

West Dunbartonshire Health and Social Care Partnership Performance Report 2024/25: Quarter 2 July to September 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 unscheduled care emergency admissions, unscheduled bed days and attendances at Accident and Emergency (A&E) 2024/25 are still under review and 2023/24 targets have been retained in the interim. Delayed discharge bed days targets 2024/25 have been set locally in line with Scottish Government trajectories and our move from a status of 'Moderate Reductions Required' to 'Remain Low'.

As part of our continued work to mainstream equalities within our reporting, we have four additional performance indicators in this report. These indicators relate to the uptake of referrals to West Dunbartonshire Council's Working4U service for benefits maximisation. This offer of referral is part of the Health and Social Care Partnership's assessment and review process.

Through monitoring uptake against the protected characteristics of age and sex we hope to identify any barriers or areas for opportunity to allow our citizens to access the financial support to which they are entitled.

Another key area we intend to incorporate in this report is increasing awareness of Self-Directed Support through two independent advice and guidance projects that aim to empower our citizens and promote choice. These indicators are in early development and are likely to be included in our 2025 reporting.

Initial scoping has highlighted an almost 130% increase in carers requesting information from our partners Carers of West Dunbartonshire about Self-Directed Support between Quarter 1 and Quarter 2 this financial year: 198 April – June 2024; 454 July – September 2024. This increase reflects a local Support in the Right Direction funded project (Inspiring Scotland) and work is underway to look at the demographics and protected characteristics of those engaging.

Key Highlights/Challenges

Additional financial pressures emerged between July and September 2024 including: a successful job evaluation claim for residential care workers; the final 2024/25 pay offer made to Local Authority staff which has been ratified by CoSLA; and a significant increase in prescribing pressures.

More than 90% of looked after children and young people are being looked after within a community setting.

All children and young people receiving Child and Adolescent Mental Health Services treatment within 18 weeks of referral.

All 16 and 17 year olds entering a positive destination during July to September at the point of leaving residential care.

Staff vacancies within psychology and across the multi-disciplinary mental health teams continue to impact on waiting times for Psychological Therapies.

97.8% of people starting drug or alcohol treatment within 3 weeks of referral.

Significant improvement in the number of bed days lost to delayed discharges with a 41% reduction on the previous quarter for all delays and a 50% reduction for complex delays.

Continued high levels of attendance at Accident and Emergency Departments by West Dunbartonshire residents.

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

Decreased capacity within MSK Physiotherapy in July to September 2024 due to the discontinued use of agency staff from February 2024 in response to financial pressures.

New recording processes in relation to Child Protection have resulted in an issue with dates meaning we are unable to accurately capture timescales for contact to case conference. We have therefore temporarily paused reporting of this performance indicator. Implementation of our new Duty system should address this issue.

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	Q2 2024/25					Q1 2024/25	Q2 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	88.7%	95%	L			91.7%	93.2%	
2	Percentage of carers who feel willing to continue in their caring role when asked through their Adult Carer Support Plan	95.2%	95%	L			91.7%	95.5%	
3	Number of Adult Carer Support Plans completed	65	N/A	M			48	46	
4	Balance of Care for looked after children: % of children being looked after in the Community	90.3%	90%	N			89.5%	88.3%	
5	Number of Looked After Children	475	N/A	M			504	477	
6	Number of Looked After children looked after in a residential setting	46	N/A	M			53	56	
7	Number of Looked After children looked after at home with parents	80	N/A	M			68	65	
8	Number of Looked After children looked after by foster carers	118	N/A	M			127	119	
9	Number of Looked After children looked after in other community settings	231	N/A	M			256	237	
10	Child and Adolescent Mental Health Service (CAMHS) 18 weeks referral to treatment	100%	90%	N			100%	100%	
11	Mean number of weeks for referral to treatment for specialist Child and Adolescent Mental Health Services	3	18	L			3	6	
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	57%	90%	N			75%	64.3%	
13	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	97.8%	90%	N			96.8%	98.3%	

Safe and Thriving Communities

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 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	New recording processes in relation to Child Protection have resulted in an issue with dates meaning we are unable to accurately capture timescales for contact to case conference. We have therefore temporarily paused reporting of this performance indicator. Implementation of our new Duty system should address this issue.							

