#### West Dunbartonshire Health and Social Care Partnership



#### Introduction

Welcome to West Dunbartonshire Health and Social Care Partnership's first Public Performance Report for 2017/18.

Building on our <u>Strategic Plan for 2016-2019</u> 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 <u>www.wdhscp.org.uk</u>.

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/.

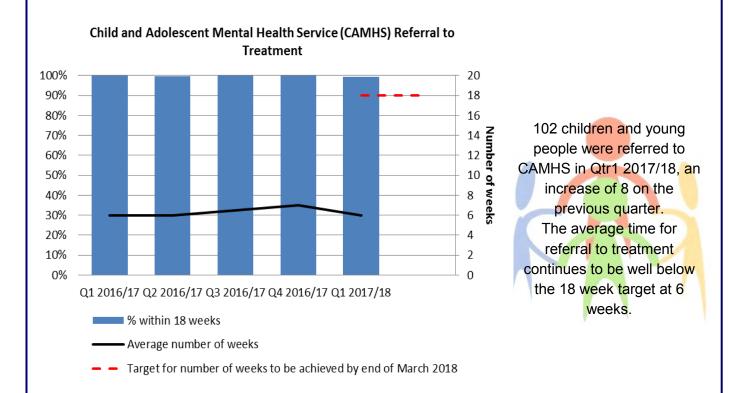
Mr Soumen Sengupta Head of Strategy, Planning & Health Improvement

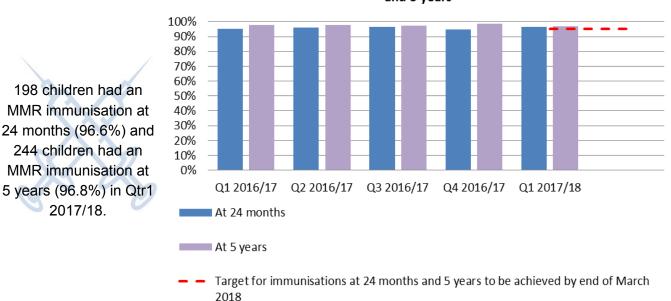
The West Dunbartonshire Health and Social Care Partnership Board's:

- 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.

## West Dunbartonshire Health and Social Care Partnership

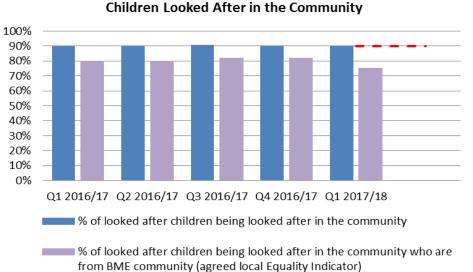
#### **Supporting Children and Families**





#### % Measles, Mumps & Rubella (MMR) immunisations at 24 months and 5 years

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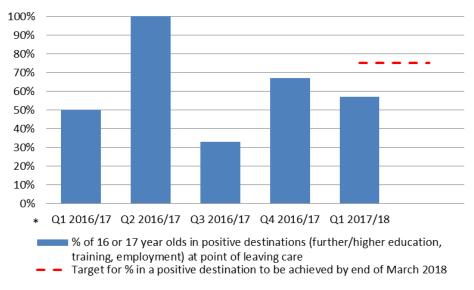


389 of the 430 looked after children were looked after in the community (90.5%) in Qtr1 2017/18.

Of the 8 looked after children who happened to be BME (Black & Minority Ethnic), 6 were looked after in the community (75%) in Qtr1 2017/18.

from BME community (agreed local Equality Indicator)Target for % of children being looked after in the community to be

