# West Dunbartonshire Health & Social Care Partnership

# West Dunbartonshire Health and Social Care Partnership Performance Report 2023/24: Quarter 3 October to December 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**

Higher levels of sickness absence among both WDC and NHS GGC employees than in Quarter 2 and on the same period in 2022/23.

An almost 4% increase in the number of looked after children in this quarter compared with the previous quarter and Quarter 3 in 2022/23.

All children waited less than 18 weeks to start treatment with Child and Adolescent Mental Health Services (CAMHS), with an average wait of 3 weeks.

The target of 90% of people receiving psychological therapies treatment within 3 weeks of referral was missed by just under 20% however this was a 6% improvement on the previous quarter and a 23% improvement on the same period last year.

Funding from an unfilled Primary Care Mental Health Team post agreed for a Cognitive Behaviour Therapy practitioner to work with consultants across the 3 Community Mental Health Teams targeting the longest waits.

The number of bed days lost to delayed discharge for complex cases, where predominantly Adults with Incapacity factors are involved, was 25.8% below our local target and 38.7% lower than in October to December 2022.

Work underway to further develop the process of Initial Referral Discussion (IRD) to reflect the updated National Child Protection Guidance recommendation in respect of IRD as a process within which multiagency decision making and oversight with regard to initial child protection decision making takes place.

Interim Quarter 2 unscheduled acute bed day numbers for those aged 65 and over below our local target which is set at a 10% reduction on 2022/23 baseline figures. This may change however when fully validated figures are received from Public Health Scotland.

Collaborative work between WDHSCP, Citizen's Advice Bureau and Carers of West Dunbartonshire

contributing to public engagement sessions on Power of Attorney (POA) led by the Citizen's Advice Bureau in Clydebank Shopping Centre and Asda Dumbarton on National POA Day, 23<sup>rd</sup> November 202

# **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						
	Warning	-	No Change				
<b>②</b>	ок	Getting Worse*					
?	Unknown		re an indicator is Data Only with no set, the up and down arrows				
2	Data Only		e whether the number or percentage easing (up) or decreasing (down).				

Car	ing Communities							
Ref	Performance Indicator		Q3 20	23/24		Q2 2023/24	Q3 2022/23	Trend over 8
Kei	renormance indicator	Value	Target	Status	Short Trend	Value	Value	Qtrs
1	Percentage of carers who feel able to continue in their caring role when asked through their Adult Carer Support Plan	93.5%	95%			93.2%	95.3%	
2	Percentage of carers who feel willing to continue in their caring role when asked through their Adult Carer Support Plan	93.5%	95%		•	95.5%	93.3%	
3	Number of Adult Carer Support Plans completed	48	N/A		1	46	43	
4	Balance of Care for looked after children: % of children being looked after in the Community	88.7%	90%		1	88.3%	89.9%	
5	Number of Looked After Children	494	N/A			477	476	
6	Number of Looked After children looked after in a residential setting	56	N/A			56	48	
7	Number of Looked After children looked after at home with parents	67	N/A		1	65	72	
8	Number of Looked After children looked after by foster carers	123	N/A		1	119	118	
9	Number of Looked After children looked after in other community settings	248	N/A		1	237	238	
10	Child and Adolescent Mental Health Service (CAMHS) 18 weeks referral to treatment	100%	90%			100%	100%	
11	Mean number of weeks for referral to treatment for specialist Child and Adolescent Mental Health Services	3	18			6	8	
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	70.4%	90%			64.3%	47.3%	

Ref	Performance Indicator		Q3 20	23/24		Q2 2023/24	Q3 2022/23	Trend over 8
Rei		Value	Target	Status	Short Trend	Value	Value	Qtrs
13	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	Published March 2024	90%	Not yet available	Not yet available	98.2%	93.7%	