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
16	Number of Child Protection investigations	91	N/A	M		↓	108	57	
17	Number of children on the Child Protection Register at end of reporting period (Excluding temporary and transfers in)	54	N/A	M		↓	58	45	
18	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on non-offence (care and protection) ground	57	N/A	M		↓	70	154	
19	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds	29	N/A	M		↓	42	41	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	47.4%	100%	N		↓	63%	55%	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	13	0	N		↑	17	18	
22	Number of bed days lost to delayed discharge 18+ All reasons	2,327	2,850	L		↑	3,953	3,006	
23	Number of bed days lost to delayed discharge 18+ Complex Codes	702	1,440	L		↑	1,416	770	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	1,724	2,335	L		↑	3,097	2,115	
25	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	410	1,007	L		↑	1,020	668	
26	Number of clients receiving Home Care Pharmacy Team support	298	312	L		↑	288	287	
27	Number of people receiving Telecare/Community Alarm service - All ages	1,851	1,869	L		↑	1,844	1,863	
28	Number of people receiving homecare - All ages	1,237	1,200	M		↓	1,241	1,440	
29	Number of weekly hours of homecare - All ages	9,143	9,000	M		↓	9,214	10,408	
30	Percentage of people who receive 20 or more interventions per week	46.3%	40%	L		↓	46.6%	40.6%	
31	Percentage of homecare clients receiving personal care	99.7%	99%	L		↓	99.8%	99.4%	
32	Number of people receiving reablement homecare	61	N/A	M		↑	25	New PI	
33	Number of hours of reablement homecare	184	N/A	M		↑	180	New PI	

Equal Communities

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 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.	62.7%	98%	N			72.8%	66.9%	
35	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	71.2%	80%	N			54%	86.8%	
36	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	52.1%	80%	N			28.4%	51.1%	
37	Percentage of children from BME communities who are looked after that are being looked after in the community	91.3%	90%	L			92.3%	85.7%	
38	Percentage of 16 or 17 year olds in positive destinations (further/higher education, training, employment) at point of leaving care	100%	80%	L			67%	100%	
39	Percentage of people under 65 consenting to a referral for benefits maximisation at point of assessment/review	27%	N/A	L			20%	31%	
40	Percentage of people aged 65 and over consenting to a referral for benefits maximisation at point of assessment/review	10%	N/A	L			10%	6%	
41	Percentage of females consenting to a referral for benefits maximisation at point of assessment/review	14%	N/A	L			17%	13%	
42	Percentage of males consenting to a referral for benefits maximisation at point of assessment/review	16%	N/A	L			10%	14%	

Healthy Communities

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
43	Number of emergency admissions 18+	Not yet available	1,989	L	Not yet available	Not yet available	2,367	2,329	
44	Number of emergency admissions aged 65+	Not yet available	1,066	L	Not yet available	Not yet available	1,268	1,202	
45	Emergency admissions aged 65+ as a rate per 1,000 population	Not yet available	60	L	Not yet available	Not yet available	69.8	67.5	
46	Number of unscheduled bed days 18+	Not yet available	20,094	L	Not yet available	Not yet available	23,475	22,354	
47	Unscheduled acute bed days (aged 65+)	Not yet available	14,565	L	Not yet available	Not yet available	17,091	15,544	

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 2023/24	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
48	Unscheduled acute bed days (aged 65+) as a rate per 1,000 population	Not yet available	817	L	Not yet available	Not yet available	940.8	872.7	
49	Number of Attendances at Accident and Emergency 18+	Not yet available	5,005	L	Not yet available	Not yet available	6,446	6,118	
50	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	40%	90%	N			40%	44%	
51	Prescribing cost per weighted patient (Annualised)	£192.24	£193.03	L			£193.15	£189.66	
52	Compliance with Formulary Preferred List	74.54%	78%	N			74.51%	73.09%	

Please find April to June 2024 data below for indicators we were unable to report on in our Quarter 1 2024/25 Performance Report. We continue to face significant challenges in respect of unscheduled care. An Unscheduled Care Development Session is planned for 4th February 2025.

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	
13	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	96.8%	90%	N			98.4%	97.8%	

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	
43	Number of emergency admissions 18+	2,367	1,989	L			2,331	2,390	
44	Number of emergency admissions aged 65+	1,268	1,066	L			1,247	1,224	
45	Emergency admissions aged 65+ as a rate per 1,000 population	69.8	60	L			70	68.7	
46	Number of unscheduled bed days 18+	23,475	20,094	L			25,472	22,932	
47	Unscheduled acute bed days (aged 65+)	17,091	14,565	L			18,971	16,671	
48	Unscheduled acute bed days (aged 65+) as a rate per 1,000 population	940.8	817	L			1,065.1	936	
49	Number of Attendances at Accident and Emergency 18+	6,446	5,005	L			5,944	5,937	

Financial Update

The HSCP Board meeting on 19 November 2024 considered the following financial papers:

- 2024/25 Financial Performance Report as at Period 6 (30 September 2024)

The financial performance report provided an update on the position to 30 September 2024 and a projection to 31 March 2025 based on Quarter 2 activity and performance.