achieved by end of March 2018



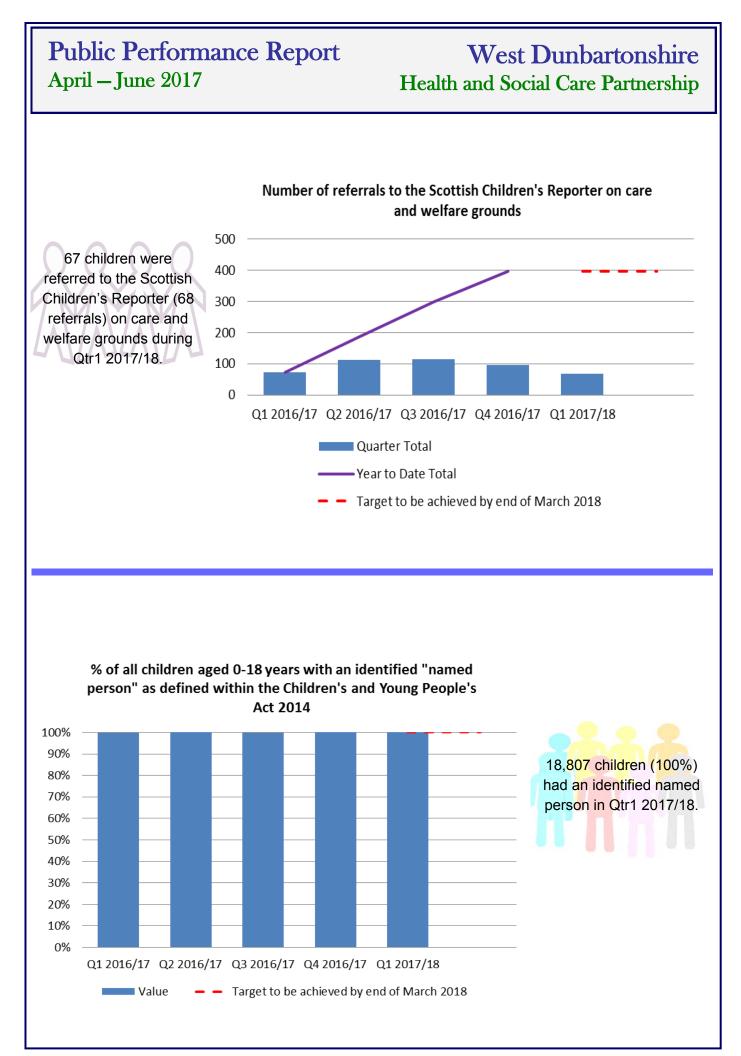
#### Looked after children entering positive destinations

who left care in Qtr1 2017/18 entered a positive destination.

4 of the 7 children (57%)

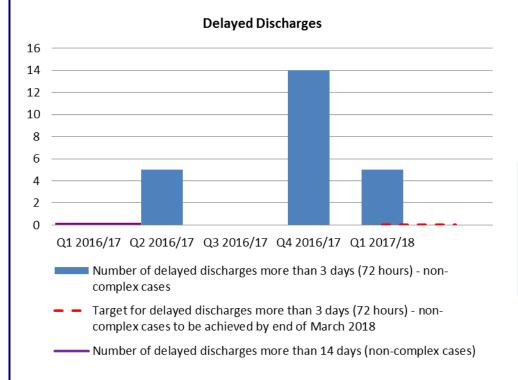
This indicator relates to a very small number of children and therefore the percentage can fluctuate significantly.

\* 2016/17 quarterly figures revised at year end



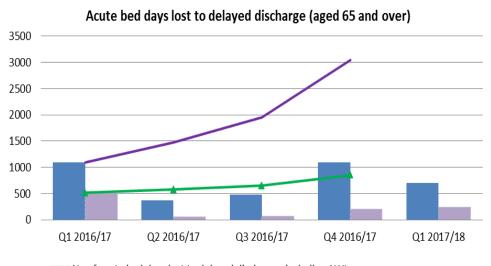
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#### **Supporting Older People**



The Scottish Government 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 5 delays of

non-complex cases at the census point in Qtr1 2017/18.



No of acute bed days lost to delayed discharges including AWI

No of acute bed days lost to delayed discharges for Adults with Incapacity

---- No of acute bed days lost to delayed discharges including AWI (Cumulative)

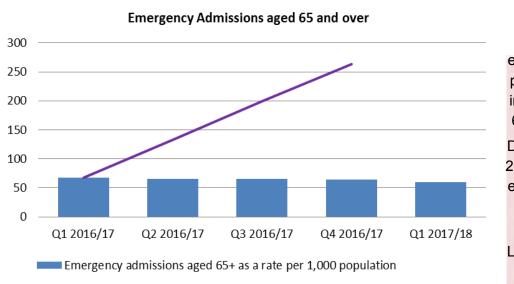
---- No of acute bed days lost to delayed discharges for Adults with Incapacity (Cumulative)

697 bed days were lost to delayed discharge for people aged 65 and over in Qtr1 2017/18. 239 of these bed days were lost to delayed discharge for Adults with Incapacity (AWI).

During the same period in 2016/17, there were 1,095 bed days lost, 516 of which were for AWI.

As part of the Scottish Government's Unscheduled Care Planning, targets for reductions in unscheduled or unplanned care are being developed by NHS Greater Glasgow and Clyde. Local targets will be set in line with these.

#### West Dunbartonshire Health and Social Care Partnership

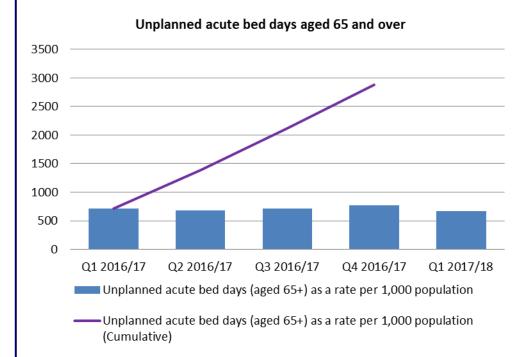


Emergency admissions aged 65+ as a rate per 1,000 population (Cumulative)

There were 953 emergency admissions of people aged 65 and over in Qtr1 2017/18: a rate of 60 per 1,000 population.