Saf	e and Thriving Communities							
Def	Deufermanne Indianter		Q3 20	23/24		Q2 2023/24	Q3 2022/23	Trend over 8
Ref	Performance Indicator	Value	Target	Status	Short Trend	Value	Value	Qtrs
14	Percentage of children on the Child Protection Register who have a completed and current risk assessment	100%	100%	<b>②</b>	-	100%	100%	
15	Percentage of child protection investigations to case conference within 21 days	78.6%	95%			71.4%	85.7%	
16	Number of Child Protection investigations	60	N/A		1	57	58	
17	Number of children on the Child Protection Register at end of reporting period (Excluding temporary and transfers in)	44	N/A		•	45	38	
18	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) ground	Not yet available	N/A		Not yet available	158	258	
19	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds	Not yet available	N/A		Not yet available	41	39	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	67%	100%		•	55%	100%	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	15	0			18	17	
22	Number of bed days lost to delayed discharge 18+ All reasons	3,157	2,781		1	3,006	3,930	
23	Number of bed days lost to delayed discharge 18+ Complex Codes	1,043	1,406		1	770	1,702	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	2,476	2,278		•	2,115	3,270	
25	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	852	982	<b>②</b>	•	668	1,337	
26	Number of clients receiving Home Care Pharmacy Team support	444	312		1	445	281	
27	Number of people receiving Telecare/Community Alarm service - All ages	1,880	1,942		•	1,863	1,903	
28	Number of people receiving homecare - All ages*	1,415	1,200		1	1,440	1,436	
29	Number of weekly hours of homecare - All ages*	10,251	9,000		•	10,408	10,552	

Ref	Performance Indicator		Q3 20	23/24		Q2 2023/24	Q3 2022/23	Trend over 8
		Value	Target	Status	Short Trend	Value	Value	Qtrs
30	Percentage of people who receive 20 or more interventions per week	40.4%	40%		•	40.6%	New PI	
31	Percentage of homecare clients receiving personal care	99.5%	99%		1	99.4%	New PI	

<sup>\*</sup>Reablement care at home has begun to be identified separately within systems during Quarter 3 2020/24: 124 hours of reablement care at home was provided to 37 people during the reporting week.

Equ	al Communities							
Dof	Performance Indicator		Q3 20	23/24		Q2 2023/24	Q3 2022/23	Trend over 8
Ref		Value	Target	Status	Short Trend	Value	Value	Qtrs
32	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	67.9%	98%			66.9%	69.2%	
33	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	71.4%	80%		•	76.9%	82.6%	
34	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	57.1%	80%		•	21.4%	18.8%	
35	Percentage of children from BME communities who are looked after that are being looked after in the community	87.1%	90%			85.7%	92%	
36	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	No children in age range left care	80%	N/A	N/A	100%	50%	

Hea	Healthy Communities										
Dof	Performance Indicator		Q3 20	23/24		Q2 2023/24	Q3 2022/23	Trend over 8			
Ref		Value	Target	Status	Short Trend	Value	Value	Qtrs			
37	Number of emergency admissions 18+	Not yet available	1,990	Not yet available	Not yet available	2,332	2,181				
38	Number of emergency admissions aged 65+	Not yet available	1,067	Not yet available	Not yet available	1,204	1,182				
39	Emergency admissions aged 65+ as a rate per 1,000 population	Not yet available	63	Not yet available	Not yet available	70.2	69				
40	Number of unscheduled bed days 18+	Not yet available	20,094	Not yet available	Not yet available	20,696	22,750				
41	Unscheduled acute bed days (aged 65+)	Not yet available	14,566	Not yet available	Not yet available	14,309	16,706				
42	Unscheduled acute bed days (aged 65+) as a rate per 1,000 population	Not yet available	850	Not yet available	Not yet available	834.7	974.6				
43	Number of Attendances at Accident and Emergency 18+	Not yet available	5,005	Not yet available	Not yet available	6,118	5,311				

Ref	Performance Indicator		Q3 20	23/24		Q2 2023/24	Q3 2022/23	Trend over 8
		Value	Target	Status	Short Trend	Value	Value	Qtrs
44	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	40%	90%		•	44%	37%	
45	Prescribing cost per weighted patient (Annualised)	Not yet available	£187.73	Not yet available	Not yet available	£189.66	£193.76	
46	Compliance with Formulary Preferred List	Not yet available	78%	Not yet available	Not yet available	73.09%	77.79%	

Please find July to September 2023 data below for indicators we were unable to report on in our Quarter 2 2023/24 Performance Report. Public Health Scotland have provided an interim submission for unscheduled care (indicators 37-43) for April – September 2023 however these figures will be subject to change.

