

West Dunbartonshire Health and Social Care Partnership Performance Report 2020/21: Quarter 4 January-March 2021

Due to timing issues and service priorities during the current COVID-19 pandemic, both within the HSCP and externally, some data is not yet available.

	PI Status	Short Term Trends				
	Alert		Improving			
\triangle	Warning	-	No Change			
0	ок	1	Getting Worse			
?	Unknown					
4	Data Only					

Earl	y Intervention						
Ref	Performance Indicator		Q4 2020/21				Trend over 8 Otrs
		Value	Target	Status	Short Trend	Value	
1	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 24 months	Published late June	95%	Not yet available	Not yet available	94.5%	
2	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 5 years	Published late June	95%	Not yet available	Not yet available	97.3%	
3	Percentage of children on the Child Protection Register who have a completed and current risk assessment	100%	100%	②		100%	
4	Percentage of child protection investigations to case conference within 21 days	60.5%	95%		•	88%	
5	Number of referrals to the Scottish Children's Reporter on care and welfare grounds	Not yet available due to IT	N/A		Not yet available due to IT system change by Children's Reporter		
6	Number of referrals to the Scottish Children's Reporter on offence grounds	system change by Children's Reporter	N/A				

Ref	Performance Indicator		Q4 2020	/21		Q3 2021/21	Trend over 8 Qtrs
Rei	Terrormance Indicator	Value	Target	Status	Short Trend	Value	Trend over o quis
7	Number of delayed discharges over 3 days (72 hours) non-complex cases	14	0		1	15	
8	Number of bed days lost to delayed discharge 18+ All reasons	2,913	1,459		•	2,542	
9	Number of bed days lost to delayed discharge 18+ Complex Codes	1,718	N/A		•	1,594	
10	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	2,256	1,104		•	1,878	
11	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	1,053	N/A		•	848	
12	Number of emergency admissions 18+	Not yet available	2,295	Not yet available	Not yet available	2,182	
13	Number of emergency admissions aged 65+	Not yet available	1,135	Not yet available	Not yet available	1,086	
14	Emergency admissions aged 65+ as a rate per 1,000 population	Not yet available	68	Not yet available	Not yet available	64.9	
15	Number of unscheduled bed days 18+	Not yet available	17,735	Not yet available	Not yet available	17149	
16	Unplanned acute bed days (aged 65+)	Not yet available	12,157	Not yet available	Not yet available	12,464	
17	Unplanned acute bed days (aged 65+) as a rate per 1,000 population	Not yet available	727	Not yet available	Not yet available	745	
18	Number of Attendances at Accident and Emergency 18+	Not yet available	4,720	Not yet available	Not yet available	4,480	
19	Percentage of people aged 65+ admitted twice or more as an emergency who have not had an assessment	25.9%	24%		•	25.1%	
20	Number of clients receiving Home Care Pharmacy Team support	390	258		1	356	
21	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	89%	90%		1	87%	
22	Percentage of carers who feel supported to continue in their caring role when asked through their Adult Carer Support Plan	97%	95%		•	94.6%	
23	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	Published late June	90%	Not yet available	Not yet available	95.9%	
24	Percentage of Adult Support and Protection clients who have current risk assessments and care plan	100%	100%		_	100%	

Ref	Performance Indicator	Q4 2020/21				Q3 2021/21	Trend over 8 Qtrs
	Terrormance Indicator	Value	Target	Status	Short Trend	Value	
25	Number of people receiving Telecare/Community Alarm service - All ages	1,986	2,200		•	2,015	
26	Number of patients with an eKIS record	21,101	N/A		•	21,304	

Acce	ess						
D-f	Desfermence Indicates		Q4 2020,	/21		Q3 2020/21	Trend over 8
Ref	Performance Indicator	Value	Target	Status	Short Trend	Value	Qtrs
27	Number of people receiving homecare - All ages	1,340	N/A		•	1,362	
28	Number of weekly hours of homecare - All ages	10,309	N/A		₽	10,371	
29	Total number of homecare hours provided as a rate per 1,000 population aged 65+	515	570		1	513	
30	Percentage of people aged 65 and over who receive 20 or more interventions per week	38.5%	35%		1	36.7%	
31	Percentage of homecare clients aged 65+ receiving personal care	98.3%	95%		•	99.5%	
32	Number of people aged 75+ in receipt of Telecare - Crude rate per 100,000 population	19,220	20,945		•	19,476	
33	Percentage of identified patients dying in hospital for cancer deaths (Palliative Care Register)	13.7%	30%		•	12%	
34	Percentage of identified patients dying in hospital for non-cancer deaths (Palliative Care Register)	41.4%	32%		1	43.2%	
35	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	73%	98%		1	71%	
36	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	85%	80%			51%	
37	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	0%	80%		•	9%	