During the same period in 2016/17, there were 1,076 emergency admissions: a rate of 68 per 1,000 population.

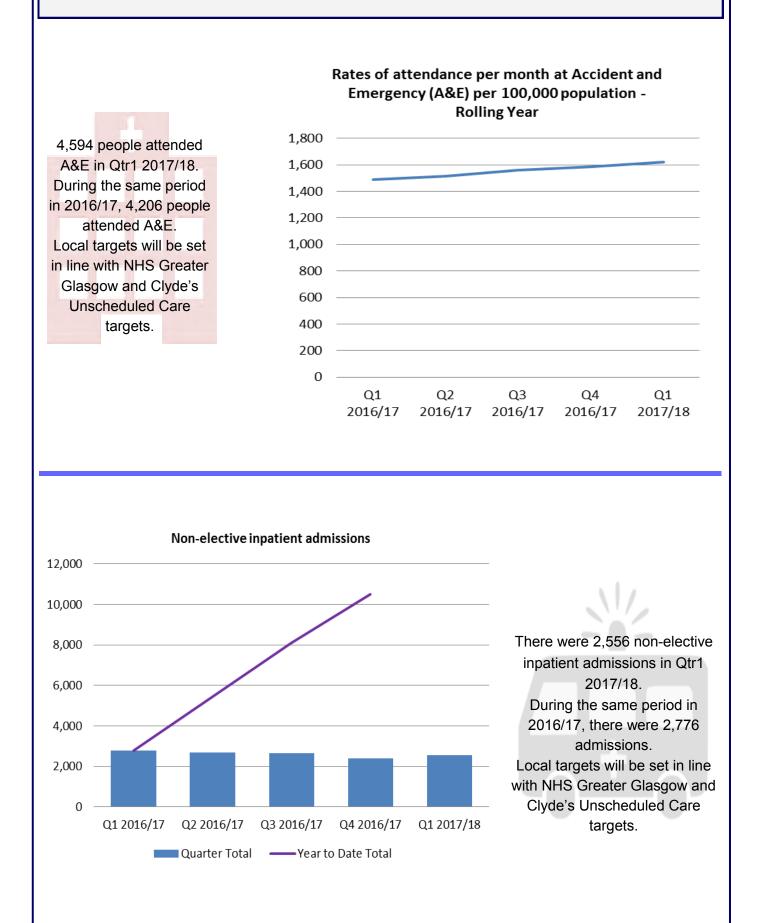
Local targets will be set in line with NHS Greater Glasgow and Clyde's Unscheduled Care targets.



There were 10,643 unplanned acute bed days used by people aged 65 and over in Qtr1 2017/18: a rate of 670 per 1,000 population.

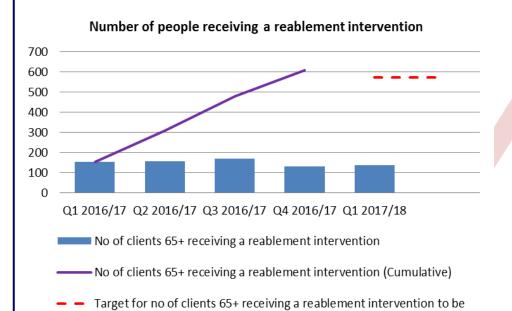
During the same period in 2016/17, there were 11,415 unplanned acute bed days used: a rate of 718 per 1,000 population.

Local targets will be set in line with NHS Greater Glasgow and Clyde's Unscheduled Care targets.

