

## West Dunbartonshire Health and Social Care Partnership Performance Report 2023/24: Quarter 1 April to June 2023

This report will outline the HSCP's performance against the priorities set out in our new Strategic Plan 2023-2026: Improving Lives Together.

Local targets set in 2019/20 were retained in 2020/21 through to 2022/23 in light of the unpredictability of the pandemic. These targets have been reviewed alongside the development of the new Strategic Plan and reflect our aims to improve or sustain performance using 2022/23 as a baseline.

### Key Highlights/Challenges

In this first quarter the current year to date position as at 30th June 2023 is an overspend of £0.741m (1.59%) with the annual projected outturn position being a potential overspend of £2,983m (1.50%). Approximately 51% of savings in the agreed savings programme have been achieved or are on track.

Sustained improvement in waiting times for Child and Adolescent Mental Health Services. During the pandemic the percentage of children seen within 18 weeks fell as low as 23.5%. Significant efforts to tackle waiting lists meant that the service has been well over the target of 90% since February 2021 and has been achieving between 96% and 100% since that point. At June 2023 98.6% of children had been seen within target timescale with an average wait of 9 weeks.

Introduction of an Older People's Community Mental Health triage procedure underway to ensure appropriate referrals to psychological therapy treatments.

Additional Sheriff and Jury trials scheduled to reduce Covid backlog adding to the demand for Justice Social Work reports.








Slight improvement in MSK Physiotherapy waiting times.

While recruitment remains an issue across most service areas, some progress has been made to recruit to key posts. Within Mental Health Services 2 Band 7 Clinical Associates in Applied Psychology and a Clinical Psychology post have been appointed while approval of a new Band 7 Cognitive Behavioural Therapist role profile means it can now proceed to recruitment. Recruitment is well underway to fill vacant posts within Criminal Justice Social Work and the vacant Band 5 posts within MSK Physiotherapy have been filled.

A proportion of hospital data at NHS Greater Glasgow and Clyde level has yet to be verified and this, along with the timing of quarterly Ministerial Steering Group data submissions from Public Health Scotland, means we are unable as yet to report emergency admissions and unscheduled bed days from January 2023.





































## Strategic Plan Performance Indicators

Due to timing issues some data is not yet available and it should also be noted that Unscheduled Care data, i.e. hospital data, is subject to change historically.

PI Status		Short Term Trends	
	Alert – Target missed by 15% or more		Improving*
	Warning – Target narrowly missed		No Change
	OK – Target achieved		Getting Worse*
	Data Only – no target set		

\*Where an indicator is Data Only with no target set, the up and down arrows denote whether the number or percentage is increasing (up) or decreasing (down).

### Caring Communities

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
1	Percentage of carers who feel able to continue in their caring role when asked through their Adult Carer Support Plan	97%	95%			92.3%	
2	Percentage of carers who feel willing to continue in their caring role when asked through their Adult Carer Support Plan	98.5%	95%			92.3%	New PI
3	Number of Adult Carer Support Plans completed	67	N/A			40	
4	Balance of Care for looked after children: % of children being looked after in the Community	89%	90%			88.7%	
5	Number of Looked After Children	474	N/A			478	
6	Number of Looked After children looked after in a residential setting	52	N/A			50	
7	Number of Looked After children looked after at home with parents	63	N/A			65	
8	Number of Looked After children looked after by foster carers	117	N/A			113	
9	Number of Looked After children looked after in other community settings	242	N/A			250	
10	Child and Adolescent Mental Health Service (CAMHS) 18 weeks referral to treatment	98.6%	90%			99.1%	
11	Mean number of weeks for referral to treatment for specialist Child and Adolescent Mental Health Services	9	18			9	
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	53.2%	90%			41.4%	
13	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	Published September	90%	Not yet available	Not yet available	96.4%	

## Safe and Thriving Communities

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
14	Percentage of children on the Child Protection Register who have a completed and current risk assessment	100%	100%			100%	
15	Percentage of child protection investigations to case conference within 21 days	90.5%	95%			72.7%	
16	Number of Child Protection investigations	71	N/A			75	
17	Number of children on the Child Protection Register at end of reporting period (Excluding temporary and transfers in)	60	N/A			51	
18	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) ground	179	N/A			163	
19	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds	37	N/A			36	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	Not yet available	100%	Not yet available	Not yet available	100%	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	19	0			14	
22	Number of bed days lost to delayed discharge 18+ All reasons	3,581	2,781			3,631	
23	Number of bed days lost to delayed discharge 18+ Complex Codes	1,568	1,406			1,691	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	2,996	2,278			3,249	
25	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	1,387	983			1,410	
26	Number of clients receiving Home Care Pharmacy Team support	285	312			268	
27	Number of people receiving Telecare/Community Alarm service - All ages	1,856	1,942			1,942	
28	Number of people receiving homecare - All ages	1,429	1,200			1,416	
29	Number of weekly hours of homecare - All ages	10,535	9,000			10,386	
30	Percentage of people who receive 20 or more interventions per week	40.2%	40%		New PI	New PI	New PI
31	Percentage of homecare clients receiving personal care	99.2%	99%		New PI	New PI	New PI

