

## **West Dunbartonshire Health and Social Care Partnership Performance Report 2024/25: Quarter 1 April to June 2024**

This report will outline the Health and Social Care Partnership's performance against the priorities set out in our Strategic Plan 2023-2026: Improving Lives Together.

Local targets for 2024/25 are under review and 2023/24 targets will be retained in the interim.

### **Key Highlights/Challenges**

All children and young people referred to Child and Adolescent Mental Health Services were seen within 18 weeks. The average wait was 3 weeks.

Continued financial pressures in relation to care at home, supporting children and young people in both community and residential placements, and prescribing.

While absence rates continue to be high for both Council and NHS staff there has been a slight improvement for both employing organisations on the previous quarter.

High referral rates and complexity of patient needs is continuing to impact on meeting timescales for psychological therapies treatments.

Development of short-term delayed discharge trajectories in conjunction with the Scottish Government and NHS Greater Glasgow and Clyde to target improvement.

Significant improvement in the number of bed days lost to complex delayed discharges with a 23% reduction on the previous quarter, January to March 2024. April to June was a particularly challenging period with total delays peaking at 54 and an average of 44 daily delays.

Vacancies within Criminal Justice impacted on the ability to support service users to commence Community Payback Orders within timescales.

Due to financial pressures, the use of agency staff within MSK Physiotherapy was discontinued in February 2024, resulting in decreased capacity across the service during April to June 2024.

The availability of key staff within Children's Services during April to June has impacted on timescales for Child Protection case conferences.

## 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		Target Type		Short Term Trends	
	Alert	N	National Target		Improving*
	Warning	L	Local Target		No Change
	OK	M	Monitoring only – no target set		Getting Worse*
	Unknown				
	Data Only				

\*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 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
1	Percentage of carers who feel able to continue in their caring role when asked through their Adult Carer Support Plan	91.7%	95%	L			87%	97%	
2	Percentage of carers who feel willing to continue in their caring role when asked through their Adult Carer Support Plan	91.7%	95%	L			87%	98.5%	
3	Number of Adult Carer Support Plans completed	48	N/A	M			46	67	
4	Balance of Care for looked after children: % of children being looked after in the Community	89.5%	90%	N			88.9%	89%	
5	Number of Looked After Children	504	N/A	M			506	474	
6	Number of Looked After children looked after in a residential setting	53	N/A	M			56	52	
7	Number of Looked After children looked after at home with parents	68	N/A	M			66	63	
8	Number of Looked After children looked after by foster carers	127	N/A	M			128	117	
9	Number of Looked After children looked after in other community settings	256	N/A	M			256	242	
10	Child and Adolescent Mental Health Service (CAMHS) 18 weeks referral to treatment	100%	90%	N			100%	98.6%	
11	Mean number of weeks for referral to treatment for specialist Child and Adolescent	3	18	L			3	9	

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
	Mental Health Services								
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	75%	90%	N			60.8%	52.9%	
13	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	Published Sep 2024	90%	N	Not yet available	Not yet available	98.8%	97.8%	

Safe and Thriving Communities									
Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
14	Percentage of children on the Child Protection Register who have a completed and current risk assessment	100%	100%	N			100%	100%	
15	Percentage of child protection investigations to case conference within 28 days	71.9%	95%	N			80.6%	New PI	
16	Number of Child Protection investigations	108	N/A	M			103	71	
17	Number of children on the Child Protection Register at end of reporting period (Excluding temporary and transfers in)	58	N/A	M			58	60	
18	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) ground	70	N/A	M			75	177	
19	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds	42	N/A	M			39	36	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	63%	100%	N			63.6%	61%	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	17	0	N			23	19	
22	Number of bed days lost to delayed discharge 18+ All reasons	3,953	2,781	L			4,075	3,581	
23	Number of bed days lost to delayed discharge 18+ Complex Codes	1,416	1,405	L			1,831	1,568	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	3,097	2,278	L			3,178	2,996	

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
25	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	1,020	982	L			1,341	1,387	
26	Number of clients receiving Home Care Pharmacy Team support	288	312	L			221	285	
27	Number of people receiving Telecare/Community Alarm service - All ages	1,844	1,869	L			1,869	1,856	
28	Number of people receiving homecare - All ages	1,241	N/A	M			1,361	1,429	
29	Number of weekly hours of homecare - All ages	9,214	9,000	M			9,338	10,535	
30	Percentage of people who receive 20 or more interventions per week	46.6%	40%	L			40%	40.2%	
31	Percentage of homecare clients receiving personal care	99.8%	99%	L			99.6%	99.2%	
32	Number of people receiving reablement homecare	25	N/A	M			21	New PI	
33	Number of hours of reablement homecare	180	N/A	M			167	New PI	