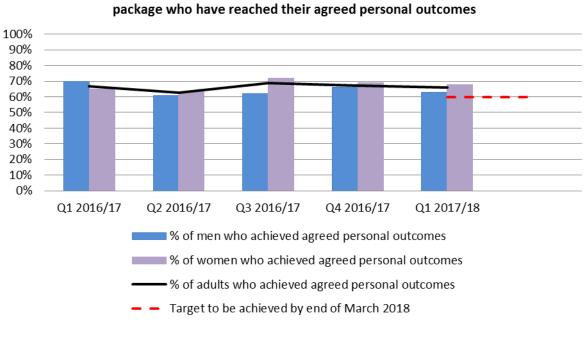


achieved by end of March 2018

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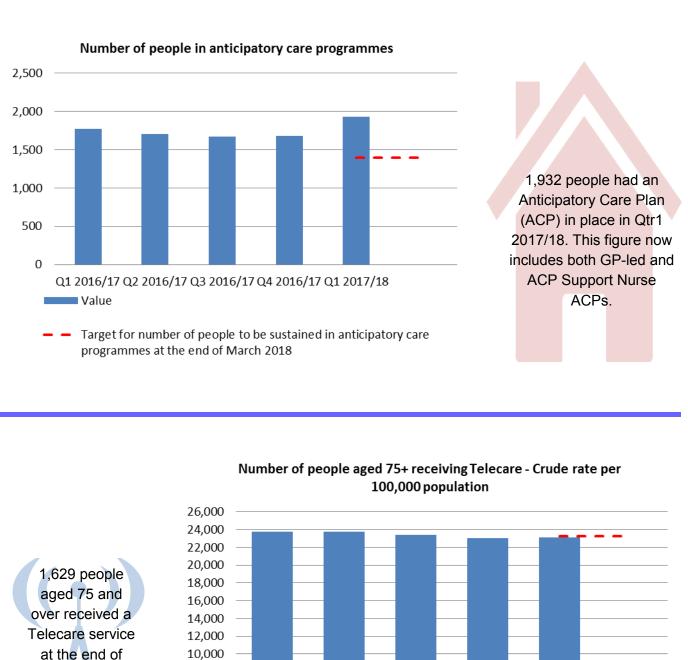


91 of the 138 people (66%) who received a reablement service achieved their agreed personal outcomes in Qtr1 2017/18: 63% of men and 68% of women.



# Percentage of adults with assessed care at home needs and a reablement

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at the end of Qtr1 2017/18.

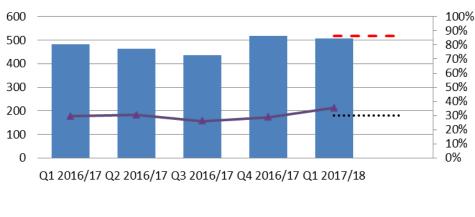
8,000

6,000 4,000 2,000 0

> Value Target to be achieved by end of March 2018

Q1 2016/17 Q2 2016/17 Q3 2016/17 Q3 2016/17 Q1 2017/18

### West Dunbartonshire Health and Social Care Partnership



Homecare hours and interventions

8,197 hours of homecare per week were provided to 1,328 people aged 65 and over in Qtr1 2017/18. This equates to a rate of 506 hours per 1,000 population.

470 people received 20 or more interventions per week (35.4%) in Qtr1 2017/18.

Total number of homecare hours provided as a rate per 1,000 population aged 65+

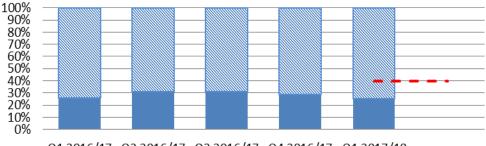
- Target for homecare hours to be achieved by end of March 2018

- % people aged 65 and over who receive 20 or more interventions per week
- •••••• Target for 20 or more interventions per week to be achieved by end of March 2018

#### 654 people (74.5%) aged 65 and over admitted to hospital twice or more received an assessment of their needs in Qtr1 2017/18.

224 people (25.5%) did not have an assessment.

#### Percentage of people aged 65+ admitted twice or more as an emergency who have not had an assessment



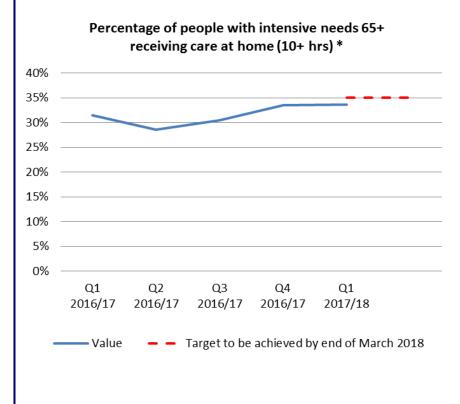
Q1 2016/17 Q2 2016/17 Q3 2016/17 Q4 2016/17 Q1 2017/18

% people aged 65+ admitted twice or more as an emergency who have had an assessment

% people aged 65+ admitted twice or more as an emergency who have NOT had an assessment

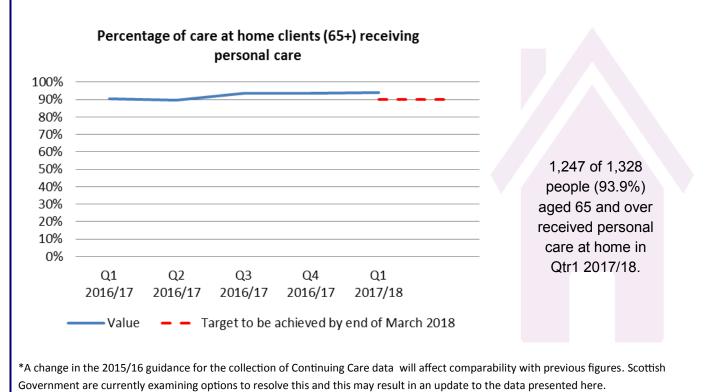
 Target for % people aged 65+ admitted twice or more as an emergency who have not had an assessment to be achieved by end of March 2018

