde as calculated at the end of March 2017.

451 people were referred to the Homecare Pharmacy Team in Qtr3 2016/17. 83 people declined the support and 47 people were being supported by other service teams.

808 people have received support during the year to date already exceeding the March 2017 target of 600.
492 people received respite in Qtr3 2016/17. The year to date total of 3593.1 weeks means that performance would have to improve substantially to meet the March 2017 target of 6,730 weeks. Day Care recorded as being provided for the benefit of the client which may also provide a break for a carer is no longer being counted as respite from April 2016.

All 47 carers asked felt supported to continue in their caring role during Qtr3 2016/17. * We are continuing to exceed our March 2017 target of 90%.

* Sample data from Carer Support Plans completed during Qtr3 2016/17.
Supporting Safe, Strong and Involved Communities

192 of 208 people (92.3%) received treatment within 3 weeks of referral in Qtr3 2016/17. We continue to exceed the March 2017 target of 90%.

208 of the 213 (98%) Social Work Reports were submitted on time in Qtr3 2016/17.

75 of the 103 (73%) new Community Payback Orders attended induction within the timescale and 99 of the 158 (63%) unpaid work requirements commenced within 7 days in Qtr3 2016/17.

Performance would have to substantially improve to meet the March 2017 targets for Community Payback Orders (80%) and unpaid work requirements (90%).
All Adult Support and Protection clients had a current risk assessment and care plan in Qtr3 2016/17 continuing our 100% performance against the March 2017 target.

There were 75 children on the Child Protection Register at the end of Qtr3 2016/17. 45 out of 54 (83.3%) case conferences were carried out within 21 days during Qtr 3 2016/17 missing our March 2017 target of 95%.
Our Staff

There were 745 NHS employees (627.28 Whole Time Equivalent) and 1,434 WDC employees (1,156.53 Full Time Equivalent) working within the HSCP during Qtr3 2016/17.

Overall HSCP absence was 7.15% in Qtr3 2016/17: 8.11% WDC employees and 5.39% NHS employees.
Our Staff

The NHS target for March 2017 of 80% has already been exceeded in Qtr3 2016/17 at 90.56%.

The WDC target for March 2017 of 100% looks achievable at 99% in Qtr3 2016/17.
**Public Performance Report**

**West Dunbartonshire Health and Social Care Partnership**

**October—December 2016**

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**Our Finance**

**Health and Social Care Net Expenditure £000's**

<table>
<thead>
<tr>
<th>Period</th>
<th>Q2 2015/16</th>
<th>Q3 2015/16</th>
<th>Q4 2015/16</th>
<th>Q1 2016/17</th>
<th>Q2 2016/17</th>
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<tr>
<td>Social Care expenditure</td>
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<td>20,000</td>
<td>20,000</td>
<td>15,000</td>
<td>10,000</td>
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**HSCP Expenditure to the end of December 2016 of £100.246m against a budget of £103.019m (not including Set-Aside).**

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**Budget v Net Expenditure Variance**

- Less than planned expenditure
- More than planned expenditure

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Complaints

8 complaints were dealt with through the Social Work Complaints policy and 9 through the NHS policy in Qtr3 2016/17.

8 complaints were responded to outwith the timescales. These were between 5 and 43 days late. The longest delay related to a complex complaint which required further review.

Upheld complaints in Qtr3 2016/17 concerned Employee Attitudes (1), Statutory Responsibilities (1), Communication (1) and Quality of Service (1). Any learning from these complaints is being considered within the relevant service areas.
Service Improvement Linked to Performance: HSCP recognition at national and local awards

The HSCP Care at Home Service was recognised as sector leading in being awarded the Scottish Association of Social Work (SASW) Award for ‘Best example of collaboration in an integrated setting’ as well as being finalists in the Team of the Year award at the national awards ceremony in March 2017.

The award recognises both the worth of the team itself and its impact as part of the wider integrated health and social care provision for adults and older people in West Dunbartonshire. The dedicated and skilled staff are successful through a combination of their hard work, knowledge and commitment to working in partnership, in supporting people to live as independently as possible and safely within a homely setting as long as possible.

Recognising the impact of our services for both young and old in our community, at the same awards ceremony, the HSCP’s Looked after Children’s Service were also finalists for the Team of the Year award.

Looked after Children’s Services include our Residential Children’s Houses, Permanence, Foster Care, Throughtcare and Aftercare provision and Alternative to Care service. They were shortlisted in recognition that as individual services and as a whole team, they strive to be sector leading; to maintain a culture with the needs and voices of each individual child at the centre; and with staff motivated to go the extra mile.

West Dunbartonshire Council Employee Recognition Awards

The HSCP has also seen continued success at West Dunbartonshire Council’s annual Employee Recognition Awards.

Day Care Officer Karen McNab was awarded the Council’s Community’s Award, recognising her outstanding commitment to the health and wellbeing of the older people in her care.

The HSCP’s Day Care services can help adults and older people stay active, socialise and provides their carers with a break. Karen leads Langcraigs Day Care’s fundraising ventures with money raised used to stage live entertainment, support outings and purchase activities which are recreational, educational and therapeutic for people using Day Care services.

This success was added to at the awards with commendations for Wendy Jack (Team Leader of the Year award category) and the Community Paediatric Speech and Language Team (Team of the Year award category).

For more information on our services and their performance please visit http://www.wdhscp.org.uk/about-us/public-reporting/