






















West Dunbartonshire Health and Social Care Partnership Performance Report 2021/22: Quarter 2 July-September 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. Targets for 2021/22 are yet to be agreed and 2020/21 targets have been retained meantime.

PI Status		Short Term Trends	
	Alert		Improving
	Warning		No Change
	OK		Getting Worse
	Unknown		
	Data Only		

Early Intervention

Ref	Performance Indicator	Q2 2021/22				Q1 2021/22	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
1	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 24 months	Published late December	95%	Not yet available	Not yet available	94.7%	
2	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 5 years	Published late December	95%	Not yet available	Not yet available	99.2%	
3	Percentage of children on the Child Protection Register who have a completed and current risk assessment	100%	100%			100%	
4	Percentage of child protection investigations to case conference within 21 days	84.2%	95%			62.5%	
5	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) grounds*	Not yet available	N/A		Not yet available	51	
6	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds*	Not yet available	N/A		Not yet available	25	
7	Number of delayed discharges over 3 days (72 hours) non-complex cases	Not yet available	0	Not yet available	Not yet available	6	

Ref	Performance Indicator	Q2 2021/22				Q1 2021/22	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
8	Number of bed days lost to delayed discharge 18+ All reasons	Not yet available	1,460	Not yet available	Not yet available	2,726	
9	Number of bed days lost to delayed discharge 18+ Complex Codes	Not yet available	N/A		Not yet available	1,598	
10	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	1,575	1,104			2,163	
11	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	662	N/A			1,180	
12	Number of emergency admissions 18+	Not yet available	2,295	Not yet available	Not yet available	2,449	
13	Number of emergency admissions aged 65+	Not yet available	1,134	Not yet available	Not yet available	1,207	
14	Emergency admissions aged 65+ as a rate per 1,000 population	Not yet available	68	Not yet available	Not yet available	71.6	
15	Number of unscheduled bed days 18+	Not yet available	17,735	Not yet available	Not yet available	18,437	
16	Unplanned acute bed days (aged 65+)	Not yet available	12,156	Not yet available	Not yet available	12,623	
17	Unplanned acute bed days (aged 65+) as a rate per 1,000 population	Not yet available	726	Not yet available	Not yet available	748.3	
18	Number of Attendances at Accident and Emergency 18+	Not yet available	4,720	Not yet available	Not yet available	5,862	
19	Percentage of people aged 65+ admitted twice or more as an emergency who have not had an assessment	26.2%	24%			24.1%	
20	Number of clients receiving Home Care Pharmacy Team support	376	257			377	
21	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	40%	90%			62%	
22	Percentage of carers who feel supported to continue in their caring role when asked through their Adult Carer Support Plan	97.5%	95%			93.9%	
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 December	90%	Not yet available	Not yet available	Publication has been delayed	
24	Percentage of Adult Support and Protection clients who have current risk assessments and care plan	100%	100%			100%	
25	Number of people receiving Telecare/Community Alarm service - All ages	1,955	2,200			1,938	
26	Number of patients with an eKIS record	20,819	N/A			20,984	

*The Scottish Children's Reporter Administration have changed their reporting to the Academic Year (August-July) therefore Qtr1 and 2 above relate to February – April 2021 and May – July 2021 respectively. The performance indicators have also been changed from number of referrals to the number of children referred in line with the national Child Protection Minimum Dataset.

Access							
Ref	Performance Indicator	Q2 2021/22		Q1 2021/22		Trend over 8 Qtrs	
		Value	Target	Status	Short Trend		Value
27	Number of people receiving homecare - All ages	1,445	N/A			1,400	
28	Number of weekly hours of homecare - All ages	10,801	N/A			10,678	
29	Total number of homecare hours provided as a rate per 1,000 population aged 65+	533	570			531	
30	Percentage of people aged 65 and over who receive 20 or more interventions per week	39.8%	35%			39.2%	
31	Percentage of homecare clients aged 65+ receiving personal care	98.7%	95%			98.9%	
32	Number of people aged 75+ in receipt of Telecare - Crude rate per 100,000 population	18,763	20,945			18,524	
33	Percentage of identified patients dying in hospital for cancer deaths (Palliative Care Register)	Not yet available	30%	Not yet available	Not yet available	23%	
34	Percentage of identified patients dying in hospital for non-cancer deaths (Palliative Care Register)	Not yet available	32%	Not yet available	Not yet available	26%	
35	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	70.5%	98%			75%	
36	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	84.5%	80%			79%	
37	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	31.3%	80%			9%	