## Equal Communities

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
32	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	63.3%	98%			71.7%	
33	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	92.2%	80%			83.5%	
34	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	41.7%	80%			48.4%	
35	Percentage of children from BME communities who are looked after that are being looked after in the community	88%	90%			86.2%	
36	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	67%	80%			50%	

## Healthy Communities

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
37	Number of emergency admissions 18+	Not yet available	2,295	Not yet available	Not yet available	Not yet available	
38	Number of emergency admissions aged 65+	Not yet available	1,134	Not yet available	Not yet available	Not yet available	
39	Emergency admissions aged 65+ as a rate per 1,000 population	Not yet available	67	Not yet available	Not yet available	Not yet available	
40	Number of unscheduled bed days 18+	Not yet available	17,735	Not yet available	Not yet available	Not yet available	
41	Unscheduled acute bed days (aged 65+)	Not yet available	12,156	Not yet available	Not yet available	Not yet available	
42	Unscheduled acute bed days (aged 65+) as a rate per 1,000 population	Not yet available	726	Not yet available	Not yet available	Not yet available	
43	Number of Attendances at Accident and Emergency 18+	Not yet available	5,005	Not yet available	Not yet available	5,219	
44	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	46%	90%			43%	
45	Prescribing cost per weighted patient (Annualised)	Not yet available	£187.73	Not yet available	Not yet available	£185.96	
46	Compliance with Formulary Preferred List	Not yet available	78%	Not yet available	Not yet available	77.65%	

## Financial Update

The current year to date position as at 30th June 2023 is an overspend of £0.741m (1.59%) and an annual projected outturn position being a potential overspend of £2.983m (1.50%) with the main reasons being the impact of continued significant demand for children and families residential and community placements, external older people's residential placements and increased volumes partially offset by ongoing recruitment and retention challenges. The potential overspend takes into account the progress on agreed savings programmes and £3.418m of expenditure to be drawn down from earmarked reserves. In this first quarter approximately 51% of savings have been achieved or are on track to be achieved, with the remainder requiring further action.

The September meeting of the IJB will consider the position to 31 July 2023 and a revised projection in line with the first quarter's projection.

The Chief Officer and Chief Financial Officer have had initial meetings with Heads of Service and operational managers to set-out the scale of the challenge and what is required from a recovery plan. The plan will have to mitigate the in-year pressure and be sufficiently robust to minimise the impact on future year budget setting. The recovery plan is likely to include a recommendation in relation to the further application of earmarked reserves with all efforts made to minimise the impact on un-earmarked reserves.

The main financial risks to the 2023/24 projected outturn position relate to:

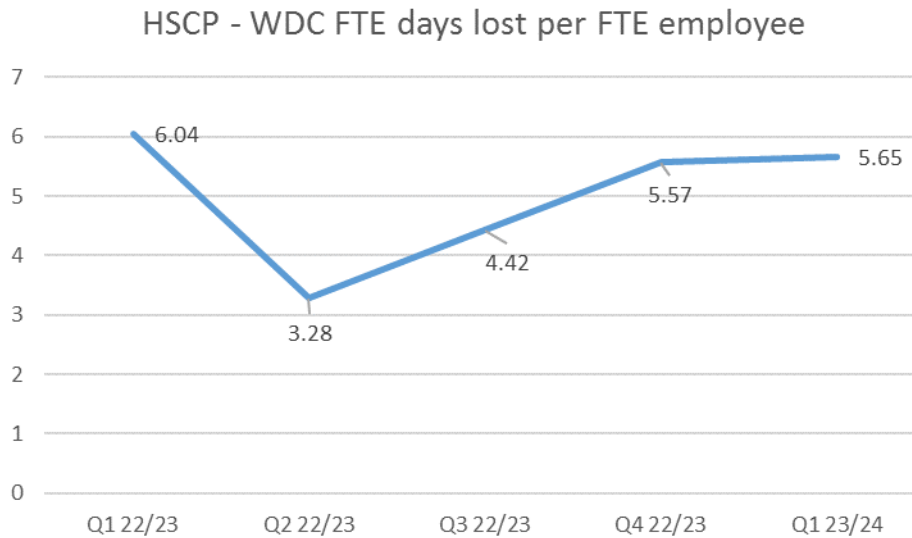
- Anticipated increases in demand for some key services, such as mental health, complex care packages and prescribing costs, and the uncertainty around pay award negotiations for Local Authority staff.
- While inflation has fallen, it is unclear at this time what impact this will have on the future of the UK Economy for the remainder of this financial year which may have a detrimental impact on public sector funding. Now that the HSCP is in the recovery phase of the Covid-19 pandemic the wider impacts of Britain's exit from the European Union are beginning to reveal themselves.
- The Minister for Social Care, Mental Wellbeing and Sport, announced in July that the proposed model for a National Care Service would be based on a shared accountability with Scottish Ministers, Local Government and NHS Boards. This effectively removes any probability of direct allocations to Integration Authorities and retains the current model of negotiating annual financial allocations with partners, who also face significant financial challenges and risks to financial sustainability.

Some additional financial information is included within the Exceptions Report below.

## Absence

West Dunbartonshire Council and NHS Greater Glasgow and Clyde report staff absence for West Dunbartonshire HSCP staff in different ways: WDC by Full Time Equivalent (FTE) lost per FTE employee each quarter and NHS by the percentage of rostered hours lost to staff absence.