Resi	lience						
Dof	Porformanco Indicator		Q4 2020/	Q3 2020/21	Trend over 8		
Ref Performance Indicato	renormance indicator	Value	Target	Status	Short Trend	Value	Qtrs
38	Child and Adolescent Mental Health Service (CAMHS) 18 weeks referral to treatment *	98.4%	90%		•	63.1%	
39	Mean number of weeks for referral to treatment for specialist Child and Adolescent Mental Health Services	7	18	②	1	25	
40	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	77.6%	90%		•	95.1%	

^{*} By summer 2020, demand for West Dunbartonshire CAMHS, alongside some staffing challenges, contributed to the longest wait for assessment up to 66 weeks: this was considerably in excess of the 18 week referral to treatment target. The HSCP Board agreed to support some additional recruitment and this was augmented as part of wider action across NHS Greater Glasgow & Clyde as part of the Waiting List Initiative for CAMHS services. Consequently, the longest wait for children accessing the local service reduced significantly, from over 60 weeks in November 2020 to within the 18 week target by the end of March 2021. The impact of lockdown and the wider implications of Covid-19 are still being realised, however, as part of wider approaches to address children and young people's mental health and wellbeing concerns, the work of the CAMHS team is continuing to provide assessment more quickly to those children who meet the referral criteria.

Assets								
Ref	Performance Indicator		Q4 2020/	Q3 2020/21	Trend over 8 Otrs			
Kei		Value	Target	Status	Short Trend	Value	Trend over 8 Qu's	
41	Prescribing cost per weighted patient	Not yet available	Average across NHSGGC at March 2021	Not yet available	Not yet available	£40.83		
42	Compliance with Formulary Preferred List	Not yet available	78%	Not yet available	Not yet available	79.94%		

Ineq	Inequalities								
Ref	Performance Indicator		Q4 2020/		Q3 2020/21	Trend over 8			
		Value	Target	Status	Short Trend	Value	Qtrs		
43	Balance of Care for looked after children: % of children being looked after in the Community	89.2%	90%		•	90.3%			

Ref	Performance Indicator		Q4 2020/	Q3 2020/21	Trend over 8		
Rei	Terrormance maleator	Value	Target	Status	Short Trend	Value	Qtrs
44	Percentage of looked after children being looked after in the community who are from BME communities	73.3%	N/A		•	77.8%	
45	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	100%	75%	⊘	-	N/A	

Quarter 3 Data

Please find October to December 2020 data below for those indicators we were unable to report on in our Quarter 3 Performance Report.

The Scottish Children's Reporter have been transferring to a new IT system during 2020/21 and figures for the period October 2020 to March 2021 are not yet available.

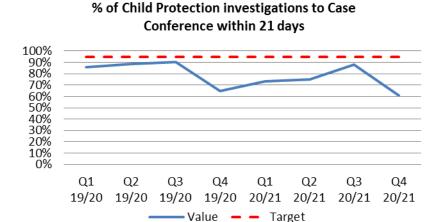
Early	/ Intervention						
			Q3 2020/	'21		Q2 2020/21	
Ref	Performance Indicator	Value	Target	Status	Short Trend	Value	Trend over 8 Qtrs
1	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 24 months	94.5%	95%			94%	
2	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 5 years	97.3%	95%			97.1%	
12	Number of emergency admissions 18+	2,182	2,295		•	2,157	
13	Number of emergency admissions aged 65+	1,086	1,134		1	1,095	
14	Emergency admissions aged 65+ as a rate per 1,000 population	64.9	68		1	65.4	
15	Number of unscheduled bed days 18+	17,149	17,735			17,373	
16	Unplanned acute bed days (aged 65+)	12,464	12,157		•	12,362	
17	Unplanned acute bed days (aged 65+) as a rate per 1,000 population	745	727		•	738.9	
18	Number of Attendances at Accident and Emergency 18+	4,480	4,720		1	5,098	
23	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	95.9%	90%	②	•	95.9%	