## Equal Communities

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
34	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	72.8%	98%	N			73.4%	62.7%	
35	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	54%	80%	N			69%	92.3%	
36	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	28.4%	80%	N			40.4%	60.6%	
37	Percentage of children from BME communities who are looked after that are being looked after in the community	92.3%	90%	L			86.2%	88%	
38	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	67%	80%	L			N/A*	67%	

Healthy Communities									
Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
39	Number of emergency admissions 18+	Not yet available	1,989	L	Not yet available	Not yet available	2,326	2,390	
40	Number of emergency admissions aged 65+	Not yet available	1,066	L	Not yet available	Not yet available	1,247	1,224	
41	Emergency admissions aged 65+ as a rate per 1,000 population	Not yet available	60	L	Not yet available	Not yet available	70	68.7	
42	Number of unscheduled bed days 18+	Not yet available	20,094	L	Not yet available	Not yet available	21,928	22,841	
43	Unscheduled acute bed days (aged 65+)	Not yet available	14,565	L	Not yet available	Not yet available	16,069	16,671	
44	Unscheduled acute bed days (aged 65+) as a rate per 1,000 population	Not yet available	817	L	Not yet available	Not yet available	902.2	936	
45	Number of Attendances at Accident and Emergency 18+	Not yet available	5,005	L	Not yet available	Not yet available	5,944	5,937	
46	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	40%	90%	N			44%	46%	
47	Prescribing cost per weighted patient (Annualised)	£193.15	£193.03	L			£193.03	£185.96	
48	Compliance with Formulary Preferred List	74.51%	78%	N			74.34%	77.65%	

## Financial Update

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

- 2024/25 Financial Performance Report as at Period 3 (30 June 2024)

The financial performance report provided an update on the position to 30 June 2024 and a projection to 31 March 2025 based on Quarter 1 activity and performance.

The financial projection based on Quarter 1 data reported an overspend of £3.525m (1.73%) after net application of earmarked reserves of £2.311m are accounted for. There continues to be financial pressures in relation to care at home, the ongoing demand for supporting children and young people (in both community placements and other residential accommodation), and prescribing.

The financial performance report also provided an update on outstanding budget pressures for 2024/25 and updated budget gaps for 2025/26 to 2026/27 as detailed in the table below.

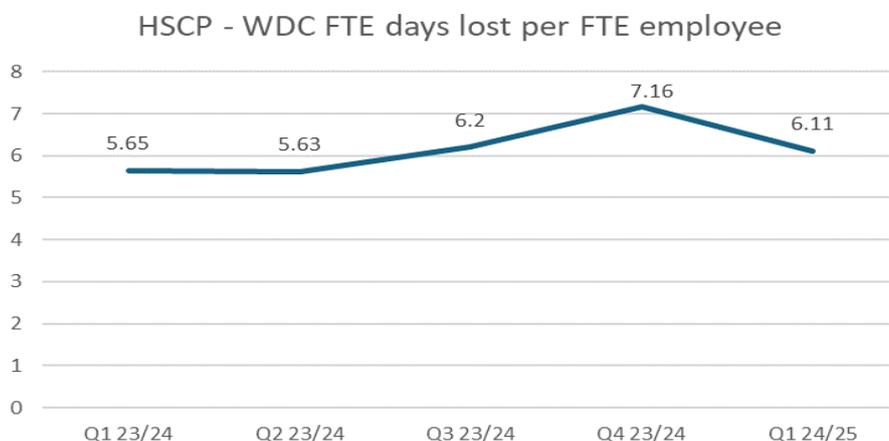
Consolidated Budget Gap Analysis	2024/25	2025/26	2026/27
	£000's	£000's	£000's
Budget Gap Reported March 2024	0	4,943	10,500
Forecast Deficit @June 2024	3,525		
Application of unearmarked Reserves above PB			
<b>Budget Adjustments / Pressures not Reported</b>			
Social Care Pay Inflation increased on average 1.27%	750	773	796
Community Placements and Universal Credit (assume 3 month impact)	172	687	687
Pressures within Community Placements and Childrens Residential Care		1,386	1,455
Pressures within Care Homes and Care at Home		4,101	4,225
<b>Revised Budget Gap @ June 2024</b>	<b>4,447</b>	<b>11,890</b>	<b>17,662</b>

The HSCP’s Chief Officer and Chief Financial Officer have already met with both NHS Greater Glasgow and Clyde and West Dunbartonshire Council Chief Executives to consider the forecast outturn based on Quarter 1’s actual position and a range of actions must be developed. The Senior Management Team met on 8 August 2024 to discuss the possibility of accelerating the development of 2025/26 savings options, to determine those options that could mitigate the in-year pressure and be sufficiently robust to minimise the impact on future year budget setting and an update is provided in the Period 4 Financial Performance Update Report as a separate report within the 24 September HSCP Board meeting.