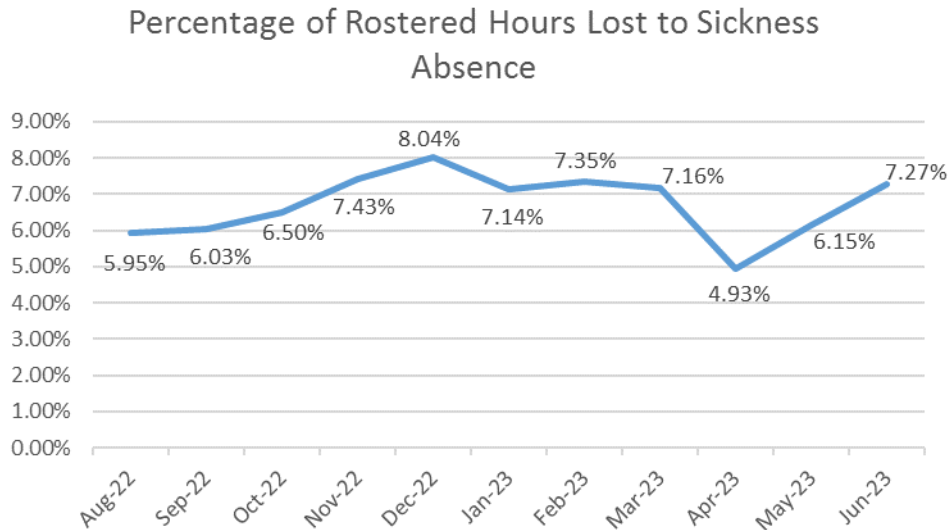
WDC HSCP staff absence was slightly higher in April to June 2023 than in the previous quarter but down on the same period in 2022.



Nationally, West Dunbartonshire Council (all non-teaching staff) absence is published by the Improvement Service through the Local Government Benchmarking Framework. Latest figures are for 2021/22 where WDC had a higher number of Full Time Equivalent (FTE) days lost per employee than the Scotland figure and had dropped from 8<sup>th</sup> lowest number of days in 2020/21 to the 23<sup>rd</sup> lowest (or 10<sup>th</sup> highest) in Scotland.

	WDC	Scotland	Ranking 1 - lowest to 32 - highest FTE days lost per employee
2019/20	11.4	11.9	13
2020/21	8.38	9.58	8
2021/22	13.28	12.19	23

NHS HSCP staff is reported monthly. While absence dipped in May 2023 to 4.93%, it rose again in June 2023 to 7.27%, slightly higher than the position at the end of the previous quarter in March 2023.



Nationally NHS Greater Glasgow and Clyde had the 2nd highest sickness absence rate out of the 14 Health Boards in Scotland in 2021/22 at 6.28%. The NHS Scotland figure was 5.69%.

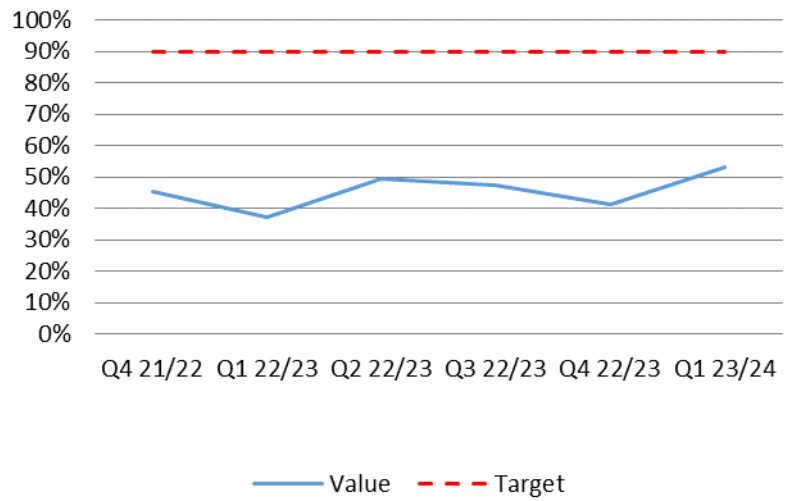
## West Dunbartonshire Health and Social Care Partnership Exceptions Reporting: Quarter 1 April to June 2023

### Performance Area: Psychological Therapies

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	53.2%	90%	🛑	⬆️	41.4%	

**% patients who started Psychological Therapies treatments within 18 weeks of referral**

Quarter	Value	Target
Q1 22/23	37.4%	90%
Q2 22/23	49.6%	90%
Q3 22/23	47.3%	90%
Q4 22/23	41.4%	90%
Q1 23/24	53.2%	90%



**Key Points:**

Recruitment and retention has impacted on waiting times for psychological therapies with some Band 6 vacancies being reconfigured to Band 7 posts to allow the PCMHT to recruit competitively with other services. Waiting times for older people within the Older People CMHT improved significantly when a vacant clinical psychology post was filled. However referral rates for OPCMHT have increased which is having an impact on the referral rates for psychological therapies.

There appears to be a change in the profile of referrals to OPCMHT, with more trauma, complex trauma and personality disorder presentations. The difficulties these patients have may require more sessions than were traditionally needed in Older People psychology treatments.

