West Dunbartonshire Health & Social Care Partnership Public Performance Report

April - June 2018

Welcome to West Dunbartonshire Health and Social Care Partnership's first Public Performance Report for 2018/19.

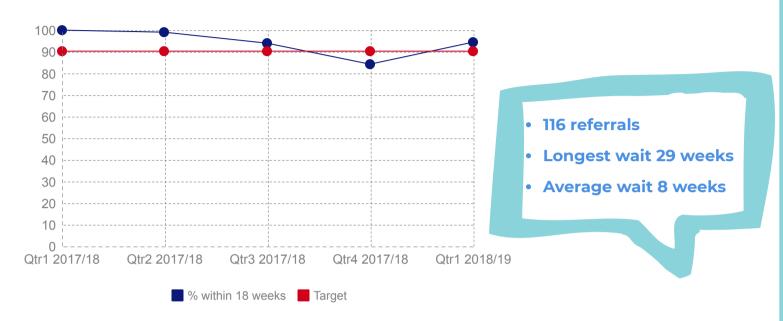
#### The West Dunbartonshire Health and Social Care Partnership Board's:

- 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.

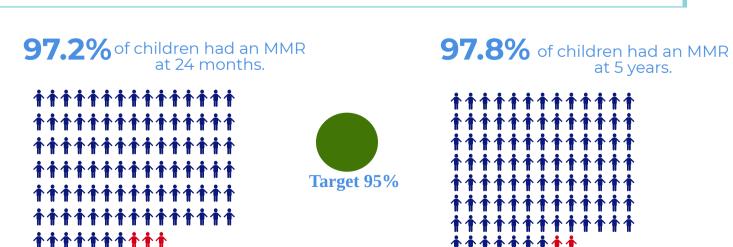


### **Supporting Children and Families**

#### Child and Adolescent Mental Health Services within 18 weeks



The proportion of children and young people receiving treatment within 18 weeks has seen a significant improvement from 84.2% in March 2018 to 94.2% in June 2018 and the average waiting time has decreased from 9 to 8 weeks, well within the 18 week target timescale. However, the longest wait has risen from 26 weeks at March to 29 weeks in June. The prioritisation of the increasing number of urgent referrals has resulted in some children and young people with less urgent needs experiencing longer waits. Referrals in April –June 2018 are 14% higher than in the same period 2017.







387 of the 426 looked after children (90.8%) are being looked after in the community. 8 of the 10 looked after children (80%) who were from Black Minority Ethnic (BME) communities were looked after in the community. There has a been a 10% rise in the number of looked after children (LAC) since June 2017, however we have maintained our target of 90% of looked after children being looked after within their own communities and not in residential settings. As part of our local Equalities Indicators we continue to monitor that the number of Black Minority Ethnic (BME) children who are looked after are being looked after within the community in a similar proportion. As the number of BME looked after children within West Dunbartonshire is very low, small changes may mean percentages fluctuate more significantly. Our data continues to show similar trends for BME children as the total looked after children population.





## Supporting Older People

674 bed days lost to delayed discharge for people aged 65+

7delayed discharges of more than 3 days for non-complex cases at June 2018

134 bed days lost to delayed discharge for people aged 65+ -Adults with Incapacity

**1,110** emergency admissions for people aged 65+



12,163 unplanned acute bed days for people aged 65+

2,640 emergency admissions for people of all ages

17,380 unplanned acute bed days for people of all ages

**8,541** attendances at Accident and Emergency

The Ministerial Steering Group (MSG) for Health and Community Care is closely monitoring the progress of HSCPs across Scotland in delivering reductions in: delays in hospital discharge; unnecessary hospital admissions; attendances at accident and emergency (A&E); and shifting the balance of care from hospital to community settings. In light of the integration of health and social care services significant improvements in ways of working and efficiencies are expected.

Targets have been developed collaboratively across NHS Greater Glasgow and Clyde and our progress towards these annual targets will be detailed in our Quarter 2 report.