Resilience							
Ref	Performance Indicator	Q2 2021/22				Q1 2021/22	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
38	Child and Adolescent Mental Health Service (CAMHS) 18 weeks referral to treatment	100%	90%			98.6%	
39	Mean number of weeks for referral to treatment for specialist Child and Adolescent Mental Health Services	6	18			2	
40	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	72.4%	90%			84.8%	

Assets							
Ref	Performance Indicator	Q2 2021/22				Q1 2021/22	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
41	Prescribing cost per weighted patient (Annualised)	Not yet available	£158.57	Not yet available	Not yet available	£165.48	
42	Compliance with Formulary Preferred List	Not yet available	78%	Not yet available	Not yet available	79.16%	

Inequalities							
Ref	Performance Indicator	Q2 2021/22				Q1 2021/22	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
43	Balance of Care for looked after children: % of children being looked after in the Community	89.7%	90%			89.7%	
44	Percentage of looked after children being looked after in the community who are from BME communities	78.9%	N/A			78.9%	
45	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	100%	75%			100%	

Please find April to June 2021 data below for those indicators we were unable to report on in our Quarter 1 Performance Report. Please note that Drug and Alcohol Waiting Times have not yet been published for Quarter 1 2021-22. These have recently been transferred to a new IT system and this may account for the delay in publication.

Early Intervention							
Ref	Performance Indicator	Q1 2021/22				Q4 2020/21	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
1	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 24 months	94.7%	95%			94.5%	
2	Percentage of Measles, Mumps & Rubella (MMR) immunisation at 5 years	99.2%	95%			97.6%	
5	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) ground	51	N/A			76	
6	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds	25	N/A			25	
12	Number of emergency admissions 18+	2,449	2,295			2,137	

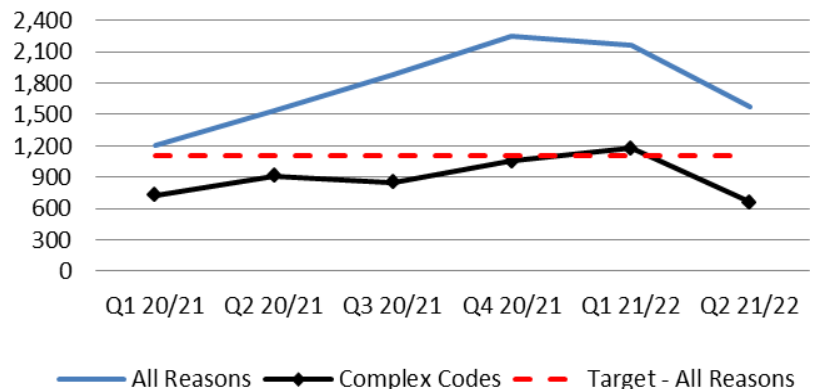
Ref	Performance Indicator	Q1 2021/22				Q4 2020/21	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
13	Number of emergency admissions aged 65+	1,207	1,134	▲	▼	1,042	
14	Emergency admissions aged 65+ as a rate per 1,000 population	71.6	67	▲	▼	62.3	
15	Number of unscheduled bed days 18+	18,437	17,735	▲	▲	19,986	
16	Unplanned acute bed days (aged 65+)	12,623	12,156	▲	▲	13,677	
17	Unplanned acute bed days (aged 65+) as a rate per 1,000 population	748.3	726	▲	▲	839.6	
18	Number of Attendances at Accident and Emergency 18+	5,862	4,720	●	▼	4,408	

Assets							
Ref	Performance Indicator	Q1 2021/22				Q4 2020/21	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
41	Prescribing cost per weighted patient (Annualised)	£165.48	£158.57	▲	▼	£153.40	
42	Compliance with Formulary Preferred List	79.16%	78%	✔	▲	78.14%	

West Dunbartonshire Health and Social Care Partnership Exceptions Reporting: Quarter 2 July-September 2021

Performance Area: Delayed Discharge

Bed Days Lost to Delayed Discharge 65+



Quarter	All Reasons	Complex Codes
Q1 20/21	1210	727
Q2 20/21	1541	910
Q3 20/21	1878	848
Q4 20/21	2256	1053
Q1 21/22	2163	1180
Q2 21/22	1575	662

Key Points:

The continued efforts to facilitate hospital discharges have begun to show some real progress during this quarter. The number of daily delays in the quarter peaked at 33 early September but was reduced down to 17 towards the end of September and as at the 30th of September, 22 people were experiencing a delay. While the courts have re-opened there are still significant backlogs.