Car	Caring Communities									
Ref	Performance Indicator		Q2 20	23/24		Q1 2023/24	Q2 2022/23	Trend over 8 Qtrs		
	Performance Indicator	Value	Target	Status	Short Trend	Value	Value			
13	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	98.2%	90%	<b>②</b>	•	97.8%	97.4%			

Saf	e and Thriving Communities							
D-f	Danfarra and Tadioskar		Q2 20	23/24		Q1 2023/24	Q2 2022/23	Trend over 8
Ref	Performance Indicator	Value	Target	Status	Short Trend	Value	Value	Qtrs
18	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) ground	157	N/A	<b>2</b>	•	177	159	
19	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds	41	N/A	<b>*</b>	•	36	35	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	55%	100%		1	61%	67%	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	18	0		1	19	17	
22	Number of bed days lost to delayed discharge 18+ All reasons	3,006	2,781		1	3,581	3,420	
23	Number of bed days lost to delayed discharge 18+ Complex Codes	770	1,406		1	1,568	1,337	

Heal	thy Communities							
Ref	Performance Indicator		Q2 20	23/24		Q1 2023/24	Q2 2022/23	Trend over 8
Kei	renormance indicator	Value	Target	Status	Short Trend	Value	Value	Qtrs
37	Number of emergency admissions 18+	2,332	1,990			2,390	2,185	
38	Number of emergency admissions aged 65+	1,204	1,066		1	1,224	1,177	
39	Emergency admissions aged 65+ as a rate per 1,000 population	70.2	62		1	71.4	68.7	
40	Number of unscheduled bed days 18+	20,696	20,094			22,286	22,558	
41	Unscheduled acute bed days (aged 65+)	14,309	14,566	<b>②</b>	1	16,298	16,061	
42	Unscheduled acute bed days (aged 65+) as a rate per 1,000 population	834.7	850		1	950.8	936.9	
43	Number of Attendances at Accident and Emergency 18+	6,118	5,005		•	5,937	5,936	
45	Prescribing cost per weighted patient (Annualised)*	£189.66	£187.73		1	Not available	£172.20	
46	Compliance with Formulary Preferred List*	73.09%	78%		•	Not available	77.79%	

<sup>\*</sup>Quarter 1 April-June 2023 not available due to system issues but will be reflected in the annual figure 2023/24.

# **Financial Update**

The HSCP Board meeting on 20 February 2024 considered the following financial papers:

- 2023/24 Financial Performance Report as at Period 9 (31 December 2023)
- 2024/25 Annual Budget Setting Update (Revenue Estimates) Report

The financial performance report provided an update on the position to 31 December 2023 and a revised projection to 31 March 2024 based on Quarter 3 activity and performance.

The financial projection based on Quarter 3 data reported an overspend of £1.585m (0.79%) after recovery planning measures of £1.932m are accounted for. In addition to the cost of the Social Care unfunded pay award of £1.558m there continues to be financial pressures in relation to the ongoing demand for supporting children and young people (in both community placements and other residential accommodation), care at home and prescribing, however these pressures are mainly offset by various service underspends leaving a residual net overspend of £0.027m.

West Dunbartonshire Council will meet on 6 March 2024 where it is expected that they will confirm whether a share of the Scottish Government funding awarded to Local Authorities to fund the additional costs arising from the settlement of the 2023/24 pay award will be passed to the HSCP in line with the principle in which the funding was allocated.

Out with the pay award funding update the Senior Management Team continue to make progress to mitigate elements of this pressure through weekly scrutiny of all vacancies, a programme of reviews across all care packages and, where appropriate, will consider the application of unearmarked and further earmarked reserves.

The 2024/25 budget setting update provided an update on the current budget gaps for 2024/25 to 2026/27 along with details of a small number of management adjustments and savings options submitted for approval at this time as detailed below.