## 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.

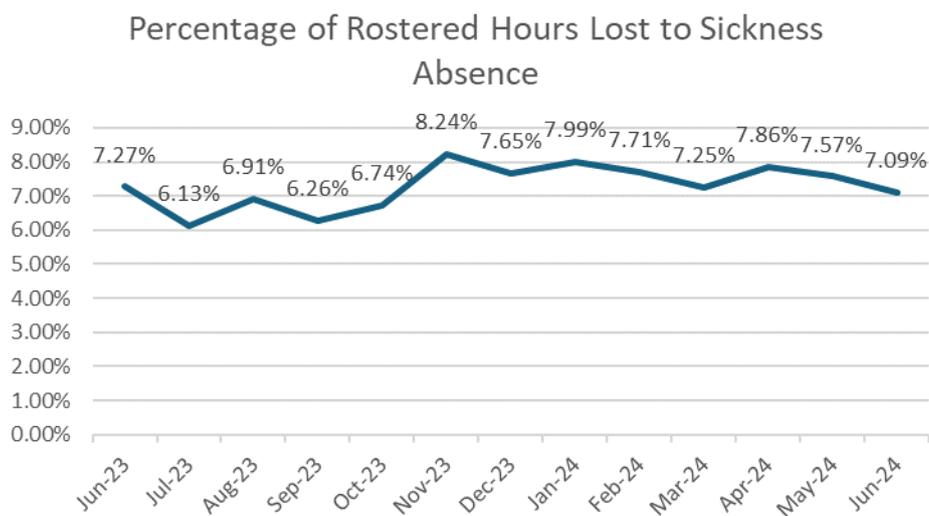
WDC HSCP staff absence was slightly higher during April to June 2024 (6.11 days) than in the same period in 2023 (5.65 days) but lower than in the previous quarter January to March 2024 (7.16 days).



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 2022/23 where WDC had a higher number of Full Time Equivalent (FTE) days lost per employee at 15.32 than the Scotland figure of 13.21 and had dropped from 23<sup>rd</sup> lowest number of days in 2021/22 to the 27<sup>th</sup> lowest (or 6<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	12.17	23
2022/23	15.32	13.21	27

NHS HSCP staff absence is reported monthly. Absence rates in June 2024 were at their lowest since November 2023.



Latest available data at national and health board level is for February 2024 where West Dunbartonshire HSCP's figure (7.71%) is higher than both NHS Scotland (6.2%) and NHS Greater Glasgow and Clyde (7.56%).

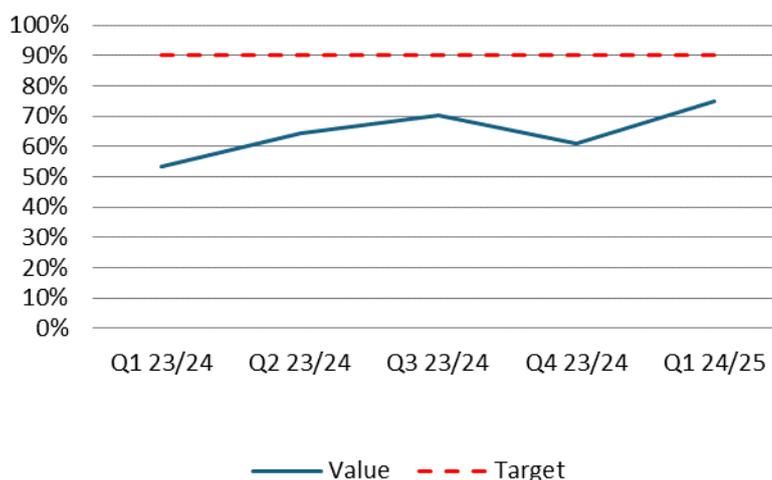
## West Dunbartonshire Health and Social Care Partnership Exceptions Reporting: Quarter 1 April to June 2024

### Performance Area: Psychological Therapies

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	75%	90%	N			60.8%	52.9%	

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

Quarter	Value	Target
Q1 23/24	53.2%	90%
Q2 23/24	64.3%	90%
Q3 23/24	70.4%	90%
Q4 23/24	60.8%	90%
Q1 24/25	75.0%	90%



#### Key Points:

75 of the 100 people who started psychological therapies between April and June 2024 did so within 18 weeks of referral.

There is an ongoing Band 8A Psychologist vacancy within the Primary Care Mental Health Team.