The Psychological Therapies budget includes Core HSCP Budget, NES funding contributions for trainee posts and Scottish Government Ring Fenced allocations including Action 15 and Mental Health Recovery and Renewal funding for access to Psychological Therapies. The latter being hosted centrally/Board wide with discussions ongoing on how to utilise this resource effectively to target local waiting times and increased demand.

In terms of the in scope local HSCP resource, Adult and Older People's Mental Health core budgets, including Psychological Therapies, are forecast to underspend by approximately £0.052m for financial year 2023/24. This includes underspend from current vacancies, skill mix of staffing profile to attract suitable candidates to vacancies and, where necessary, offset costs of bank and agency staff usage.

The projected underspend is in addition to the achievement of a non-recurring additional turnover savings target of £0.05m, (a non-recurring increased target of 1% in addition to recurring standard HSCP 3% Health turnover targets), set against 2023/24 Adult Mental Health budget to take into account current recruitment challenges and contribute towards an overall balanced budget position in year.



**Improvement Actions:**

There is an action plan for West Dunbartonshire PT which is reviewed monthly and reported to the NHSGG&C Board. It includes staff taking on additional sessions in PCMHT and weekly data cleansing. Discussions are underway with the centralised Digital Psychology service to identify what support they can give in addressing the longest waits.

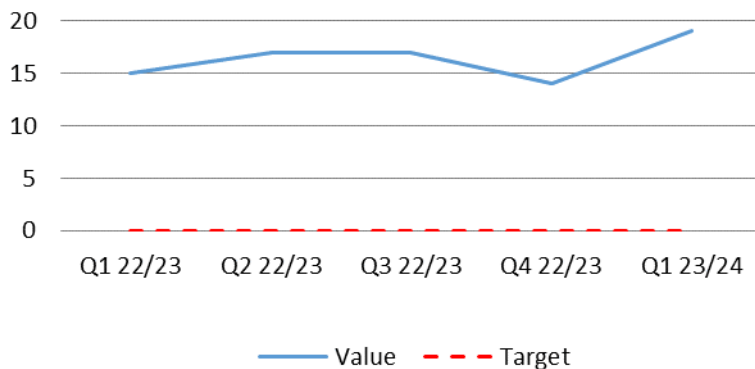
There has been an introduction of triage procedure underway for OPCMHT. This will ensure that only people who are suitable for psychological therapies are on the list to see the Cognitive Behavioural Therapist/ Clinical Psychologists. It will also identify people who are able to engage in remote delivery of therapy.

The Nurse Team Lead has set up Complex Case Discussion sessions. This encourages psychologically informed discussions, and has led to two members of staff requesting supervision/discussion with psychology to support the recommendations from the case discussions.

**Performance Area: Delayed Discharges**

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	19	0	🛑	⬇️	14	
22	Number of bed days lost to delayed discharge 18+ All reasons	3,581	2,781	🛑	⬆️	3,631	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	2,996	2,278	🛑	⬆️	3,249	
25	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	1,387	983	🛑	⬆️	1,410	

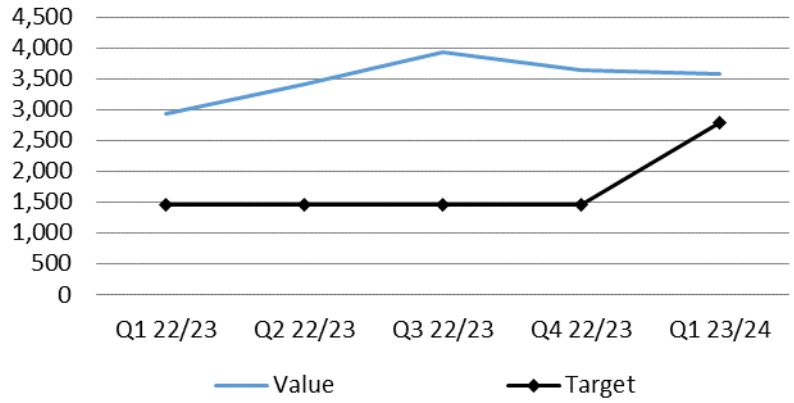
**Number of delayed discharges over 3 days (72 hours) non-complex cases**



Quarter	Value	Target
Q1 22/23	15	0
Q2 22/23	17	0
Q3 22/23	17	0
Q4 22/23	14	0
Q1 23/24	19	0

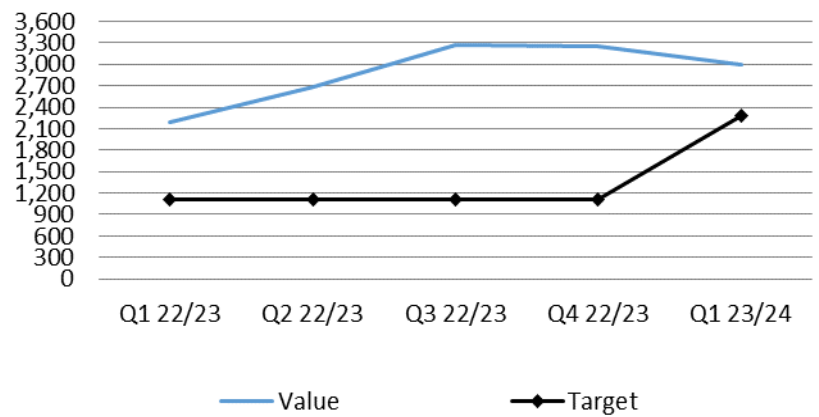
Quarter	Value	Target
Q1 22/23	2924	1460
Q2 22/23	3420	1460
Q3 22/23	3930	1460
Q4 22/23	3631	1460
Q1 23/24	3581	2781