Dudget Con Analysis	2024/25	2025/26	2026/27
Budget Gap Analysis	£m	£m	£m
Social Care Budget Gap	8.234	11.575	14.997
Options Submitted	0.510	0.510	0.510
Revised Social Care Budget Gap	7.724	11.065	14.487
Health Care Budget Gap	2.201	3.340	4.535
Options Submitted	0.382	0.095	0.095
Revised Health Care Budget Gap	1.819	3.245	4.440
HSCP Budget Gap	10.435	14.915	19.532
Options Submitted	0.892	0.605	0.605
Revised HSCP Budget Gap	9.543	14.310	18.927

The HSCP Board will meet on 28 March to consider the updated financial projection for 2023/24 and set the 2024/25 budget. Recommendations on further options to close the remaining 2024/25 budget gap will be provided which are likely to include:

- Further management adjustments and savings options
- Smoothing of the superannuation saving
- Application of reserves where appropriate

#### 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 the highest since April 2022 at 6.2 working days lost per Full Time Equivalent (FTE) employee.

HSCP - WDC FTE days lost per FTE employee



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 23rd lowest (or 10<sup>th</sup> highest) in Scotland.

			Ranking 1 - lowest to 32 - highest FTE days lost per
	WDC	Scotland	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 absence is reported monthly. November and December 2023 saw the highest absence rates since October 2022 with 8.24% and 7.65% of rostered hours lost respectively.

Percentage of Rostered Hours Lost to Sickness Absence



Latest available data at national and health board level is for July 2023 where West Dunbartonshire's figure is higher than both NHS Scotland (5.78%) and NHS Greater Glasgow (5.96%).

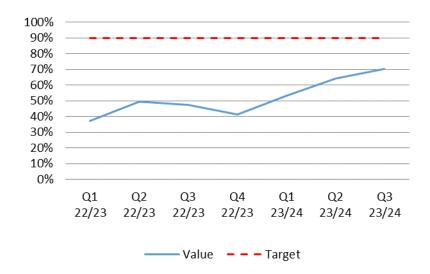
# West Dunbartonshire Health and Social Care Partnership Exceptions Reporting: Quarter 3 October to December 2023

## **Performance Area: Psychological Therapies**

Ref	Performance Indicator	Q3 2023/24				Q2 2023/24	Q3 2022/23	Trend over 8
Kei	Performance Indicator	Value	Target	Status	Short Trend	Value	Value	Qtrs
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	70.4%	90%		1	64.3%	47.3%	

#### % 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%
Q2 23/24	64.3%	90%
Q3 23/24	70.4%	90%



#### **Key Points:**

The percentage of people starting treatment within 18 weeks has seen an improving trend since March 2023 and is significantly higher during October to December 2023 than in the same period in 2022. Of the 108 people starting treatment during the quarter, 76 started within 18 weeks.

As at 31<sup>st</sup> December 2023 there were 187 people waiting to start treatment: 88 had been waiting less than 12 weeks; 141 waiting less than 18 weeks.

#### **Improvement Actions:**

A Band 7 Cognitive Behaviour Therapy practitioner from bank staff will be funded for 12 months, 4 days per week, from an unfilled Primary Care Mental Health Team post. This practitioner will work with consultants across the 3 Community Mental Health Teams targeting all the longest waits. The aim will be to reduce the numbers to a manageable position for the local teams after the 12 month period.

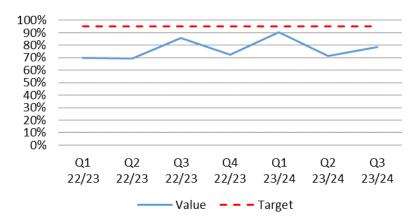
#### **Performance Area: Child Protection**

Ref	Performance Indicator		Q3 2023/24			Q2 2023/24	Q3 2022/23	Trend over 8
Kei		Value	Target	Status	Short Trend	Value	Value	Qtrs
15	Percentage of child protection investigations to case conference within 21 days	78.6%	95%		1	71.4%	85.7%	

#### Quarter Value **Target** Q1 22/23 70.0% 95% Q2 22/23 69.6% 95% Q3 22/23 85.7% 95% Q4 22/23 72.7% 95%

## 90.5% 95% Q1 23/24 Q2 23/24 71.4% 95% Q3 23/24 78.6% 95%

#### % of Child Protection investigations to Case Conference within 21 days



#### **Key Points:**

There were 14 case conferences in Quarter 3 and 11 of these were held within the 21 day timescale. Reporting has been amended from January 2024 to reflect the new national guidance of 28 days.