Assets								
			Q3 2020/	21		Q2 2020/21		
Ref	Performance Indicator	Value	Target	Status	Short Trend	Value	Trend over 8 Qtrs	
41	Prescribing cost per weighted patient	£163.32	Average across NHSGGC at March 2021	Not yet available	•	£158.40		
42	Compliance with Formulary Preferred List	79.94%	78%	②	1	78.14%		

West Dunbartonshire Health and Social Care Partnership Exceptions Reporting: Quarter 4 January-March 2021

Performance Area: Child Protection

Quarter	Value	Target
Q1 19/20	85.71%	95%
Q2 19/20	88.57%	95%
Q3 19/20	90.00%	95%
Q4 19/20	64.70%	95%
Q1 20/21	73.30%	95%
Q2 20/21	75.00%	95%
Q3 20/21	88.00%	95%
Q4 20/21	60.53%	95%



Key Points:

During January to March, 23 of the 38 case conferences held were within the target timescale of 21 days.

Performance in this area can fluctuate around the conclusion of police investigations to allow an Initial Case Conference (ICC) to take place with all of the required information.

In addition there is a system aspect where duplication of an approved CP1 for siblings associated with the child being considered at ICC may be duplicated and signed off after the ICC, thus looking like a delay against some children where there is none. Similarly, pre birth decisions to move to an ICC post birth may (due to the date of actual birth of the child) be well outwith timescales for this reason.

Improvement Actions:

Exceptions are now being tracked to allow specific reporting against individual cases, tracking themes and areas for improvement.

Cases are now routinely placed in service managers' diaries at the point of investigation meaning that if no ICC is required it can be removed with timescales being met in most cases, however exceptions will always apply.

Performance Area: Delayed Discharge

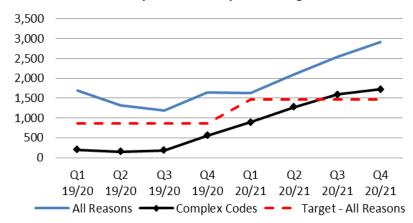
Quarter	Value	Target
Q1 19/20	23	0
Q2 19/20	9	0
Q3 19/20	11	0
Q4 19/20	11	0
Q1 20/21	7	0
Q2 20/21	10	0
Q3 20/21	15	0
Q4 20/21	14	0

Number of delayed discharges over 3 days (72 hours) non-complex cases



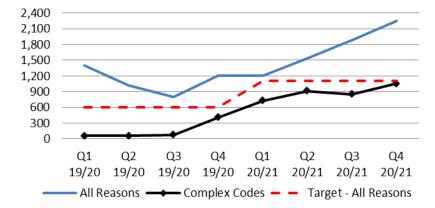
Bed Days Lost to Delayed Discharge 18+

Quarter	All Reasons	Complex Codes
Q1 19/20	1696	201
Q2 19/20	1320	148
Q3 19/20	1185	180
Q4 19/20	1638	559
Q1 20/21	1621	893
Q2 20/21	2101	1276
Q3 20/21	2542	1594
Q4 20/21	2913	1718



Bed Days Lost to Delayed Discharge 65+

Quarter	All Reasons	Complex Codes
Q1 19/20	1401	60
Q2 19/20	1015	56
Q3 19/20	793	76
Q4 19/20	1208	405
Q1 20/21	1210	727
Q2 20/21	1541	910
Q3 20/21	1878	848
Q4 20/21	2,256	1,053



Key Points:

The number of daily delays in the quarter peaked at 40 mid-February and was 34 at the end of March. Closure of the Scottish Courts on March 2020 due to the Coronavirus (COVID-19) pandemic resulted in lengthy delays with complex cases where Guardianship applications are underway. While the courts have re-opened there are still significant backlogs. The high number of Coronavirus cases in January and February also resulted in care homes limiting the number of admissions.

Performance has continued to be challenging in terms of delayed discharges throughout this period, although some improvement has been evident in recent weeks.

Improvement Actions:

Additional resources have been deployed into the Hospital Discharge Team including Mental Health Officer and Social Worker capacity.

Learning events have been held with Glasgow and Renfrewshire HSCPs to ensure practice is of high quality.