The financial projection based on Quarter 2 data reported an overspend of £4.286m (2.10%) after net application of earmarked reserves of £2.818m are accounted for. While there continues to be financial pressures in relation to care at home and the ongoing demand for supporting children and young people (in both community placements and other residential accommodation), several new and increasing financial pressures have emerged in Quarter 2. Most notably these relate to the successful job evaluation claim for residential care workers, the final 2024/25 pay offer made to Local Authority staff which has been ratified by CoSLA and a significant increase in prescribing pressures.

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 @ September 2024	4,286		
Budget Adjustments / Pressures not Reported			
Social Care Pay Inflation increased on average 1.27%		564	581
Community Placements and Universal Credit (£0.115m impact to P6)	115	687	687
Pressures within Community Placements and Childrens Residential C		1,392	1,462
Pressures within Care Homes and Care at Home		4,190	4,316
Prescribing Pressures @ 10% (NHS budget assumptions)		3,484	3,833
Revised Budget Gap @ September 2024	4,401	15,260	21,378
Health Care	(92)	5,518	7,590
Social Care	4,493	9,742	13,788
Revised Budget Gap @ September 2024	4,401	15,260	21,378

The HSCP's Chief Officer and Chief Financial Officer continue to meet with both NHS Greater Glasgow and Clyde and West Dunbartonshire Council Chief Executives to consider the forecast outturn.

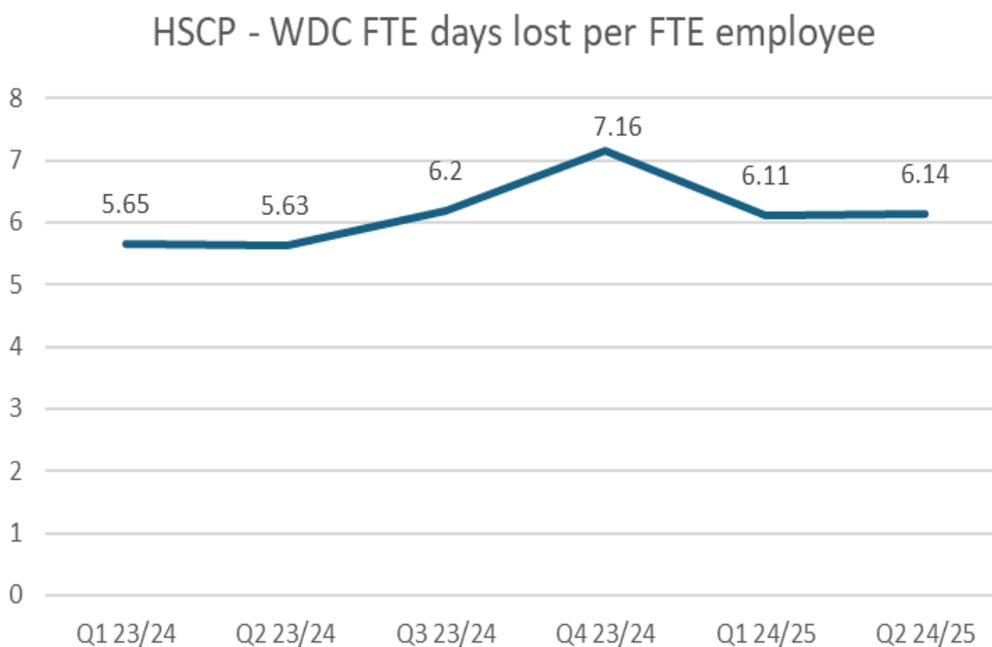
While the projected overspend has increased from Quarter 1, a range of recovery actions has made a positive impact. The Senior Management Team has focussed on minimising the projected overspend where possible, through actions including reviews of individual care packages across a range of services, ongoing vacancy management and increasing levels of income. While the anticipated financial benefit arising from these recovery measures is encouraging, work will continue with the aim of addressing the remaining pressures to minimise the impact on overall reserves.