**Bed Days Lost to Delayed Discharge 18+: All Reasons**



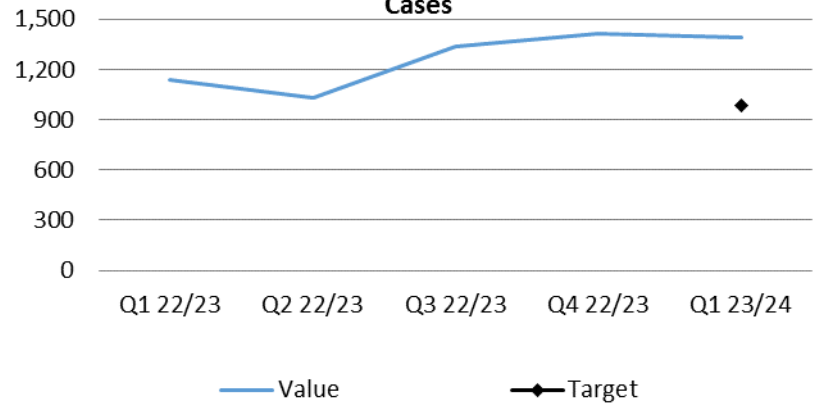
Quarter	Value	Target
Q1 22/23	2195	1104
Q2 22/23	2676	1104
Q3 22/23	3270	1104
Q4 22/23	3249	1104
Q1 23/24	2996	2278

**Bed Days Lost to Delayed Discharge 65+: All Reasons**



Quarter	Value	Target
Q1 22/23	1135	No target
Q2 22/23	1030	No target
Q3 22/23	1337	No target
Q4 22/23	1410	No target
Q1 23/24	1387	983

**Bed Days Lost to Delayed Discharge 65+: Complex Cases**



**Key Points:**

The range of improvement activities in place are beginning to demonstrate impact, with a steady decrease in total acute delays, monthly bed days lost and number of people delayed under Code 9 (Adults with Incapacity).

Recruiting Social Work staff remains a challenge within the team, and 2 agency Social Work staff are being utilised to ensure that assessments are completed timeously. This is being monitored closely and balanced against the turnover created by the existing vacancies.

There are also a number of Social Worker and Occupational Therapist vacancies across the Adult and Older People community teams, however these are being covered by agency staff and overtime where practicable. This has contributed to the improvements in the most recent Delayed Discharge figures, however they come at an additional cost on staffing budgets. This requires to be minimised by service managers and the current and projected financial impact is covered within regular financial performance reports to the HSCP Board.

**Improvement Actions:**

Community Hospital Discharge Team resource has been allocated to monitor the progression of Private and Local Authority Guardianship applications. This has ensured that key dates e.g. report submissions, applications to Court and granting of powers, are closely monitored. These improvement actions have demonstrated an impact and delays due to AWI (Code 9) have reduced from 21 at the end of March 2023 to 15 at the end of June 2023.

Earlier allocation to a Social Worker is also in progress, allowing assessments to commence ahead of the planned date of discharge, thereby reducing the risk of being coded a delay. The total number of Acute delayed discharges has shown a steady decline from 41 at the end of March 2023 to 34 at the end of June 2023. Monthly bed days lost for all delays has reduced from 1,319 in March 2023 to 1,214 in June 2023.

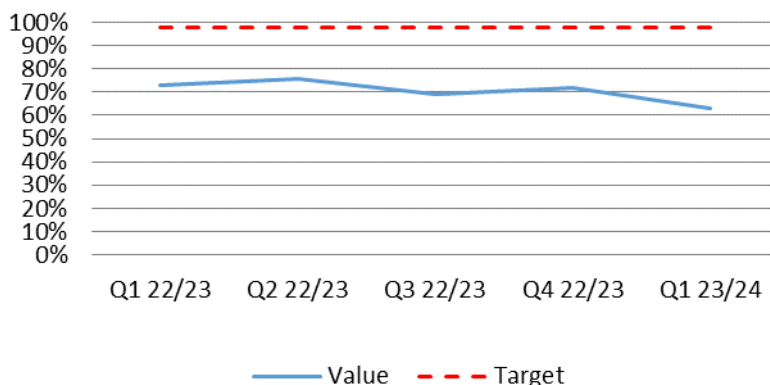
The Senior Social Worker is monitoring the time taken to complete My Life Assessments to reduce bed days lost and ensuring delay codes are updated on Trak timeously. Further improvement work continues, and the Community Hospital Discharge Team is currently targeting completion of My Life Assessments within a shorter time period, to further reduce the number of bed days lost.