#### **Improvement Actions:**

Since January 2024 timescales have been extended to reflect revised timescales within the updated National Child Protection Guidance. In addition, work is underway to further develop the process of Initial Referral Discussion (IRD) to reflect the National Guidance recommendation in respect of IRD as a process within which multi-agency decision making and oversight with regard to initial child protection decision making takes place. This, once agreed locally, will replace the 10-day discussion as the means of agreeing progression to child protection planning meeting from child protection investigation.

Further work to develop the IRD, facilitating more effective reporting of data and trends within the initial child protection decision making period, is also being discussed as part of the wider work to embed IRD as a process within the system. This includes additional detail during the initial child protection investigation and decision making stage regarding:

- Child protection medicals
- Medical information sought from GPs
- Referral to Scottish Children's Reporter Administration (SCRA)

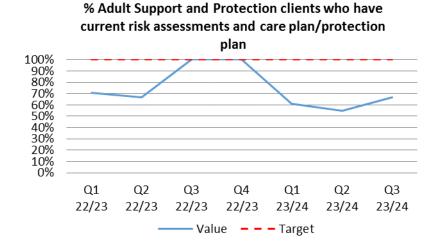
Joint Investigative Interview (JII)/Scottish Child Interview Model (SCIM) interview required: SCIM
data providing information in respect of the conversion rates to a SCIM being undertaken as
oppose to a JII, which will further evidence capacity within the system for SCIM

Importantly this also includes a change to the outcome "single agency social work assessment" on the IRD paperwork, as a child protection risk assessment is always a multi-agency risk assessment.

#### **Performance Area: Adult Protection**

Ref	Performance Indicator		Q3 2023/24			Q2 2023/24	Q3 2022/23	Trend over 8	
Rei	Performance Indicator	Value	Target	Status	Short Trend	Value	Value	Qtrs	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	67%	100%		•	55%	100%		

Quarter	Value	Target
Q1 22/23	71%	100%
Q2 22/23	67%	100%
Q3 22/23	100%	100%
Q4 22/23	100%	100%
Q1 23/24	61%	100%
Q2 23/24	55%	100%
Q3 23/24	67%	100%



#### **Key Points:**

8 of the 12 Adult Support and Protection clients during the Quarter had clearly recorded current risk assessments and care plan/protection plans. Some evidence existed within other electronic recordings for the others however the required documentation did not exist or had failed to be populated.

#### **Improvement Actions:**

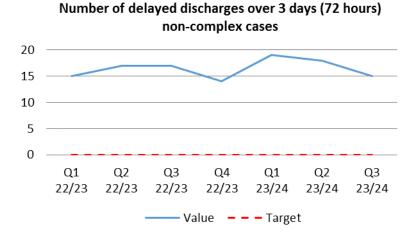
All potential chairs of Adult Support and Protection Case Conferences have been emailed by the Head of Service to remind of the requirement to ensure that the Protection Plan is recorded in CareFirst at the point of confirming Case Conference minutes. As chairs they are responsible for ensuring that minutes are signed off, further Case Conferences are arranged and Protection Plans are recorded.

Automated reports will be set up to identify unpopulated forms.

## **Performance Area: Delayed Discharge**

_	Ref	Dayfaymanga Indicator		Q2 20	23/24		Q1 2023/24	Q2 2022/23	Trend over 8
r	Kei	Performance Indicator	Value   Target   Status   Short Trend   Value   Value   Value				Qtrs		
	<i>,</i> ,	Number of delayed discharges over 3 days (72 hours) non-complex cases	18	0		1	19	17	

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
Q2 23/24	18	0
Q3 23/24	15	0



#### **Key Points:**

The Scottish Government's aspirational target is that no one with a non-complex discharge should experience a delay of more than 3 days. This figure is a snapshot as at the monthly census point.

#### **Improvement Actions:**

Scrutiny continues to be applied to all those delayed past their planned date of discharge with the HSCP Community Hospital Discharge Team and Head of Service. Recent quality improvement activity includes a test of change with older adult wards at Gartnavel General Hospital, with a multi-disciplinary focus on all WDHSCP inpatients to ensure pathways of care were appropriate and early discharges encouraged. An enhanced delays dashboard has been developed which presents HSCP specific delays information around the reasons for delays.

While numbers of non-complex delays have exceeded the target, the number of bed days lost to delayed discharge for complex cases, where predominantly Adults with Incapacity factors are involved, was 25.8% below our local target and 38.7% lower than in October to December 2022.