Work continues to develop and enhance a range of savings options for 2025/26 by the Senior Management Team and an update is provided in the Period 9 Financial Performance Update Report as a separate report within the 28 January 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 higher during July to September 2024 (6.14 days) than in the previous quarter April to June 2024 (6.11) and in the same period in 2023 (5.63 days).

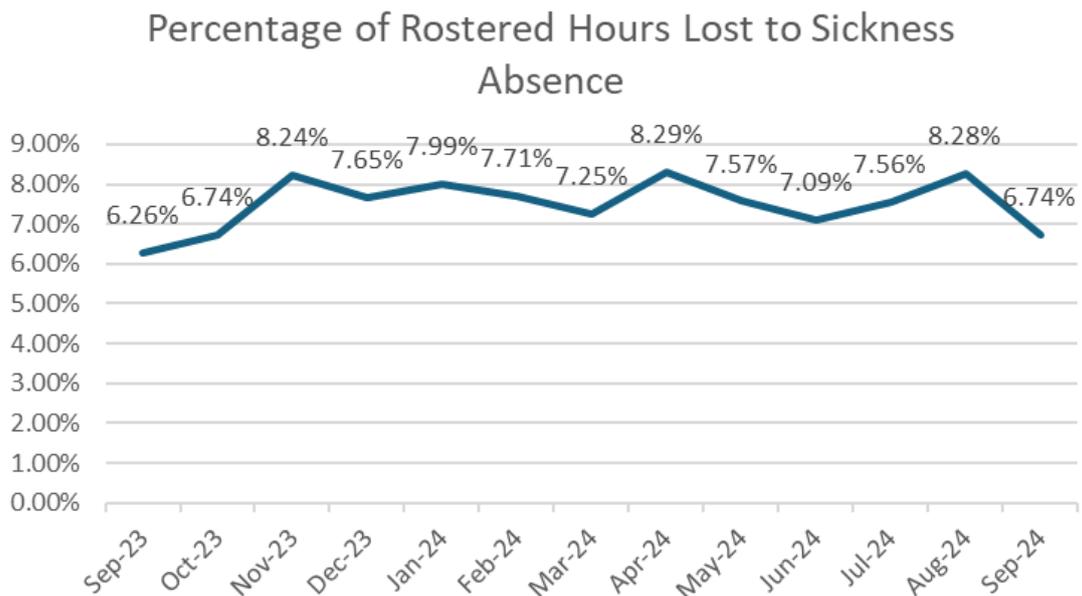


Nationally, West Dunbartonshire Council (all non-teaching staff) absence is published by the Improvement Service through the Local Government Benchmarking Framework. Latest figures are for 2023/24 where WDC had a higher number of Full Time Equivalent (FTE) days lost per employee at 15.06 than the Scotland

figure of 13.89 but had improved slightly on the previous year's figure of 15.32 and had moved from 27th lowest (or 6th highest) in Scotland to 24th lowest (9th highest).

	WDC	Scotland	Ranking 1 - lowest to 32 - highest FTE days lost per employee
2020/21	8.38	9.58	8
2021/22	13.28	12.17	23
2022/23	15.32	13.21	27
2023/24	15.06	13.89	24

NHS HSCP staff absence is reported monthly. Absence rates in September 2024 were slightly higher than in September 2023 but lower than in any month since November 2023.



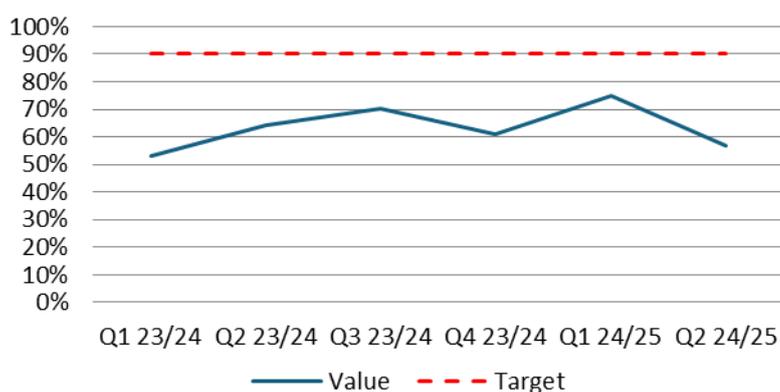
West Dunbartonshire Health and Social Care Partnership Exceptions Reporting: Quarter 2 July to September 2024

Performance Area: Psychological Therapies

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 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	57%	90%	N			75%	64.3%	

% 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%
Q2 24/25	57.0%	90%



Key Points:

77 of the 135 people who started psychological therapies between July and September 2024 did so within 18 weeks of referral.