98% of carers asked as part of their Adult Carers Support Plan felt able to continue in their caring role



**1,852** people have an Anticipatory Care Plan in place

> Target 1,400

Target 90%

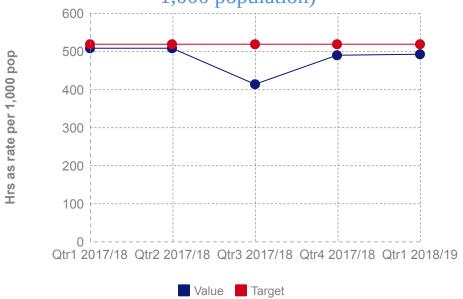
**2,211** people have a Community Alarm/Telecare



295 installations

216 referrals

Number of homecare hours received 65+ (Rate per 1,000 population)



8,006 hours of home care per week

1,295
people receiving home care

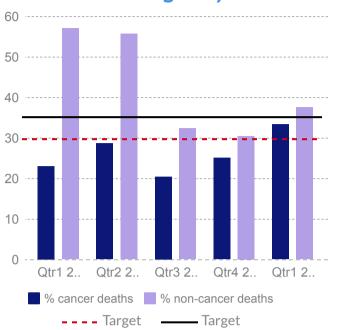
92.2% receiving personal care

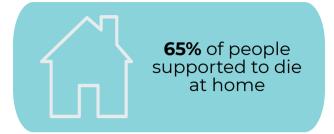
**Target 90%** 

Target 30%

**33.7%** receiving 20 or more visits per week

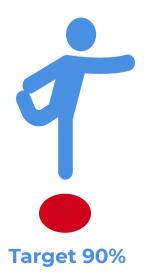
## % of Patients Dying in Hospital (Palliative Care Register)





There has been an increase in the proportion of people on the Palliative Care Register dying in a hospital setting during April – June 2018. While every effort is taken to identify and respect a person's choice in relation to their preferred supports and place of death, which is recorded within their Anticipatory Care Plan, an individual's needs and the management of their condition within a homely setting may change. Our services are responsive to these changing needs and will support the person in the most sensitive and appropriate way.

**1,662** referrals for musculoskeletal physiotherapy services (MSK)



**40%** of patients are seen within 4 weeks for MSK assessment and treatment



**Target** 

225

**226** people supported with their medication



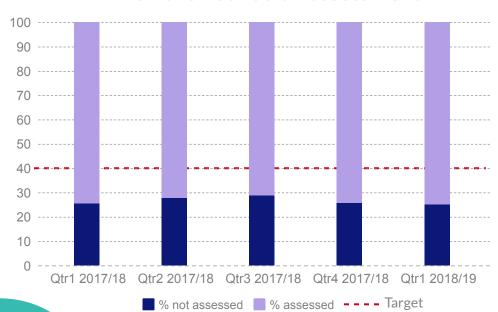
**79.8%** compliance with Formulary Preferred List





**£171.93**prescribing cost per weighted patient

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



60% of people achieved their agreed personal outcome



154 people received reablement service

60.8% of men

60.2% of women

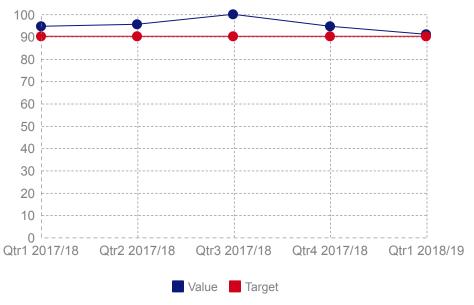
# Supporting Safe, Strong and Involved Communities

% of people waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery



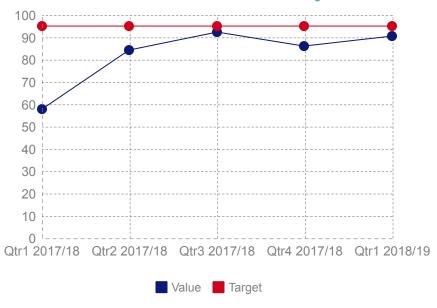
243 referrals for drug or alcohol treatment

% of people who began Psychological Therapies treatments within 18 weeks of referral



69 people started treatment within 18 weeks

# % of Child Protection investigations to case conference within 21 days



- 53 children on the Child Protection Register
- 83 referrals
- 68 investigations
- 38 case conferences
   within 21 days

Performance against the 21 day target has improved from 86% in March 2018 to 90.5% in June 2018 although we are still below the 95% target. Of the 4 case conferences which were held outwith the timescale, 2 were one day late. The local HSCP-led and multi-agency Child Protection Committee continues to monitor activity and registrations and the variance over the course of the year.