**Performance Area: Criminal Justice Social Work**

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
32	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	63.3%	98%			71.7%	
34	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	41.7%	80%			48.4%	

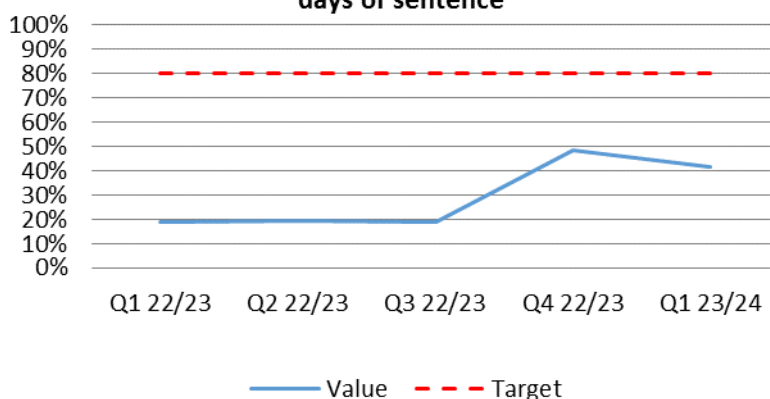
**% Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling**

Quarter	Value	Target
Q1 22/23	73.0%	98%
Q2 22/23	75.9%	98%
Q3 22/23	69.2%	98%
Q4 22/23	71.7%	98%
Q1 23/24	63.3%	98%



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

Quarter	Value	Target
Q1 22/23	19.0%	80%
Q2 22/23	19.4%	80%
Q3 22/23	18.8%	80%
Q4 22/23	48.4%	80%
Q1 23/24	41.7%	80%



Please note Q1-3 2022/23 figures have been updated from those previously reported due to the availability of more complete data.

**Key Points:**

While there are vacant posts, some being covered by agency staff, the overall projection for Criminal Justice employee costs is an overspend of circa £0.196m. This is primarily due to the Scottish Government section 27 grant remaining at the same level for 3 years requiring the service to cover pay inflation by additional turnover and other management actions.

Quarter 1 figures reflect the high levels of long term sickness experienced by the Justice Social Work Service.

Additional Sheriff and Jury trials scheduled (9 trials every fortnight, to reduce Covid backlog) are adding to the demand placed on the team for Justice Social Work reports. There were requests for 228 Justice Social Work Reports to Courts between April and June 2023.

Figures indicate an average of 63.3% for Quarter 1 Justice Social Work Reports completed. For every report not completed a letter is sent to Court outlining the rationale for the requested report not having

been sent. Of the 36.7% of letters sent to Court, 90.3% of these were due to external factors, i.e. service user not making themselves available for interview.

The number of Community Payback Orders imposed in Quarter 1 was 90 with 72 of those having an unpaid work requirement. Of the 90 imposed orders, 92.2% of individuals attended an induction session within 5 working days of sentence. The delay in attending work placements within 7 days is due to staff sickness with existing squads at capacity. Every service user made subject to a statutory Community Payback Order at Dumbarton Sheriff Court is seen within 24 hours of the Court imposing the order.

**Improvement Actions:**

Recruitment is well underway to fill vacant posts. Recruitment has been challenging with some posts being re-advertised. Agency staff have been recruited on a short term basis to alleviate pressure on existing staff and support meeting national standards for Justice Social Work processes.

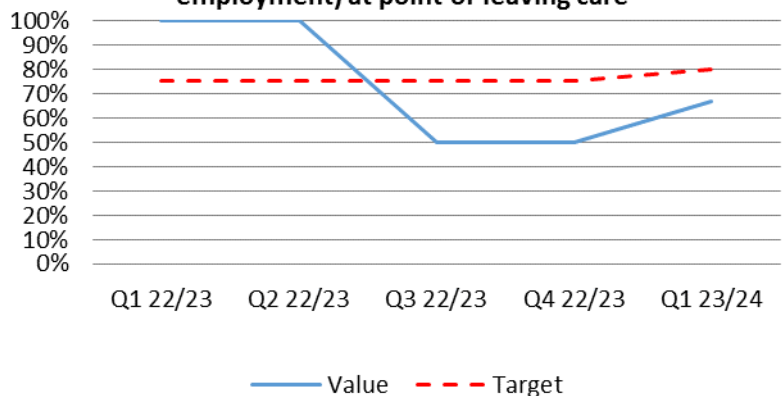
Procedures have been improved to capture service users made subject to statutory orders in outlying Courts.

Justice Social Workers are being trained in the new abbreviated sentencing report as part of a national roll out.

**Performance Area: Looked After Children**

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
36	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	67%	80%			50%	

**Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care**



Quarter	Value	Target
Q1 22/23	100%	75%
Q2 22/23	100%	75%
Q3 22/23	50%	75%
Q4 22/23	50%	75%
Q1 23/24	67%	80%

**Key Points:**

This indicator is based on only those young people who were looked after away from home in residential, foster or other community placements. It does not include young people looked after at home with parents, with relatives or friends, or in kinship care. It therefore involves very small numbers which means that percentages will fluctuate more significantly. Publication of these numbers could make individuals potentially identifiable.

The Financial Performance Report presented to the August IJB provided details on the continuing increases in Looked After and Accommodated Children since 2016. The current projected overspend contained within the September IJB update is £1.970m for residential schools and external accommodation. The number of placements in residential schools has increased by 10 since the budget was set. The average costs of a placement is £274k per year: the split is 72% (£197k) HSCP and 28% Education (£77k).