Staff vacancies within psychology and across the multi-disciplinary teams continue to impact on waiting times.

No success as yet in recruiting to ongoing Band 8A Psychologist vacancy within the Primary Care Mental Health Team.

Improvement Actions:

Continuing to actively recruit to the Band 8A Psychologist vacancy within the Primary Care Mental Health Team.

The multi-disciplinary team are being encouraged to consider the Psychological Therapies Service group as a Psychological Therapies resource when appropriate for the client.

Goldenhill and Riverview are jointly piloting the use of an Enhanced Psychological Practice placement, NHS Education for Scotland funded post, providing psychological interventions. Psychology trainee providing clinical input appropriate to stage of training.

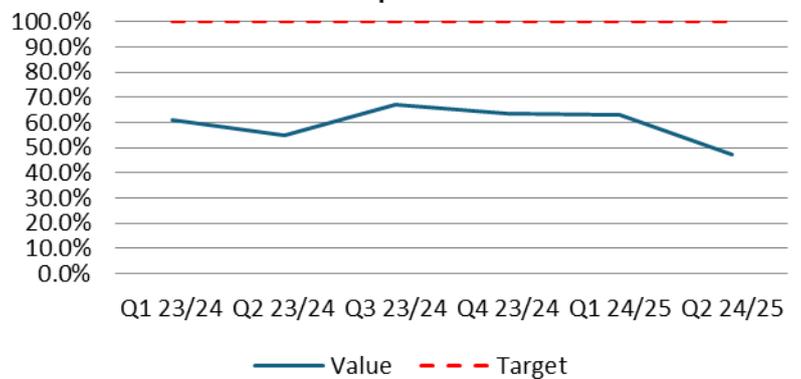
Cognitive Behavioural therapist employed (0.6 whole time equivalent) to work across the community mental health teams to support with the waiting list.

Performance Area: Adult Support and Protection

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 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	47.4%	100%	N			63%	55%	

% 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%
Q2 24/25	47.4%	100%



Key Points:

9 of the 19 adults discussed at an Adult Support and Protection Initial Case Conference between July and September 2024 had the appropriate assessments and plans recorded on CareFirst.

Improvement Actions:

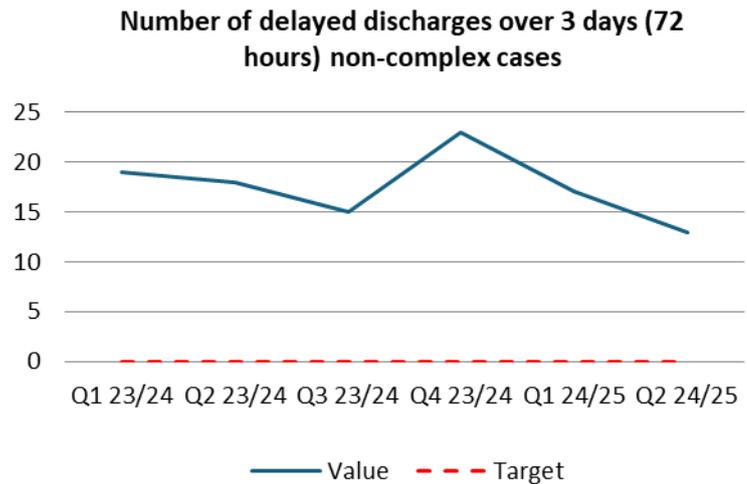
A meeting took place on 5th September 2024 with all Senior Social Worker chairs of Adult Support and Protection Case Conferences. The purpose of the meeting was to discuss outstanding actions in relation to Adult Support and Protection work and this included seeking commitment to ensuring all processes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

Processes being put in place to highlight recording gaps and this will continue to be monitored in line with this reporting.

Performance Area: Delayed Discharge

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 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	13	0	N			17	18	

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
Q2 24/25	13	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.

The average number of complex and non-complex daily delays was 25 compared with 44 in the previous quarter. There has been significant improvement in the number of bed days lost to delayed discharges with a 41% reduction on the previous quarter, April to June 2024, for all delays and a 50% reduction for complex delays.