WDHSCP, Citizen's Advice Bureau and Carers of West Dunbartonshire have been working collaboratively to identify and support people to put in place a Power of Attorney. This ensures that, if they no longer have the mental capacity to make decisions about their health or finances, they have the relevant paperwork in place so that someone that knows and cares about them can make these decisions on their behalf.

On National POA day, on 23rd November 2023, the Citizen's Advice Bureau led on public engagement sessions within Clydebank Shopping Centre and Asda Dumbarton.

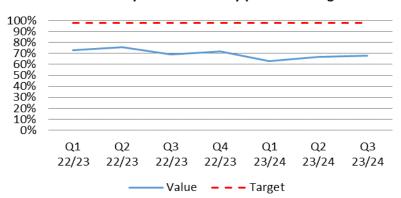
#### **Performance Area: Criminal Justice Social Work**

Ref	Performance Indicator	Q3 2023/24				Q2 2023/24	Q3 2022/23	Trend over 8
Kei	renormance indicator	Value	Target	Status	Short Trend	Value	Value	Qtrs
32	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	67.9%	98%			66.9%	69.2%	
34	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	57.1%	80%			21.4%	18.8%	

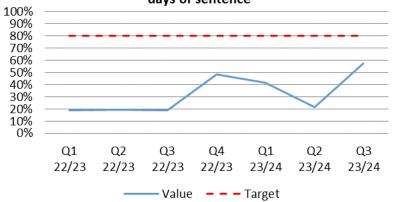
#### Quarter Value **Target** Q1 22/23 73.0% 98% Q2 22/23 75.9% 98% Q3 22/23 69.2% 98% 71.7% Q4 22/23 98% Q1 23/24 63.3% 98% Q2 23/24 66.9% 98% Q3 23/24 67.9% 98%

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%
Q2 23/24	21.4%	80%
Q3 23/24	57.1%	80%

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



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



#### **Key Points:**

- In Quarter 3 there were requests for 240 Justice Social Work Reports to Courts between October and December 2023. An increase of 19% on Q3 22-23
- Figures indicate an average of 67.9% of these reports were completed on time. For every
  report not completed a letter is sent to Court outlining the rationale for the requested report
  not having been sent.
- Of the 32.1% of letters sent to Court, 84% of these were due to external factors, i.e. service users not making themselves available for interview.

- The number of Community Payback Orders imposed in Quarter 3 was 84 with 63 of these having an unpaid work requirement.
- Of those 84 imposed orders, 71.4% of individuals attended an induction session within 5 working days of sentence.
- Service users attending work placements within 7 days has increased, reflecting the capacity created by staff returning from sick leave.
- 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:**

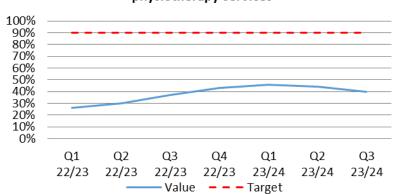
• Induction meetings have been led within Church Street to improve attendance of service users.

## **Performance Area: MSK Physiotherapy**

Ref	ef Performance Indicator -	Q3 2023/24				Q2 2023/24	Q3 2022/23	Trend over 8
Kei		Value	Target	Status	Short Trend	Value	Value	Qtrs
44	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	40%	90%		•	44%	37%	

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%
Q2 23/24	44%	90%
Q3 23/24	40%	90%

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



#### **Key Points:**

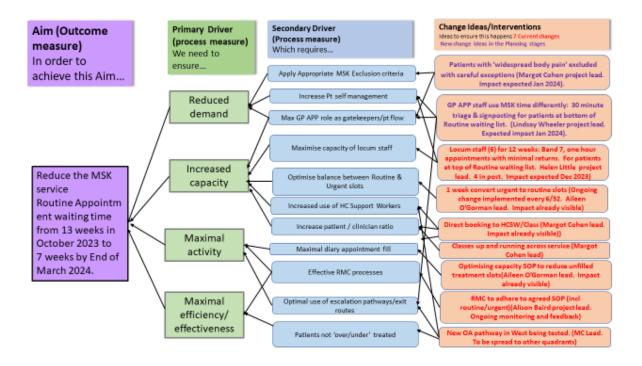
All waiting times data across Greater Glasgow and Clyde continues to improve as a result of priority project work to address waiting times.