Referrals to Dumbarton Older People’s Community Mental Health Team have increased significantly over the past 4 years, while referrals to Clydebank Older People’s Community Mental Health Team have remained stable. However, the complexity of patient presentations across all areas means there are a higher number of contacts and a greater level of multi-disciplinary team involvement per patient. Complex presentations require longer engagement with clinical psychology, reducing flow and leading to longer patient waits.

Staff training is required to improve skills and confidence in using low intensity psychological interventions e.g. safety and stabilisation training for trauma interventions/non-pharmacological interventions for managing symptoms of dementia.

**Improvement Actions:**

Continued efforts to recruit to the Band 8A Psychologist vacancy within the Primary Care Mental Health Team.

Consultant Clinical Psychologist to start additional clinic in Dumbarton to ease waiting list pressures.

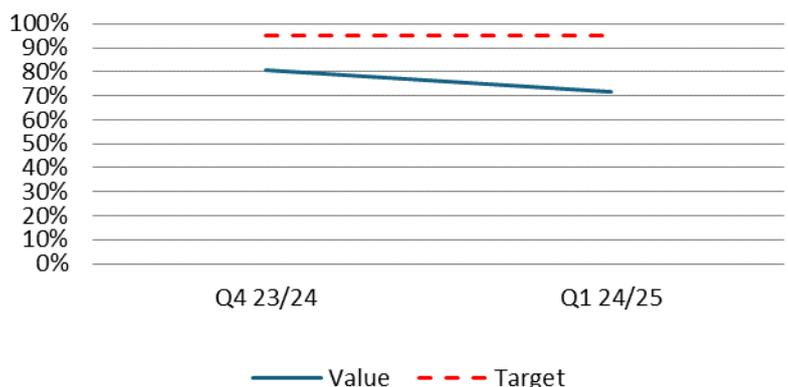
Triage new referrals to check suitability for psychological assessment. Identify people who may benefit from low intensity psychological therapies and provide self-help information to manage symptoms while on the psychology waiting list.

Psychological therapies training to be offered when permanent staff numbers improve: staff cannot be released for training while referral rates are high and staff availability is low.

**Performance Area: Child Protection**

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
15	Percentage of child protection investigations to case conference within 28 days	71.9%	95%	N			80.6%	New PI	

**% of Child Protection investigations to Case Conference within 28 days**



Quarter	Value	Target
Q4 23/24	80.60%	95%
Q1 24/25	71.90%	95%

**Key Points:**

There were 32 case conferences in Quarter 1 and 23 of these were held within the 28 day timescale.

**Improvement Actions:**

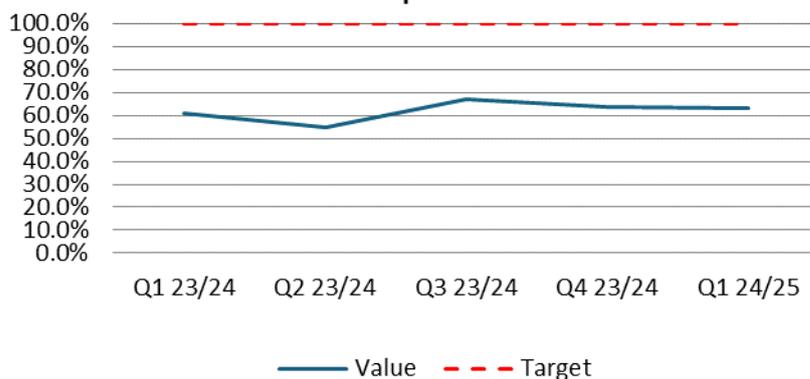
Since January 2024 timescales have been extended to reflect revised timescales within the updated National Child Protection Guidance, however the availability of key staff during April to June has impacted on timescales for case conferences. This will be taken into consideration going forward and closely monitored.

**Performance Area: Adult Support and Protection**

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	63%	100%	N			63.6%	61%	

**% Adult Support and Protection clients who have current risk assessments and care plan/protection plan**

Quarter	Value	Target
Q1 23/24	61.0%	100%
Q2 23/24	55.0%	100%
Q3 23/24	67.0%	100%
Q4 23/24	63.6%	100%
Q1 24/25	63.0%	100%



**Key Points:**

10 of the 16 Adult Support and Protection clients had a current risk assessment and care plan/protection plan in place between April and June 2024. This is lower than the 63.6% in the previous quarter but higher than the 61% in the same period in 2023.