Improvement Actions:

Short term trajectories for West Dunbartonshire HSCP were developed in conjunction with the Scottish Government and NHS Greater Glasgow and Clyde. The agreed target was a minimum reduction to 24 delayed discharges across Acute and Mental Health by October 2024.

Significant efforts to tackle the number of delays meant this trajectory was achieved ahead of timescale and West Dunbartonshire was moved from a status of ‘Moderate Reductions Required’ to ‘Remain Low’ by NHS Greater Glasgow and Clyde.

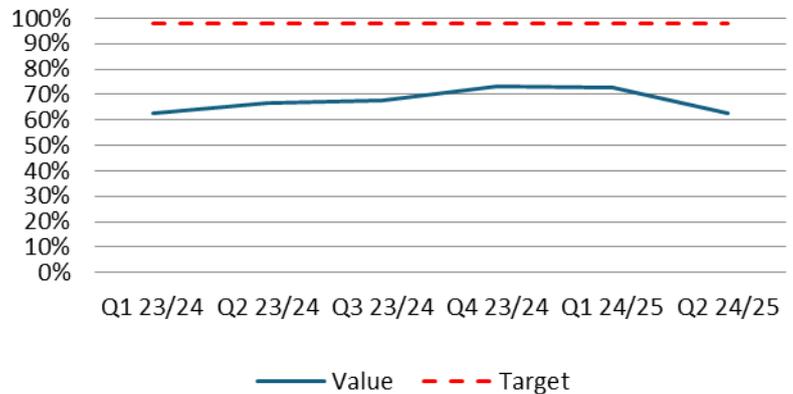
The Community Hospital Discharge Team continue to review internal and external pathways to embed improvement activity and demonstrate sustainable improvement. An example of an external pathway is a test of change currently under development in partnership with acute sites. This is to develop and test a tool that would allow wards to identify people that may require a social work assessment and make an early referral to the team. The impact of this tool, if successful, would be: an increase in appropriate referrals to the Community Hospital Discharge Team; earlier interventions for those who meet the criteria; a reduction in bed days lost; and a reduction in those becoming delays.

Performance Area: Criminal Justice Social Work

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 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.	62.7%	98%	N			72.8%	66.9%	
36	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	52.1%	80%	N			28.4%	51.1%	

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

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%
Q2 24/25	62.7%	98%

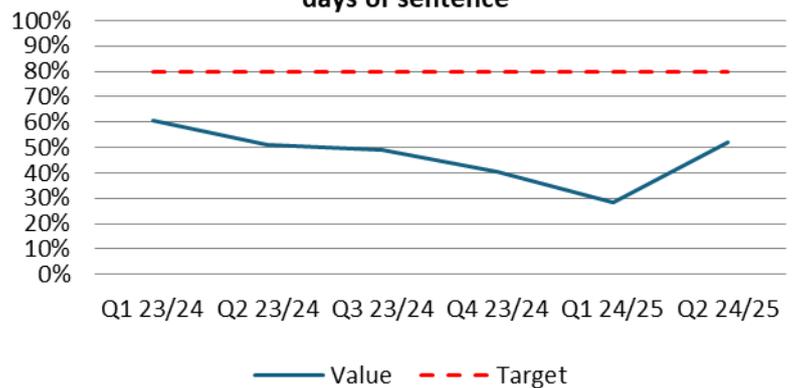


Q1 23/24 Q2 23/24 Q3 23/24 Q4 23/24 Q1 24/25 Q2 24/25

— Value - - - Target

% Unpaid work and other activity requirements commenced (work or activity) within 7 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%
Q2 24/25	52.1%	80%
Q3 24/25	16.9%	80%



Q1 23/24 Q2 23/24 Q3 23/24 Q4 23/24 Q1 24/25 Q2 24/25

— Value - - - Target

Key Points:

There were requests for 255 Justice Social Work Reports to Courts between July and September 2024. An increase of 5.4% on Quarter 2 2023/24. Figures indicate an average of 62.7% 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 2 was 104 with 71 of these having an unpaid work requirement. Of those 104 imposed orders, 71.2% of individuals attended an induction session within 5 working days of sentence. Service users attending work placements within 7 days has increased from 28.4% to 52.1%. 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:

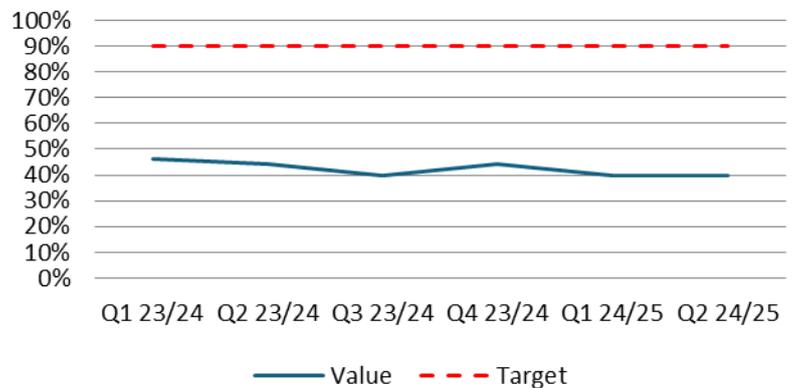
Recruitment to a vacant qualified Social Worker post has been completed and will support court services and the preparation of reports to Court.

Performance Area: MSK Physiotherapy

Ref	Performance Indicator	Q2 2024/25					Q1 2024/25	Q2 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 - WDHS CP	40%	90%	N			40%	44%	

% of patients seen within 4 weeks for MSK physiotherapy services

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%
Q2 24/25	40%	90%



Key Points:

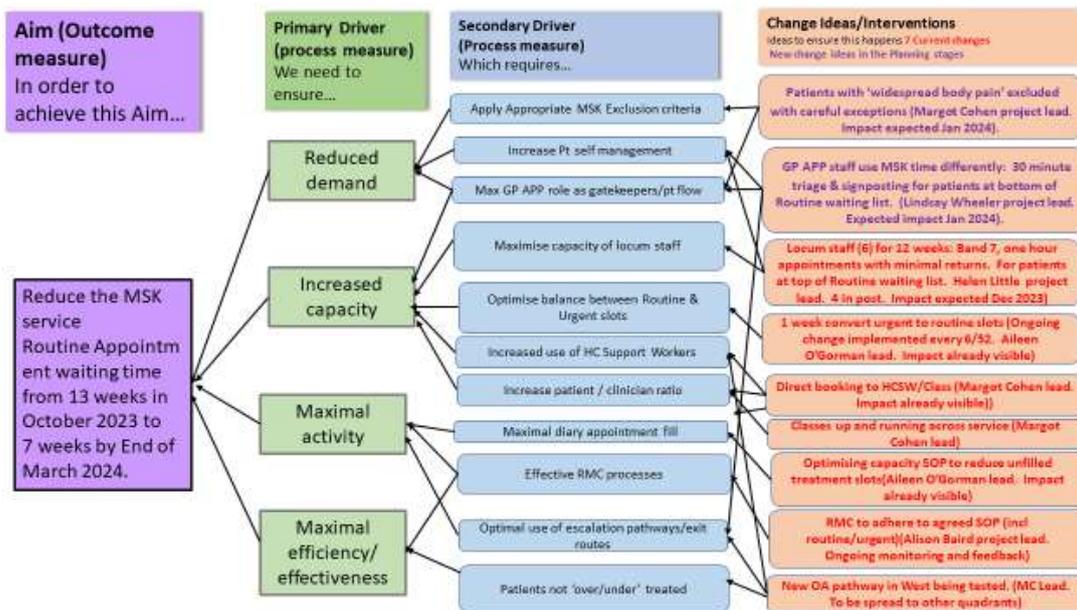
The number of patients waiting for a routine appointment over the 4 week target continues to rise in Quarter2 due to the increase in demand. The use of agency staff was discontinued in February 2024 due to financial pressures. Numbers waiting for a routine appointment have increased despite ongoing focus to try and address routine waiting times.

The maximum wait for a routine appointment has remained static within Quarter 2 despite the ongoing rise in demand. Throughout Quarter 2 the maximum wait for a routine appointment has been 13 weeks.

Improvement Actions:

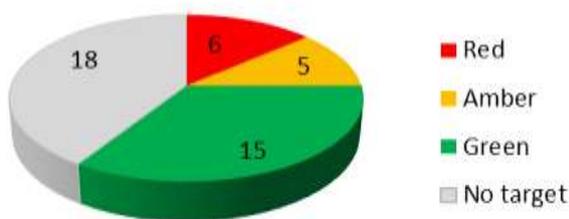
Waiting times remains a priority project within the service and the 13% increase in demand across Greater Glasgow and Clyde within 2023/24 and further 9% rise in January to September 2025 has meant that some

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.