- The % seen within 4 weeks has increased due to a test of change where GP Advanced Practice
  physio staff see routine self referred patients at point of contact. This test of change will be fully
  evaluated over a 6 month period.
- Demand has risen 10-17% each month between April 23 and Jan 24 when compared to the previous year.

- Service activity/capacity continues to rise as a result of priority project work. The service has seen 7,500 more new patients and 28,000 more return patients between April 23 and Dec 23 when compared to the previous year.
- There has been a reduction in the number of patients waiting for a routine appointment over Quarter 3: 2,774 less patients waiting for a routine appointment at the end of Quarter 3 compared with the end of Quarter 2.
- Waiting times are behind trajectory. The trajectory was based on 54,000 referrals for the financial year but the projected referral rate is now 71,000 referrals. Revised trajectory data has been presented to the Health Board and is available.
- Maximum routine waiting times have reduced from 12 weeks to 11 weeks in the last month.

#### **Improvement Actions:**

The driver diagram below shows improvement actions. All individual change ideas in final column are now actively being measured within the service.



Agency staff will be discontinued at the end of February 2024 due to a lack of ongoing reserves budget for waiting list initiative work.

### **Summary of Strategic Plan Key Performance Indicators**

Quarter 3: October to December 2023 (Partial Data)

Quarter 2: July - September 2023 (Full Data)

Red
Amber
Green
No target

# West Dunbartonshire Health and Social Care Partnership Complaints Reporting: Quarter 3 October to December 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	Q2 23/24	Q3 23/24		
2	Number of Stage 1 complaints (whether escalated to Stage 2 or not)	22	29	22	42	54	63	40		
	Number of complaints direct to Stage 2	7	11	13	9	16	15	19		
	Total number of complaints	29	40	35	51	70	78	59		
3	% closed within timescale - Stage 1		Not available							
	% closed within timescale - direct to Stage 2	43%	36%	23%	33%	31%	40%	47%		
	% closed within timescale - escalated to Stage 2	N/A	N/A	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	20	18		
	Average response time - escalated to Stage 2	N/A	N/A	N/A	N/A	N/A	N/A	N/A		

# **Indicator 5: Outcomes of Complaints**

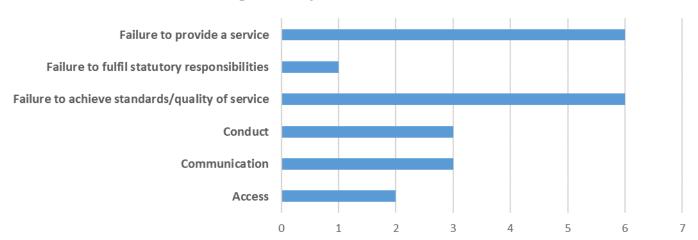
Stage 2 - Quarter 2 2023/24

	Q1 22/23			Q2 22/23			Q3 22/23			Q4 22/23		
	NHS	WDC	% of	NHS	WDC	% of	NHS	WDC	% of	NHS	WDC	% of
Outcome	GGC	WDC	total	GGC	WDC	total	GGC	VVDC	total	GGC	WDC	total
Fully Upheld		1	14%	2		20%			0%	1		13%
Partially Upheld			0%	2	1	30%	1	6	58%		2	25%
Not Upheld	2	4	86%	4	1	50%	1	4	42%		5	63%
Unsubstantiated			0%			0%			0%			0%
Total	2	5		8	2		2	10		1	7	

		Q1 23/2	4		Q2 23/2	24	Q3 23/24			
	NHS	WDC	% of	NHS	WDC	% of	NHS		% of	
Outcome	GGC	WDC	total	GGC	WDC	total	GGC*	WDC**	total	
Fully Upheld			0%		1	7%		3	18%	
Partially Upheld	1	6	44%		2	13%		1	6%	
Not Upheld	4	5	56%	4	8	80%	4	9	76%	
Unsubstantiated			0%			0%			0%	
Total	5	11		4	11		4	13		

<sup>\*1</sup> complaint no mandate received

Themes of Stage 2 Complaints October to December 2023



Please note a complaint may cover multiple themes.

<sup>\*\*1</sup> complaint being dealt via other policy/procedures