# % of Community Payback Orders attending an induction session within 5 working days of sentence





93% of Criminal
Justice Social Work
reports submitted
to court by noon
on the day prior to
calling



27% of Unpaid Work and other activity requirements commences within 7 working days of sentence

**Target** 

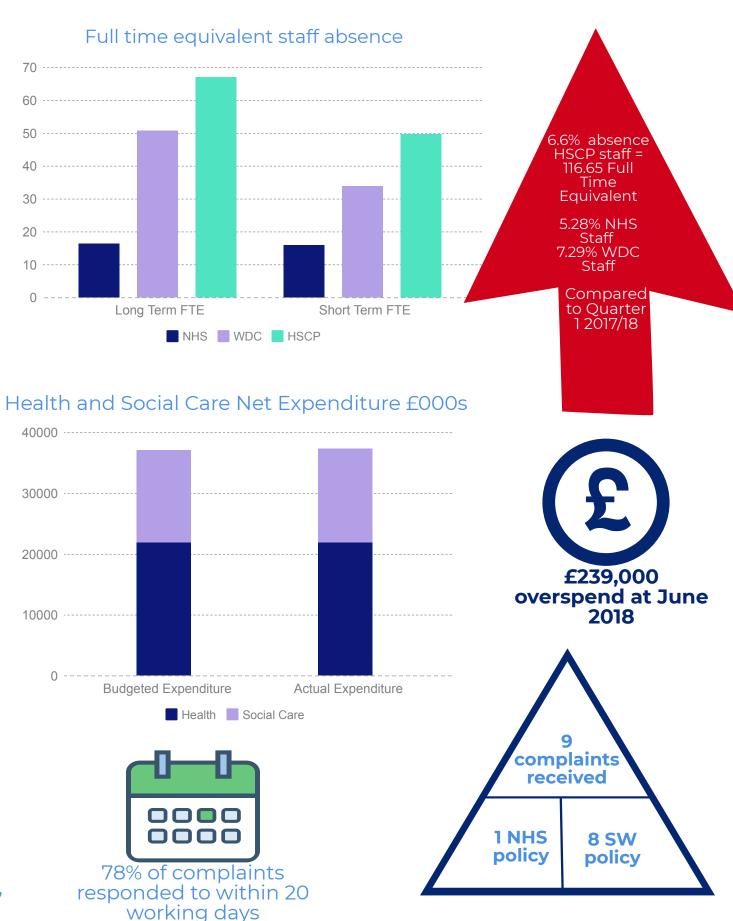
80%



Each service user with a Community Payback Order is offered a date of induction within 2 working days of the order being implemented, however only 51 out of 98 presented for the inductions on the date of their appointment this quarter. The main reason for induction not taking place was non-attendance of the service user without explanation. Only 8 appointments were missed due to service reasons and in the main this was due to staff absence or staff holiday. In these instances a follow up appointment was offered within a day or two of the cancelled appointment.

Of the 84 Unpaid Work Orders this quarter, 61 failed to commence placements within 7 working days. The failure to commence within timescale of 49 of the placements was due to: the service user being ill, in custody, on an order already and currently completing an unpaid work placement; or simply failing to attend on the date of the unpaid work order commencing. In the 12 cases that the delay was a result of the criminal justice team being unable to provide a suitable work placement, this was due to the specific needs of the individuals, some of whom required a very specialist placement. This could be as a result of the individual having a disability or due to the nature of the offence that has been committed. In these circumstances additional time is required to complete an assessment of the suitability of placements available and of individuals already working on these placements.

## **Our Organisation**



Peer immunisers from West Dunbartonshire HSCP recently celebrated their phenomenal achievements last year in immunising their colleagues with the flu vaccination to help minimise infections within our local communities.

Beth Culshaw, Chief Officer, said: "I am so proud of our staff – to get so many people to have their flu jab is just amazing and reflects the many years of prioritising the importance of flu vaccination as part of our strategy to approach winter."

This small group of nurses managed to immunise a fantastic 520 people across the HSCP and this year they are hoping to reach 650 people, an ambitious total that is almost all of the staff working within the HSCP.

The team are enthusiastic about ensuring their colleagues are all protected and become flu heroes this winter.

Pamela MacIntyre, Lead for Prescribing said: "We've almost made it a habit for staff to have their flu jab here at the clinic. When October comes around, staff know that it's flu season again and we'll be out and about making sure that as many of them as possible get their flu jab."

"People get their jab here with us because it's so much easier than making an appointment with your GP – then you usually need to get time off work – whereas here you can get the flu jab in the clinic and it only takes moments."



Pictured: Fiona Rodgers, Jo Gibson, Rhona Galbraith, Adette Gilliland, Katie Morgan, Beth Culshaw and Pamela MacIntyre