The Adults with Incapacity (AWI) Protocol has been revised including standards at each point of the process to ensure timely action is taken to progress discharges.

In addition, in recent weeks, a number of much awaited court dates have now been provided, allowing guardianship applications to be progressed.

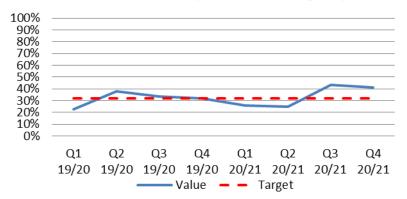
Development of a Delayed Discharge Action Plan which is monitored by the senior management team on a weekly basis.

Weekly meetings established with Greater Glasgow and Clyde discharge co-ordinators and Vale of Leven Hospital to review current delays and the Area Resource Group continues to consider all hospital discharge cases on a daily basis to expedite the agreement of care home offers or homecare packages wherever possible.

Performance Area: Palliative Care Deaths in Hospital

Quarter	Value	Target
Q1 19/20	22.6%	32%
Q2 19/20	38.2%	32%
Q3 19/20	33.8%	32%
Q4 19/20	31.9%	32%
Q1 20/21	25.7%	32%
Q2 20/21	25.0%	32%
Q3 20/21	43.2%	32%
Q4 20/21	41.4%	32%

Percentage of identified patients dying in hospital for non-cancer deaths (Palliative Care Register)



Key Points:

The District Nursing service strive to ensure people die in their chosen place of care, and most of our patients choose to die at home. However, due to the range of potential and unexpected complexities of non-cancer deaths, it is inevitable that sometimes hospital is the safest place to manage a person's care.

Another contributory factor in this complex category is the need to also care for carers, and occasionally admissions can happen due to the sense they may have of being overwhelmed by their role at such an emotional time, particularly if the symptoms their loved one is experiencing are significant.

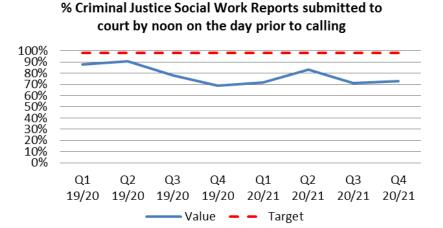
We are also recognise that the pandemic may have affected numbers in a way we are not able to fully understand at this point.

Improvement Actions:

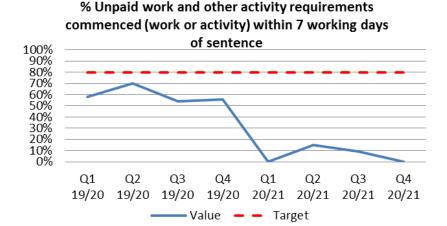
We will continue to strive to ensure people die in their chosen place of care and we will continue to monitor how effectively we have been able to do this while acknowledging the complexities above.

Performance Area: Criminal Justice Social Work

Quarter	Value	Target
Q1 19/20	88%	98%
Q2 19/20	91%	98%
Q3 19/20	78%	98%
Q4 19/20	69%	98%
Q1 20/21	72%	98%
Q2 20/21	83%	98%
Q3 20/21	71%	98%
Q4 20/21	73%	98%



Quarter	Value	Target
Q1 19/20	58%	80%
Q2 19/20	70%	80%
Q3 19/20	54%	80%
Q4 19/20	56%	80%
Q1 20/21	0%	80%
Q2 20/21	15%	80%
Q3 20/21	9%	80%
Q4 20/21	0%	80%



Key Points:

Covid-19 restrictions set out by the Scottish Government continue to impact on the ability to start Unpaid Work Orders within 7 working days. Squad placements have been recently restarted following guidance from the Chief Medical Officer. However this will continue to impact on the length of time this will take service users to complete their unpaid work hours. Recruitment has commenced to enable us to increase our capacity with additional placements.

Improvement Actions:

With additional government funding received, we are now recruiting staff to enable us to tackle the backlog of orders created by the pandemic and ensuing restrictions placed on the service. This will also further increase our capacity for completion of Court Reports.

With continued restricted office space, a hybrid model of monitoring and supervision has been developed, based on risk levels, which allows all service users to be seen face to face within an office environment

We continue to have commissioned third sector colleagues providing virtual workshops and this will enable service users to continue their unpaid work hours. This is being further expanded to all services users on statutory supervision.