Community placement is forecasting an overspend of £431k. This is due to unachieved savings of £306k and the number of external foster placements increasing to 68. The average cost of an external foster placement is £50k compared to £20k for a WDC provided foster placement.

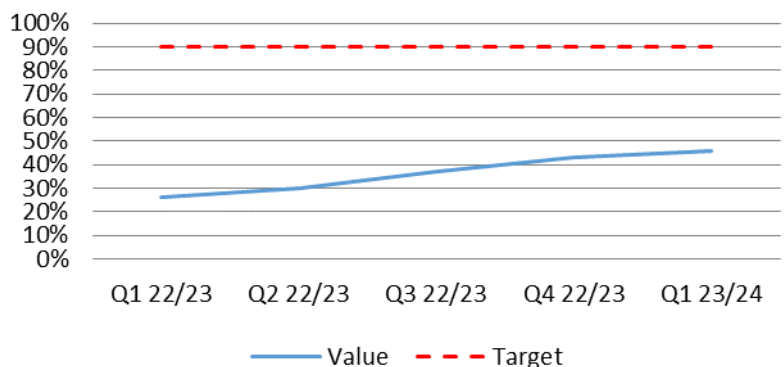
**Improvement Actions:**

The HSCP’s Throughcare and Aftercare service continue to support care experienced young people to access education, employment and training alongside a range of supports in relation to housing, finances and developing confidence and lifeskills. Work is planned to compare the outcomes for all looked after children leaving each type of care setting.

**Performance Area: MSK Physiotherapy**

Ref	Performance Indicator	Q1 2023/24				Q4 2022/23	Trend over 8 Qtrs
		Value	Target	Status	Short Trend	Value	
44	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	46%	90%			43%	

**% of patients seen within 4 weeks for MSK physiotherapy services**



Quarter	Value	Target
Q1 22/23	26%	90%
Q2 22/23	30%	90%
Q3 22/23	37%	90%
Q4 22/23	43%	90%
Q1 23/24	46%	90%

**Key Points:**

There has been an increase in the % seen within the 4 week target in Quarter 1. However this relates to the proportion of urgent referrals at any given time. There will be no significant change in the % seen within target until routine waiting times reduce to closer to the 4 weeks. Trajectory data indicates that this will be achieved by June 2024, assuming that staffing levels, capacity and demand remain static.

Routine waiting times have remained static at 12 weeks despite peak annual leave time at Easter. The service halved routine waiting times from 24 weeks to 12 weeks within 2022/23 and continues to address routine waiting times as part of a priority project (see below).

Demand/referrals to the service have continued to rise from March to June: over 6,300 referrals across Greater Glasgow and Clyde (GGC) in June 23.

There has been an ongoing reduction in the number of patients waiting over the 4 weeks target during Quarter 1, following on from the trend in Quarter 4 2022/23. Across GGC this figure reduced from 8,938 to 8,149 in Quarter 1.

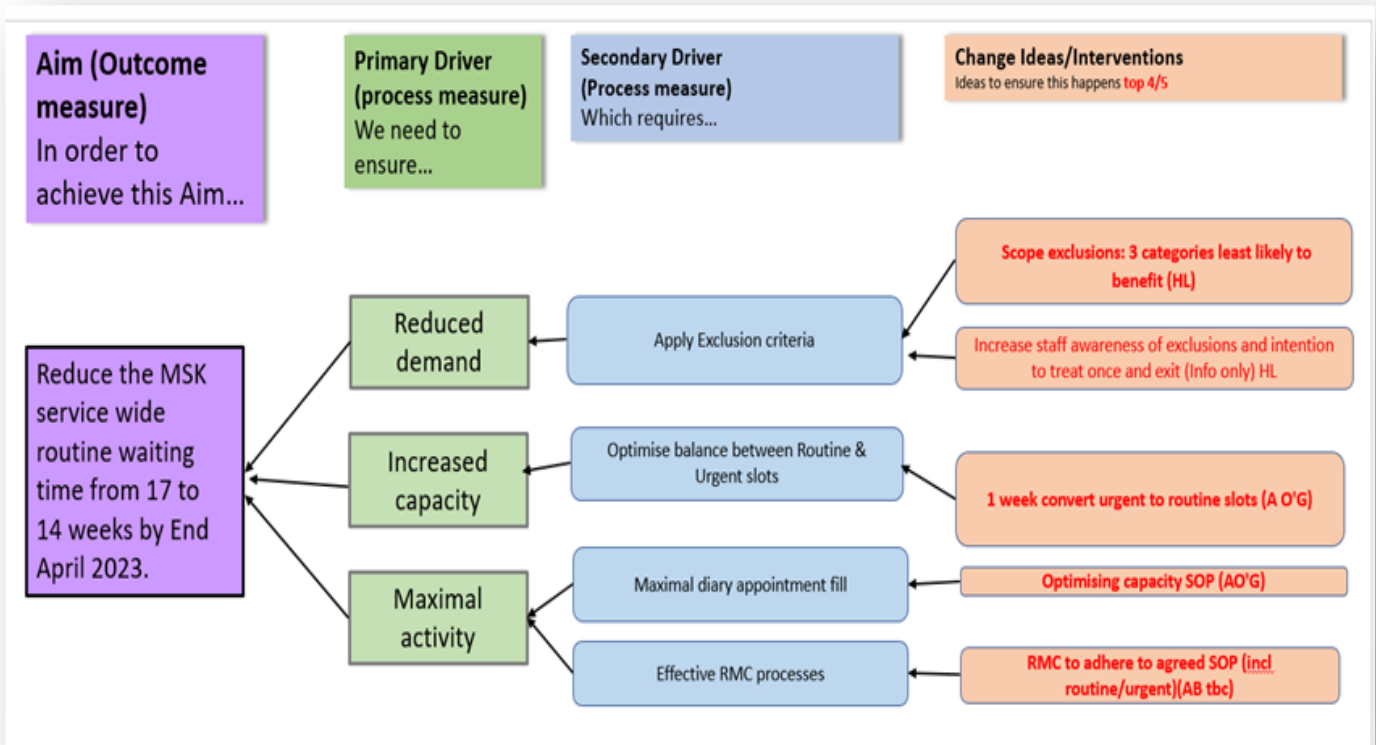
This quarter has seen an increase in New Patient (NP) capacity and return activity, primarily due to an ongoing recruitment drive to fill vacancies. Capacity has also been boosted by ongoing employment of agency staff to temporarily fill vacancies, address sickness absence and also address waiting times. NP activity peaked at 5,728 NP appointments in June and return activity at 15,492 across GGC. Remobilisation of class provision has increased return appointment activity.