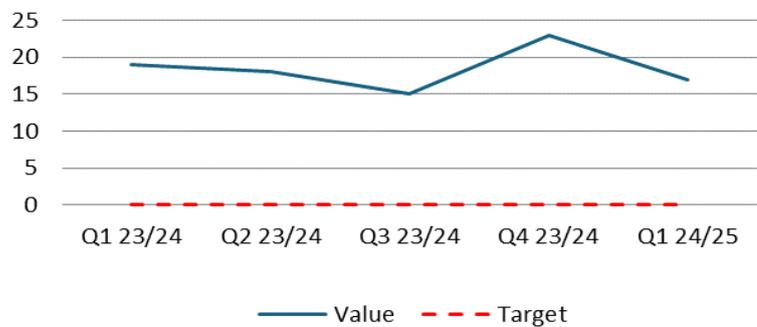
**Improvement Actions:**

A meeting took place on 5 September 2024 with all Senior Social Worker chairs of Adult Support and Protection Case Conferences. The purpose of the meeting was to discuss outstanding actions in relation to Adult Support and Protection work and this included seeking commitment to ensuring all processes and procedures are followed in terms of performance and completing necessary paperwork on the case management system, CareFirst, within timeframes.

## Performance Area: Delayed Discharge

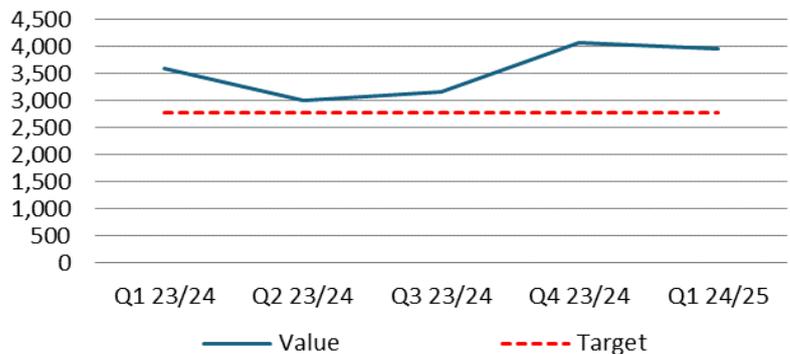
Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	17	0	N			23	19	
22	Number of bed days lost to delayed discharge 18+ All reasons	3,953	2,781	L			4,075	3,581	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	3,097	2,278	L			3,178	2,996	

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



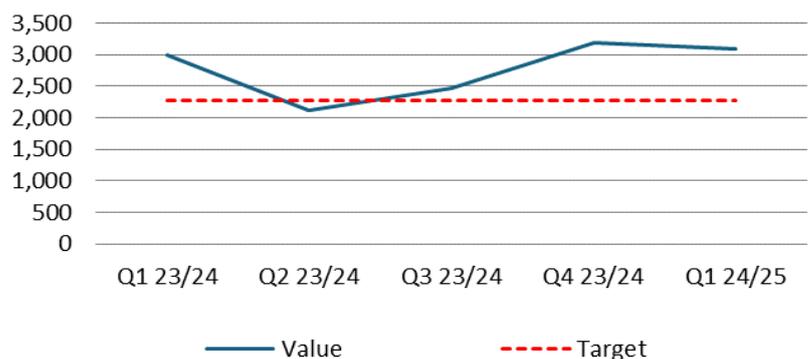
Quarter	Value	Target
Q1 23/24	19	0
Q2 23/24	18	0
Q3 23/24	15	0
Q4 23/24	23	0
Q1 24/25	17	0

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



Quarter	Value	Target
Q1 23/24	3581	2781
Q2 23/24	3006	2781
Q3 23/24	3157	2781
Q4 23/24	4075	2781
Q1 24/25	3953	2781

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



Quarter	Value	Target
Q1 23/24	2996	2278
Q2 23/24	2115	2278
Q3 23/24	2476	2278
Q4 23/24	3178	2278
Q1 24/25	3097	2278

**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. Targets for bed days lost to delayed discharge are locally set and we are currently reviewing these for 2024/25. For these indicators we are reporting performance against 2023/24 targets in the interim.

While non-complex delays continue to exceed our local targets, there has been significant improvement in complex delays. During April to June 2024, bed days lost to complex delays were 23% lower than in the previous quarter, January to March 2024, and 10% lower than in April to June 2023. This reduction in complex bed days was during a particularly challenging period where total delays peaked at 54 and the average number of daily delays was 44. The volume of delayed discharge activity across both complex and non-complex delays is demonstrated by the table below.

	April - June 2023	April - June 2024	% increase
Number of New Delays	72	97	35%
Number Discharged	56	80	43%

**Improvement Actions:**

Short term trajectories for West Dunbartonshire HSCP were developed in conjunction with the Scottish Government and NHS Greater Glasgow and Clyde during Quarter 1 as below:

Scottish Government - A reduction to 24 delayed discharges across Acute and Mental Health by October 2024.