#### West Dunbartonshire Health and Social Care Partnership



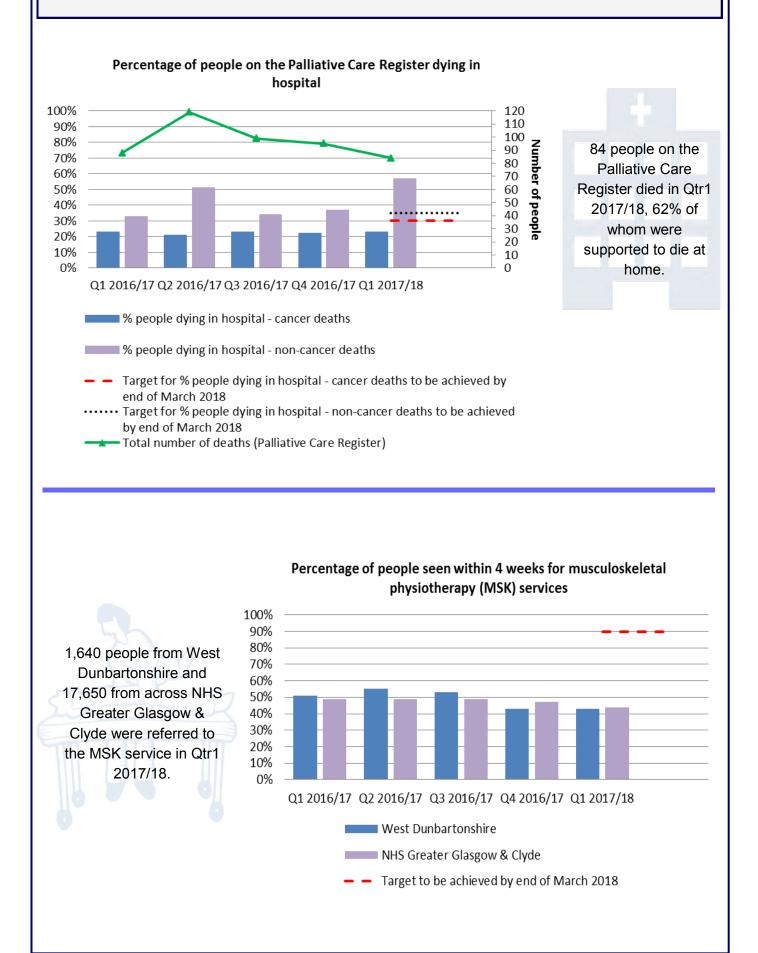
286 people aged 65 and over with intensive needs received 10 or more hours of care at home in Qtr1 2017/18.

This indicator is published by the Local Government Benchmarking Framework and measures volume of home care in isolation from other services. People with the most intensive needs receive complex packages of care utilising a range of community supports including home care, meal deliveries, day care, community health input and Telecare. These supports combine to reduce the reliance on traditional high volumes of home care and provide a more targeted response to the person's needs.