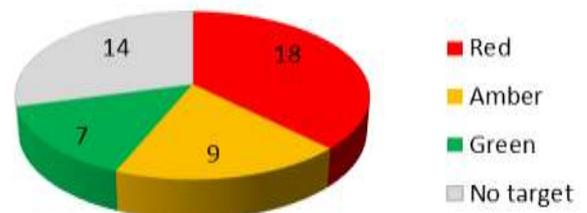


Summary of Strategic Plan Key Performance Indicators

Quarter 2: July to September 2024 (Partial Data)



Quarter 1: April to June 2024 (Full Data)



West Dunbartonshire Health and Social Care Partnership Complaints Reporting: Quarter 2 July – September 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.

During July to September 2024 the following learning points or actions were identified through the investigation of complaints received by the HSCP.

Service Area	Lessons Learned/Actions Taken
Mental Health, Learning Disability & Addictions	In relation to communication, currently rolling out additional training for all staff around customer service and ensuring that all calls are logged on the electronic system correctly. This should improve experience going forward.

SPSO Indicator	Measure	Q1 23/24	Q2 23/24	Q3 23/24	Q4 23/24	Q1 24/25	Q2 24/25
2	Number of Stage 1 complaints (whether escalated to Stage 2 or not)	54	63	40	57	73	83
	Number of complaints direct to Stage 2	16	15	19	26	27	10
	Total number of complaints	70	78	59	83	100	93
3	% closed within timescale - Stage 1	Not available*					
	% closed within timescale - direct to Stage 2	31%	40%	47%	46%	55%	40%
	% closed within timescale - escalated to Stage 2	N/A	N/A	N/A	N/A	N/A	50%
4	Average response time - Stage 1	Not available*					
	Average response time - direct to Stage 2	24	20	18	25	23	21
	Average response time - escalated to Stage 2	N/A	N/A	N/A	N/A	N/A	31

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

Indicator 5: Outcomes of Complaints

Stage 2 – Quarter 2 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%
Total	5	11		4	11		4	13		12	12	

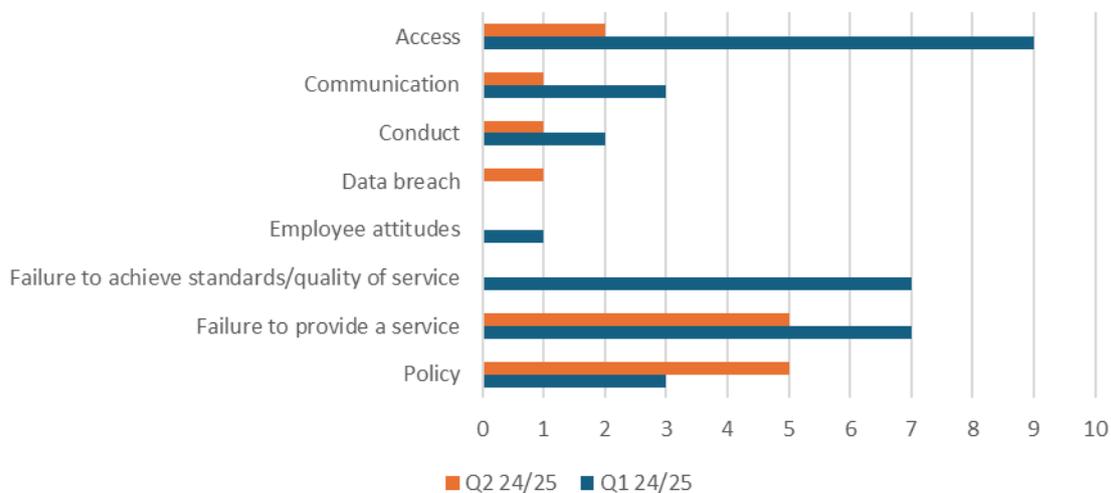
*2 ongoing at time of reporting

Outcome	Q1 24/25			Q2 24/25		
	NHS GGC	WDC*	% of total	NHS GGC	WDC*	% of total
Fully Upheld	0	3	12%	0	0	0%
Partially Upheld	2	5	27%	0	5	45%
Not Upheld	10	6	62%	3	3	55%
Unsubstantiated	0	0	0%	0	0	0%
Total	12	14		3	8	

* 1 ongoing at time of reporting

* 1 ongoing

Themes of Stage 2 Complaints 2024/25



Please note a complaint may cover multiple themes.