NHS Greater Glasgow and Clyde - A reduction to 25 Acute delayed discharges by the end of July 2024.

Significant efforts to tackle the high number of delays in line with these trajectories has seen the total number of delays reduced from 54 in April to 35 by the end of June 2024 and the number of acute delays reduced from a peak of 48 in April to 31 by the end of June. The improvement in performance has been driven by the Integrated Operations Manager and two Senior Social Workers in the team, assisted by a full staffing complement and opportunity to embed improvement activity.

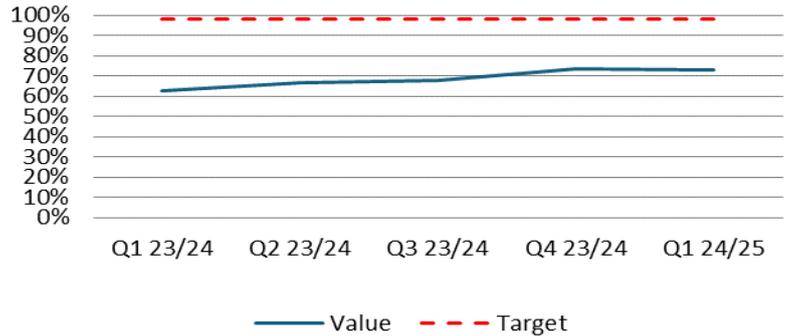
**Performance Area: Criminal Justice Social Work**

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
34	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	72.8%	98%	N			73.4%	62.7%	
35	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	54%	80%	N			69%	92.3%	

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
36	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	28.4%	80%	N			40.4%	60.6%	

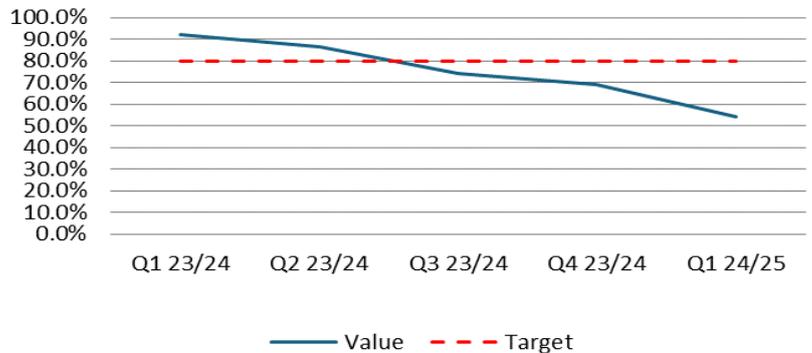
Quarter	Value	Target
Q1 23/24	62.7%	98%
Q2 23/24	66.9%	98%
Q3 23/24	67.9%	98%
Q4 23/24	73.4%	98%
Q1 24/25	72.8%	98%

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



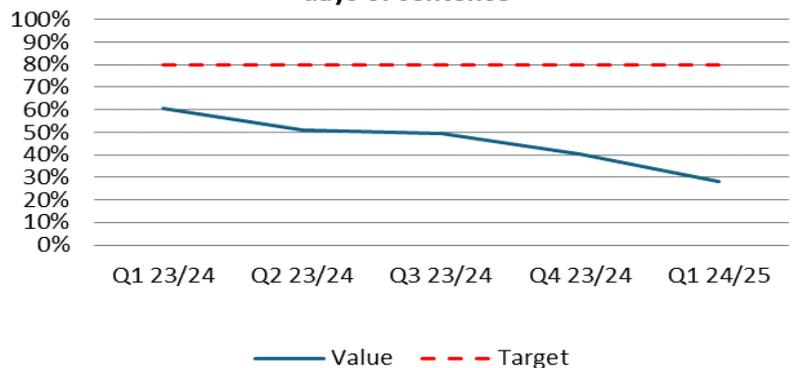
Quarter	Value	Target
Q1 23/24	92.3%	80%
Q2 23/24	86.8%	80%
Q3 23/24	74.4%	80%
Q4 23/24	69.0%	80%
Q1 24/25	54.0%	80%

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



Quarter	Value	Target
Q1 23/24	60.6%	80%
Q2 23/24	51.1%	80%
Q3 23/24	49.2%	80%
Q4 23/24	40.4%	80%
Q1 24/25	28.4%	80%

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



**Key Points:**

In Quarter 1 there were requests for 217 Justice Social Work Reports to Courts. This was an increase of 4% on Quarter 1 2023-24. Figures indicate an average of 72.8% 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.

The number of Community Payback Orders imposed in Quarter 1 was 113 with 62 of these having an unpaid work requirement. Of those 113 imposed orders, 54% of individuals attended an induction session within 5 working days of sentence.