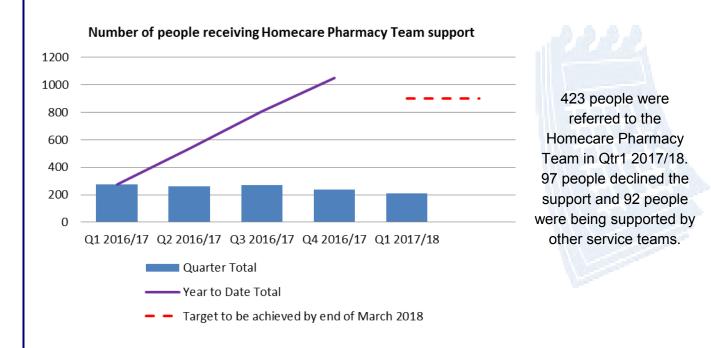


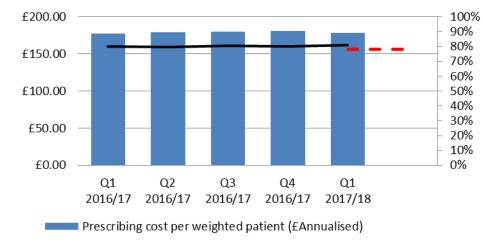
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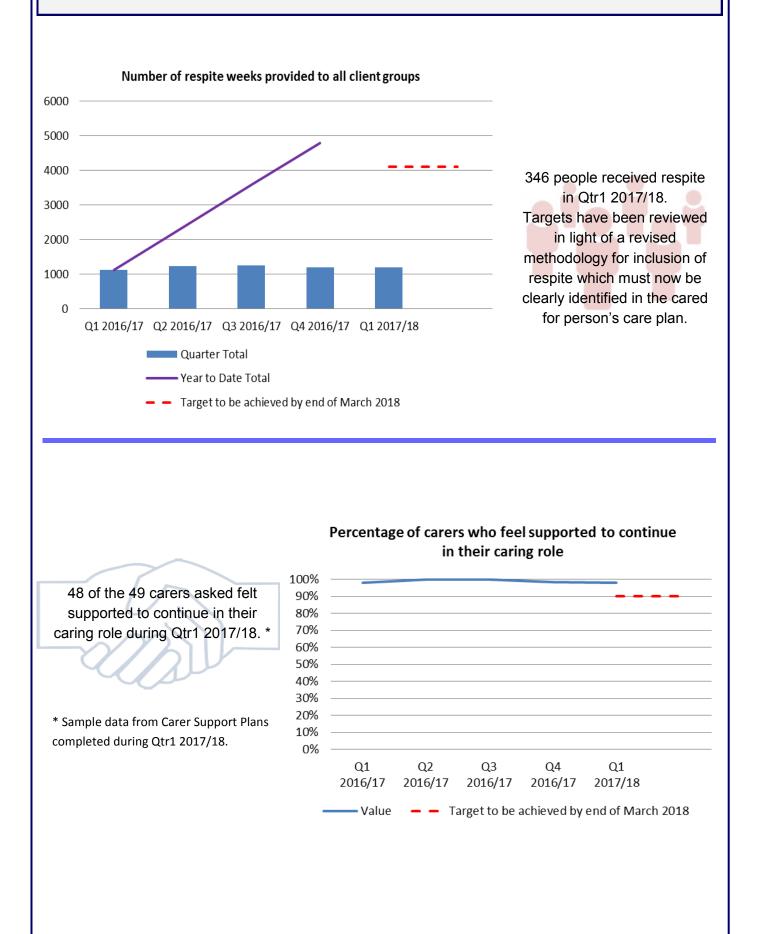




Prescribing cost and compliance with Formulary Preferred List

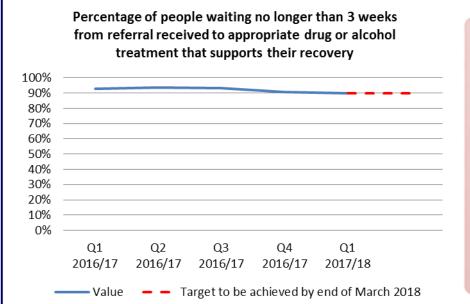
 Target for compliance with Formulary Preferred List to be achieved by end of March 2018

Compliance with the Formulary Preferred List was 81.1% in Qtr1 2017/18. WDHSCP's prescribing cost target is the average cost across NHS Greater Glasgow & Clyde as calculated at the end of March 2018.



### West Dunbartonshire Health and Social Care Partnership

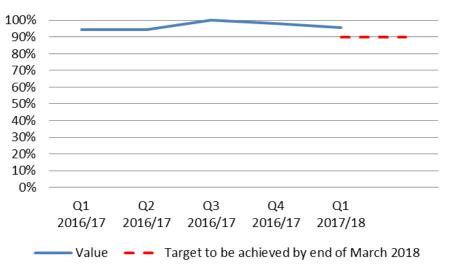
#### Supporting Safe, Strong and Involved Communities



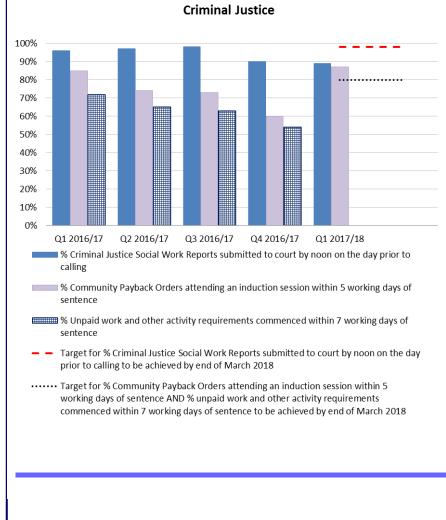
194 of 216 people (89.8%) received treatment within 3 weeks of referral in Qtr1 2017/18. This figure is likely to increase in subsequent publications as additional waiting times data is gathered by National Services Scotland.

66 of 69 people (95.7%) started Psychological Therapies treatment within 18 weeks of referral in Qtr1 2017/18.