**Improvement Actions:**

The service is not currently meeting AHP Scottish Government MSK waiting times target of 4 weeks, however there is a programme of ongoing improvement work supported by additional funding.

- Continued application of Earmarked Reserves funding to support ongoing improvement work and address routine waiting times, including employment of temporary agency staff, additional recruitment of 1.0 wte Band 5 and 2.0 wte Band 6 MSK Practitioners, and funding of overtime and extra hours where existing staff are willing to offer additional time, will result in a forecast drawdown from MSK Earmarked Reserve of circa £0.462m in 2023/24, inclusive of Digital Access and Training planned spend.
- The MSK service is currently on target to meet increased total turnover target of 9%, which includes a non- recurring increased target of 5%, (£0.362m), for 2023/24, reflective of the current recruitment challenges within the profession.

Quality Improvement methodology has been followed to address routine waiting times. Driver diagram is below.



Priority project work continues. The test of change, changing almost all urgent NP appointments to routine NP appointments, will be repeated in June. This has been successful in reducing the routine waiting times on the previous 2 occasions. The service will continue to monitor any breach on urgent referrals being seen within the 4 week target.

A Standard Operating Procedure has been produced and continues to be adopted to maximise efficiency: local administrative staff to merge any two unutilised return slots in clinicians’ diaries and convert to NP slots. This created an additional 120 NP appointments across the Board area in April 23; 120 in May and 176 in June.

The MSK service is scoping out the number of referrals where the evidence base states that the patient is “less likely” to benefit from MSK. This relates to three categories of patients i.e. those patients who have been to MSK in the last year with the same condition; those patients who have been through the Pain Management Service with the same condition; and those patients with widespread body pain as will not truly be MSK pathology. This is with a view to focusing service provision on those who are most likely to benefit.

Recruitment challenges remain a national issue for the profession, however despite this, the service has been successful in filling the vacant Band 5 posts.

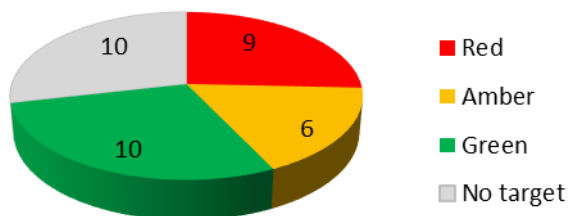


The service is continuing with planned drawdown from Earmarked Reserves to employ agency staff to reduce waiting times.

The priority project group will meet over the next month to plan next change ideas to be piloted.

### Summary of Strategic Plan Key Performance Indicators

Quarter 1: April to June 2023 (Partial Data)



### West Dunbartonshire Health and Social Care Partnership Complaints Reporting: Quarter 1 April to June 2023

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 identifying good practice and areas for improvement on a local and national basis.

SPSO Indicator	Measure	Q1 22/23	Q2 22/23	Q3 22/23	Q4 22/23	Q1 23/24
2	Number of Stage 1 complaints (whether escalated to Stage 2 or not)	13	23	16	29	47
	Number of complaints direct to Stage 2	7	11	13	9	16
	Total number of complaints	20	34	29	38	63
3	% closed within timescale - Stage 1	Not available				
	% closed within timescale - direct to Stage 2	43%	36%	23%	33%	31%
	% closed within timescale - escalated to Stage 2	N/A	N/A	N/A	N/A	N/A
4	Average response time - Stage 1	Not available				
	Average response time - direct to Stage 2	29	22	25	25	24
	Average response time - escalated to Stage 2	N/A	N/A	N/A	N/A	N/A

## Indicator 5: Outcomes of Complaints

### Stage 2 – Quarter 1 2023/24

Outcome	Model Complaints Handling Procedure		% of total
	NHSGGC	WDC*	
Fully Upheld	0	0	0%
Partially Upheld	1	6	47%
Not Upheld	4	4	53%
Unsubstantiated	0	0	0%
Total	5	10	

\*1 complaint is still ongoing

## Themes of Complaints