Service users attending work placements within 7 days has decreased from 40.4% to 28.4%.

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 has taken place to fill Community Payback posts. This will support service users commencing their orders timeously.

**Performance Area: Looked After Children**

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
38	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	67%	80%	L			N/A*	67%	

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

Quarter	Value	Target
Q1 23/24	67%	80%
Q2 23/24	100%	80%
Q3 23/24	N/A*	80%
Q4 23/24	N/A*	80%
Q1 24/25	67%	80%



\*No young people aged 16 or 17 left care during this quarter.

**Key Points:**

This relates to a very small number of young people and therefore percentages fluctuate more significantly. Numbers are also so low that they are potentially identifiable.

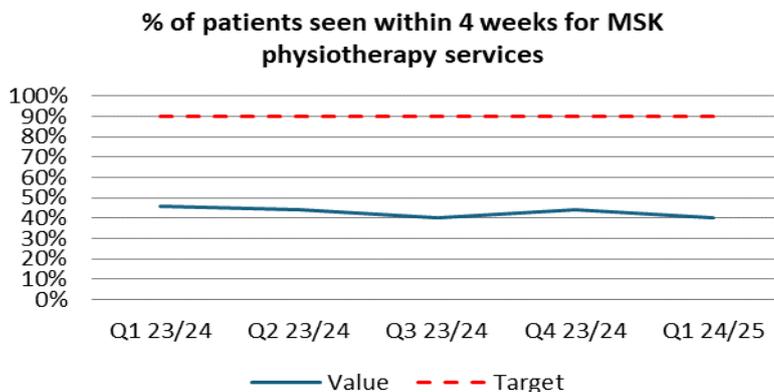
**Improvement Actions:**

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.

**Performance Area: MSK Physiotherapy**

Ref	Performance Indicator	Q1 2024/25					Q4 2023/24	Q1 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
46	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	40%	90%	N			44%	46%	

Quarter	Value	Target
Q1 23/24	46%	90%
Q2 23/24	44%	90%
Q3 23/24	40%	90%
Q4 23/24	44%	90%
Q1 24/25	40%	90%



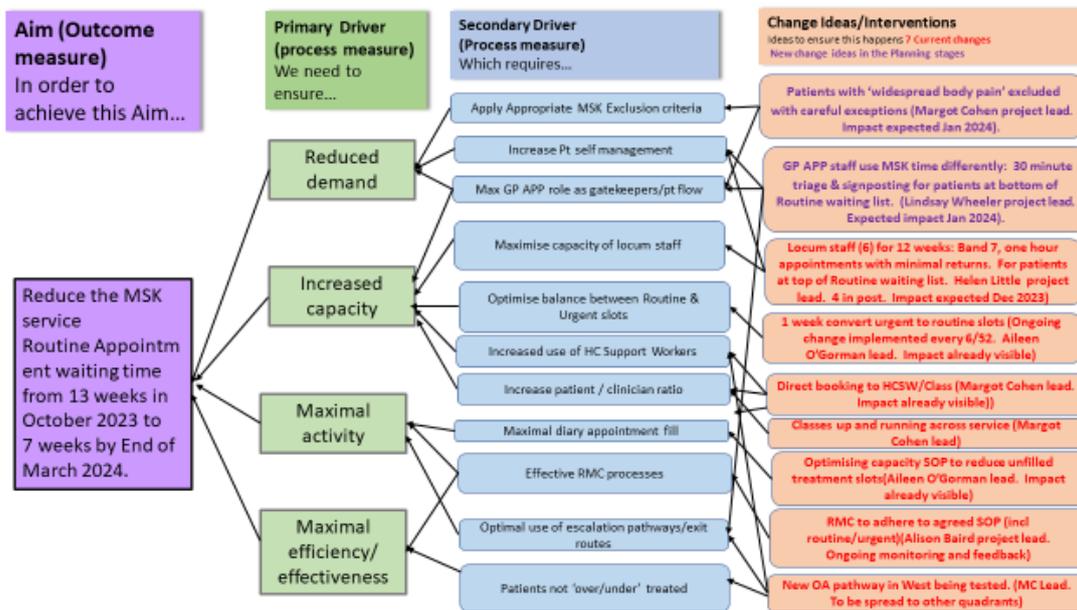
**Key Points:**

The number of patients waiting for a routine appointment over the 4 week target continued to rise in Quarter 1 due to increased demand. The use of agency staff was discontinued in February 2024 due to financial pressures. This meant that all agency staff caseloads had to be reabsorbed in March and capacity has subsequently decreased as a result. Numbers waiting for a routine appointment have increased despite ongoing focus to try and address routine waiting times.

The maximum wait for a routine appointment initially improved in Quarter 1 despite the rise in referral rates but has now returned to a maximum wait of 13 weeks for a routine appointment.