#### Percentage of people who started Psychological Therapies within 18 weeks of referral



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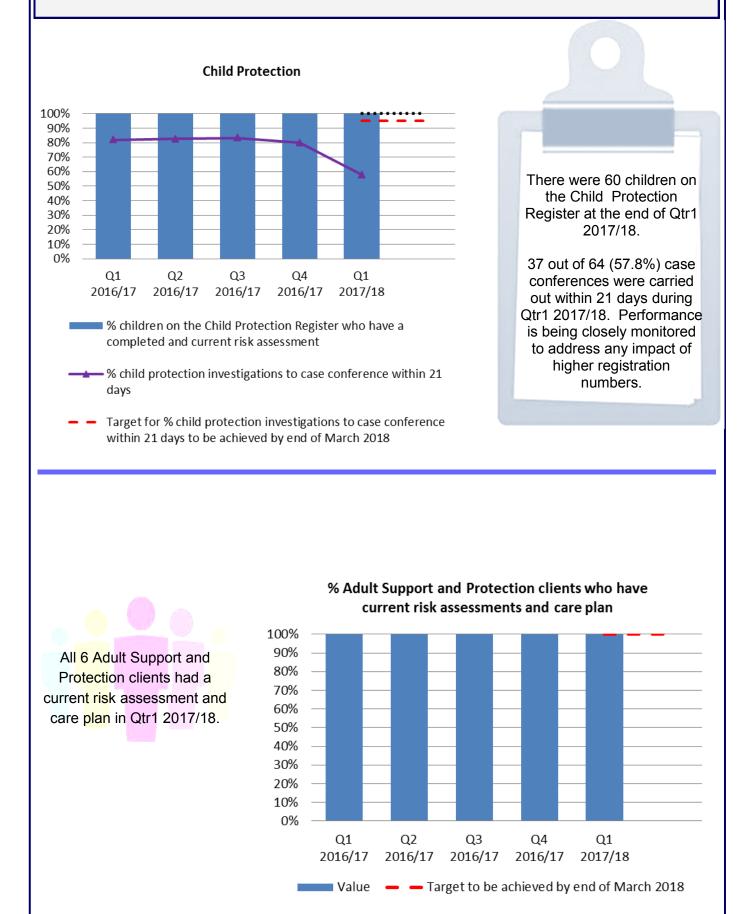


162 of the 183 (89%) Social
Work Reports were submitted on time in Qtr1 2017/18.
98 of the 113 (87%) new
Community Payback Orders attended induction within the timescale in Qtr1 2017/18.
0% of unpaid work orders were commenced within 7 days in Qtr 1 2017/18. Work is underway to understand and address this poor performance.
A high volume of new unpaid

work orders and 2 vacant posts may have been contributing factors.

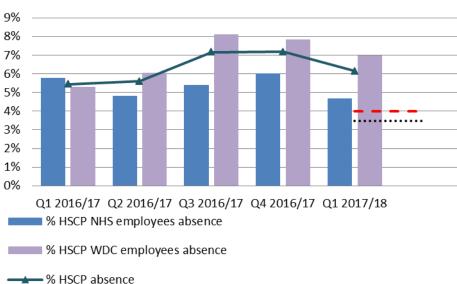


# Number of referrals to the Scottish Children's Reporter on offence grounds



# West Dunbartonshire Health and Social Care Partnership

#### **Our Staff**



**HSCP** staff absence

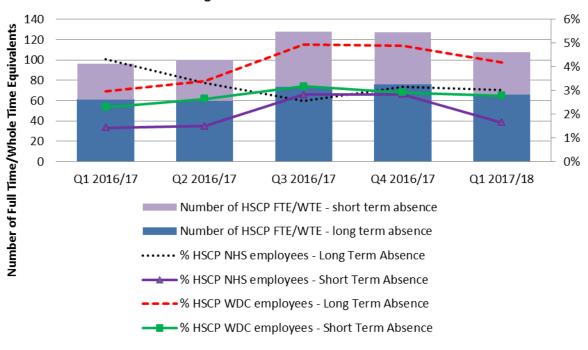
There were 739 NHS employees (617.67 Whole Time Equivalent) and 1,432 WDC employees (1,134 Full Time Equivalent) working within the HSCP during Qtr1 2017/18.

**Overall HSCP** absence was 6.14% in Qtr1 2017/18: 6.95% WDC employees and 4.65% NHS employees.

% HSCP absence

Target for % HSCP NHS employees absence to be achieved by end of March 2018

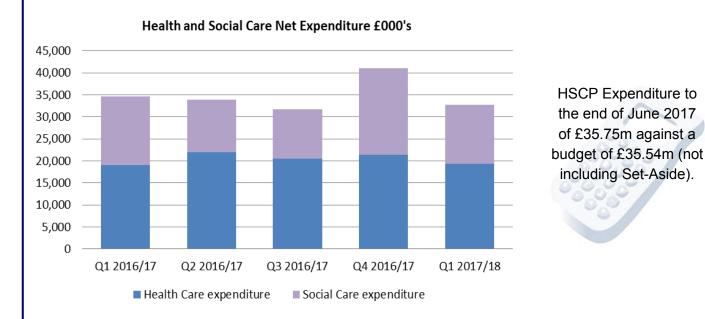
Target for % HSCP WDC employees absence to be achieved by end of March 2018