Improvement Actions:

Delayed Discharge Action Plan continues to be monitored by the senior management team on a weekly basis.

Weekly meetings continue with the Discharge Team which has representation from the Hospital Discharge team, Social Work and Mental Health Officer team to facilitate discharges.

Local data is continually monitored and analysed to identify areas for improvement.

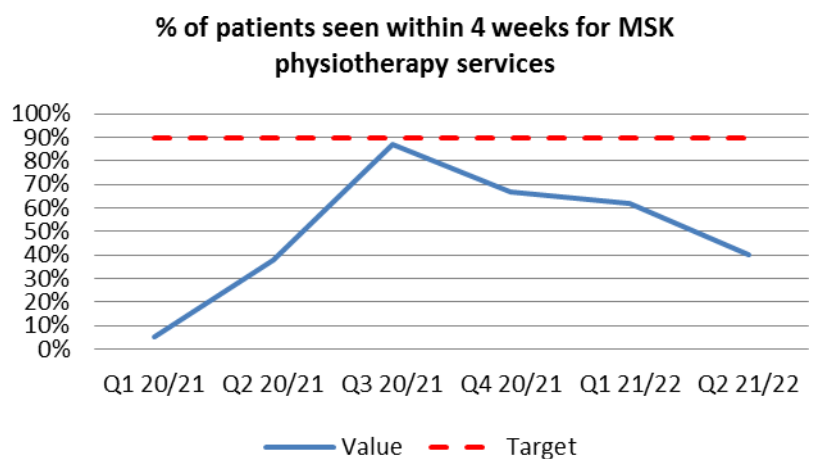
Chronology data gathering complete on long term Adults with Incapacity (AWI) cases. This work will be used to evidence and identify any bottlenecks or delays in processes.

Work is underway to ensure sufficient Mental Health Officer chair capacity.

A campaign within West Dunbartonshire to raise awareness of the importance of setting up Power of Attorney is in early planning stages.

Performance Area: Musculoskeletal (MSK) Physiotherapy

Quarter	Value	Target
Q1 20/21	5%	90%
Q2 20/21	38%	90%
Q3 20/21	87%	90%
Q4 20/21	67%	90%
Q1 21/22	62%	90%
Q2 21/22	40%	90%



Key Points :

Referral figures during July - September reflect that MSK Physiotherapy demand is back to pre-Covid levels and remobilisation of service provision continues. Increased demand has come at a time when there has been decreased capacity due to further redeployment of staff to support pressures within Acute Hospital

services. This increased demand and decreased capacity has had a detrimental impact on waiting times and the number of patients waiting over target within this quarter.

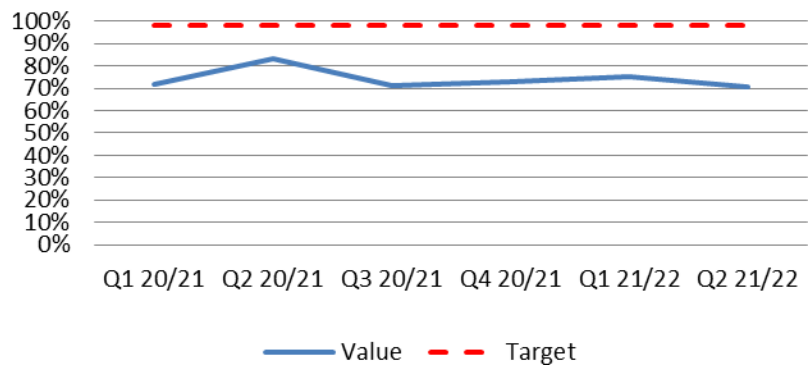
Improvement Actions

We are continuing with Virtual Patient Management but remobilising face to face provision based on clinical decision making/clinical need. Orthopaedic post-operative patients are now escalated for face to face appointments at first point of contact. Due to the ongoing infection control and social distancing requirements, face to face capacity in Physiotherapy sites across Greater Glasgow and Clyde is around 30% of normal service provision.