**Improvement Actions:**

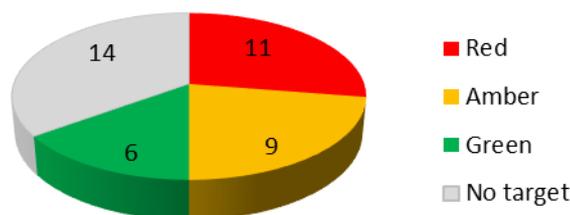
Waiting times remain a priority project within the service and the 13% increase in demand within 2023/24 has meant that some of the impact of the waiting times work has not been realised as the maximum wait for service has remained relatively static. The driver diagram below illustrates the ongoing tests of change within the service.



Although the focused waiting times work has increased service activity rates, this has only served to keep the waiting times static due to the large rise in demand over the year.

**Summary of Strategic Plan Key Performance Indicators**

Quarter 1: April to June 2024 (Partial Data)



## West Dunbartonshire Health and Social Care Partnership Complaints Reporting: Quarter 1 April to June 2024

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 23/24	Q2 23/24	Q3 23/24	Q4 23/24	Q1 24/25
2	Number of Stage 1 complaints (whether escalated to Stage 2 or not)	54	63	40	57	73
	Number of complaints direct to Stage 2	16	15	19	26	27
	Total number of complaints	70	78	59	83	100
3	% closed within timescale - Stage 1	Not available				
	% closed within timescale - direct to Stage 2	31%	40%	47%	46%	55%
	% 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	24	20	18	25	23
	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 2024/25

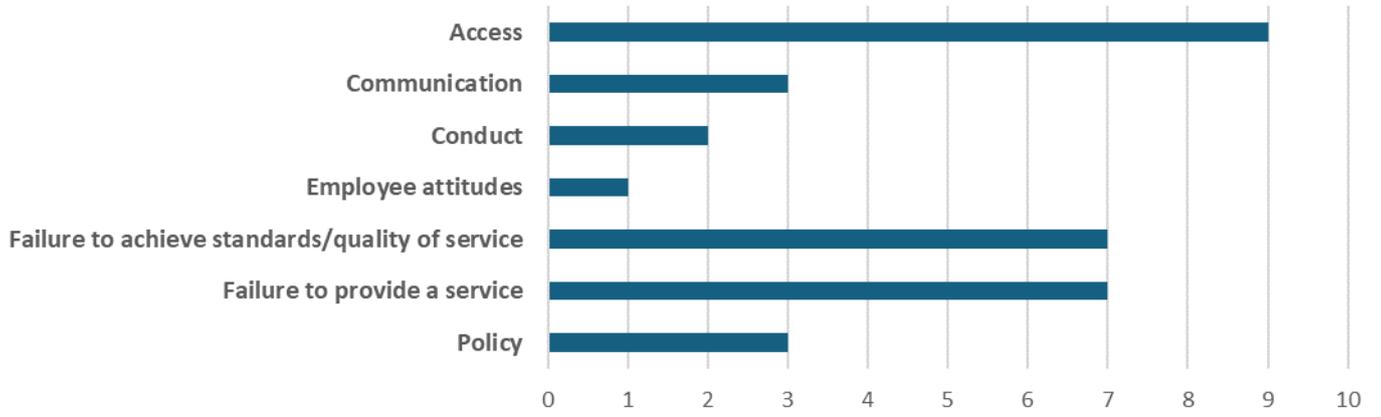
Outcome	Q1 23/24			Q2 23/24			Q3 23/24			Q4 23/24		
	NHS GGC	WDC	% of total	NHS GGC	WDC	% of total	NHS GGC	WDC	% of total	NHS GGC	WDC*	% of total
Fully Upheld			0%		1	7%		3	18%	1	1	8%
Partially Upheld	1	6	44%		2	13%		1	6%	1	1	8%
Not Upheld	4	5	56%	4	8	80%	4	9	76%	10	10	83%
Unsubstantiated			0%			0%			0%	0	0	0%
<b>Total</b>	<b>5</b>	<b>11</b>		<b>4</b>	<b>11</b>		<b>4</b>	<b>13</b>		<b>12</b>	<b>12</b>	

\*2 ongoing

Outcome	Q1 24/25		
	NHS GGC	WDC*	% of total
Fully Upheld	0	3	12%
Partially Upheld	2	5	27%
Not Upheld	10	6	62%
Unsubstantiated	0	0	0%
<b>Total</b>	<b>12</b>	<b>14</b>	

\* 1 ongoing

### Themes of Stage 2 Complaints April to June 2024



Please note a complaint may cover multiple themes.