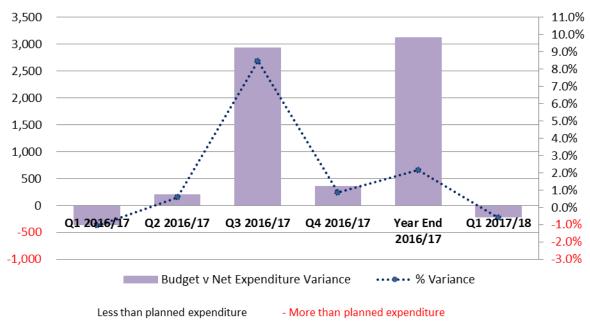


#### Long term and short term absence

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#### **Our Finance**

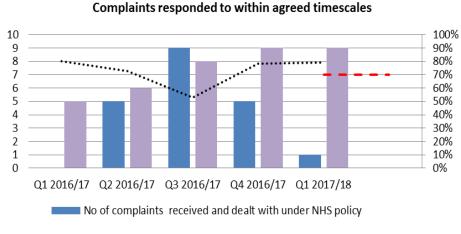




Budget v Net Expenditure Variance

# West Dunbartonshire Health and Social Care Partnership

#### Complaints



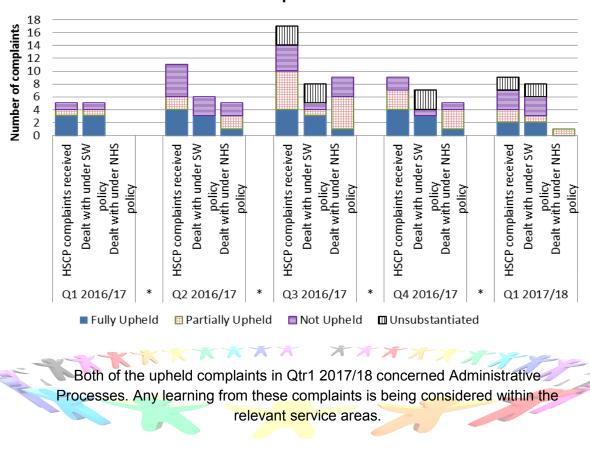
No of complaints received and dealt with under Social Work policy

...... % HSCP complaints received and responded to within agreed timescale

- Target for % HSCP complaints received and responded to within agreed timescale to be achieved by end of March 2018

9 complaints were dealt with through the Social Work Complaints policy and 1 through the NHS policy in Qtr1 2017/18.

3 complaints were responded to outwith the timescales. These were between 4 and 8 days late and were due to administrative delays.



#### Complaints

# West Dunbartonshire Health and Social Care Partnership

#### **Service Improvement Linked to Performance**

SEARCH (Support and Education for Alcohol

Through the success of the SEARCH Project, carers living in West Dunbartonshire affected by alcohol misuse are now better identified, supported, more confident and skilled in their caring role, with improved mental and physical health enabling them to sustain caring for their loved ones. Achieving wider recognition, SEARCH has been shortlisted for the NHSGGC Chairman's Awards and the national Herald Society Awards. SEARCH was developed after Carers of West Dunbartonshire (CWD) and WDHSCP developed a



shared concern that people with alcohol and addiction issues and caring responsibilities were not receiving the support they required: with low numbers of these carers identified, in disparity to the apparent scale of the problem locally. It focuses on two at risk groups of younger adults (18-25 years) who are at risk of using alcohol as a coping mechanism for carer related stress and older adults (65+) emerging as a 'hidden' group with alcohol related issues.

CWD and WDHSCP have improved identification and support of these carers through increasing awareness, skills and knowledge regarding alcohol related issues. A CWD SEARCH support worker is co-located with WDHSCP Addictions and Hospital Discharge Teams, targeting supports and resources with bespoke individual and group support, including for those caring for someone affected by alcohol related issues (75%) and those affected themselves. SEARCH has reduced use of alcohol as a coping mechanism and created safer communities through education and support.

#### National Health & Social Care Standards

Scotland's new <u>National Health and Social Care Standards</u> were launched in June 2017. Underpinned by five principles of **Dignity & Respect**, **Compassion**, **Being Included**, **Responsive Care and Support & Wellbeing**; they set out what we should expect when using health, social care or social work services in Scotland. These Standards are very much welcomed by WDHSCP Board, as they reflect and reinforce our own established core values, and the good practice of HSCP services. This was reflected in our second <u>Annual Public Performance</u> <u>Report</u>, which highlights numerous varied areas of good and emerging practice.

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