Performance Area: Criminal Justice Social Work

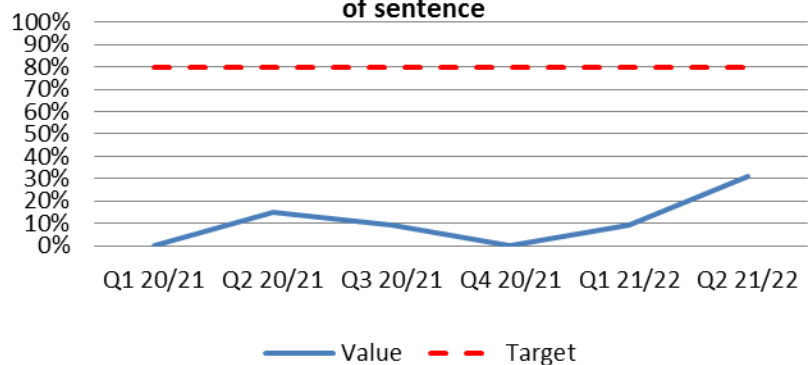
Quarter	Value	Target
Q1 20/21	72%	98%
Q2 20/21	83%	98%
Q3 20/21	71%	98%
Q4 20/21	73%	98%
Q1 21/22	75%	98%
Q2 21/22	70.5%	98%

% Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling



Quarter	Value	Target
Q1 20/21	0%	80%
Q2 20/21	15%	80%
Q3 20/21	9%	80%
Q4 20/21	0%	80%
Q1 21/22	9%	80%
Q2 21/22	31.3%	80%

% Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence



Key Points:

Following recruitment creating increased capacity within the team, we were starting to see an increase in the percentage of reports being returned to Court. Quarter 2 evidenced a decrease in Criminal Justice

Social Work Reports and a correlating increase in Letters to Court which was reflective of the higher than average levels of sickness absence recorded within the team.

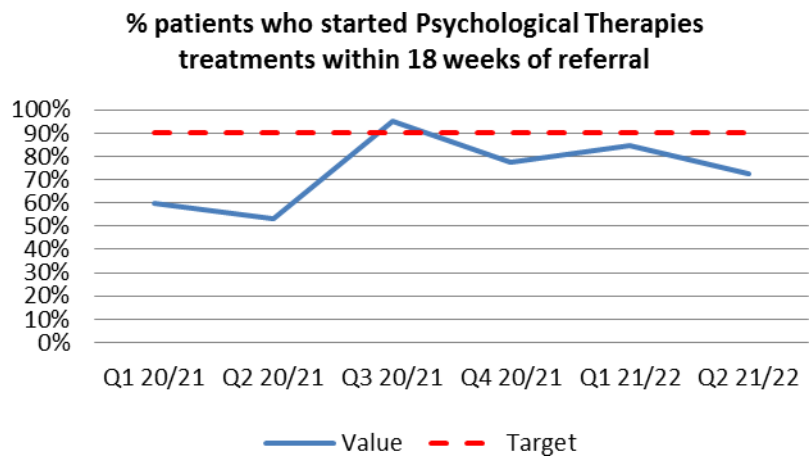
Following the lifting of restrictions, we are now able to increase capacity within the squad placements of unpaid work enabling an increased number of service users to commence unpaid work within timescale.

Improvement Actions:

With additional government funding received, we are continuing the recruitment of staff to enable us to tackle the backlog of orders created by the pandemic and ensuing restrictions placed on the service. 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 service users on statutory supervision.

Performance Area: Psychological Therapies

Quarter	Value	Target
Q1 20/21	59.6%	90%
Q2 20/21	53.4%	90%
Q3 20/21	95.1%	90%
Q4 20/21	77.6%	90%
Q1 21/22	84.8%	90%
Q2 21/22	72.4%	90%



Key Points:

The impact of the pandemic, staff absence and recruitment issues have meant we continue to experience challenges in meeting waiting times, although performance is improved on the same period last year. Rollout of our Wellbeing Nurses situated in GP Practices has paused, meaning the Primary Care Mental Health Team and Community Mental Health teams are continuing to provide an assessment and signposting service to some patients who may have been diverted from Mental Health specific services. Staff absence and vacant posts have resulted in staff carrying larger caseloads and an increase in the use of bank and agency staff to maintain minimum staffing levels.

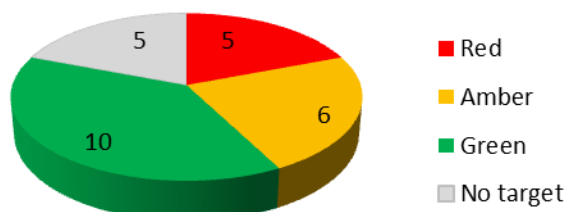
Improvement Actions:

We have prioritised recruitment, ensuring the turnaround for vacant posts is as quick as it can be.

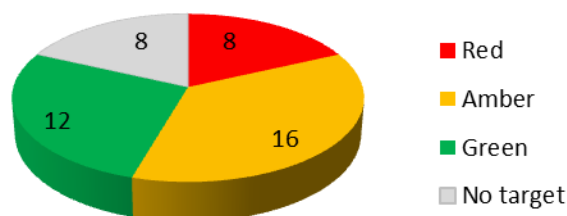
We have successfully bid for additional money from Action 15 and Covid recovery money to recruit additional staff to Community Services and are currently in the process of recruiting to these posts.

Summary of Strategic Plan Key Performance Indicators

Quarter 2: July to September 2021
(Partial Data)



Quarter 1: April to June 2021 (Full Data)



West Dunbartonshire Health and Social Care Partnership Complaints Reporting: Quarter 2 July-September 2021

Within the Model Complaints Handling Procedure developed by the Scottish Public Services Ombudsman (SPSO) is a requirement to report performance in relation to complaints internally on a quarterly basis and publicly on an annual basis in line with the SPSO's Model Complaints Handling Reporting Framework.

As part of our commitment to best practice, openness and transparency we will include this framework within our Quarterly Performance Report going forward.

These indicators are set by the SPSO and should provide opportunities for benchmarking and identify good practice and areas for improvement on a local and national basis.

Indicator 1: Learning from complaints

During April – September 2021 the following learning points or actions were identified through the investigation of complaints received by the HSCP.

Service Area	Lessons Learned/Actions Taken
Children's Health, Care & Criminal Justice	<ul style="list-style-type: none"> Multi Agency Risk Assessment Conference (MARAC) steering group is developing guidance for staff on recording against MARAC decisions. Improved communication /explanations particularly for families whose first language is not English.

Community Health and Care Services	<ul style="list-style-type: none"> • Reflective practice continues to be ongoing with staff. • Proposal with Carers Centre to develop pathway and funding to improve speed of access to support for carers whilst awaiting full assessment via Social Work. Proposal for temporary additional staff to address waiting lists and allow more timeous allocation of cases. • Information in a service user's file should make it clear if support is being provided from more than one funding source. • Work is being undertaken to ensure that all service agreements are updated in our client system CareFirst. This will enable the sharing of important information between different teams. • The process for contacting next of kin will be formally reviewed. • The service is developing a more simplified client profile which will allow clients to share how they wish their care to be managed in an emergency.
Mental Health, Learning Disability and Addiction Services	<ul style="list-style-type: none"> • Community Mental Health Team to review discharge planning process to ensure inclusion of updated Staying Well Plan and longer term planning of phased discharge where appropriate.

A complaint considered by the SPSO but not taken on to investigation stage highlighted to the HSCP that the Model Complaint Handling Procedure states that an authority's stage 2 responses to a complaint should 'address all the issues raised and demonstrate that each element has been fully and fairly investigated'.

SPSO Indicator	Measure	Q1	Q2
2	Number of Stage 1 complaints (whether escalated to Stage 2 or not)	16	21
	Number of complaints direct to Stage 2	8	7
	Total number of complaints	24	28
3	% closed within timescale - Stage 1	Not yet available	
	% closed within timescale - direct to Stage 2	2	1
	% closed within timescale - escalated to Stage 2	1	None recorded as escalated
4	Average response time - Stage 1	Not yet available	
	Average response time - direct to Stage 2	25	23
	Average response time - escalated to Stage 2	18	None recorded as escalated

The accurate recording of Stage 1 complaints, their outcomes and timescales across both West Dunbartonshire Council and NHS Greater Glasgow and Clyde systems is in early development stages.

Indicator 5: Outcomes of Complaints

Stage 2 – Quarter 1 2020/21

Outcome	Model Complaints Handling Procedure		% of total
	NHSGGC	WDC	
Fully Upheld	0	0	0%
Partially Upheld	1	5	75%
Not Upheld	1	1	25%
Unsubstantiated	0	0	0%
Total	2	6	8

Outcomes for Stage 2 – Quarter 2 will be reported in the Quarter 3 Performance Report/