

## **West Dunbartonshire Health and Social Care Partnership Performance Report 2025/26: Quarter 2 July to September 2025**

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 have been reviewed for 2025/26 and provisionally used in this report pending final approval. Delayed discharge targets have been reviewed in line with performance to August 2025 and an improvement trajectory to March 2026.

### **Key Highlights/Challenges**

A projected overspend of £2.559m (1.18%) after net application of earmarked reserves of £1.016m are accounted for.

Continued financial pressures in relation to care at home services and ongoing demand for supporting children and young people in both community and residential placements.

Over 98% of people starting drug or alcohol treatment within 3 weeks of referral in Quarter 1.

Significant improvement in Adult Protection recording.

Development and implementation of a Homecare Dashboard to allow detailed weekly monitoring of service and review activity.

All homecare service users receiving personal care, reflecting appropriate targeting of resources.

While more than 98% of carers feel willing to continue in their caring role, just over 94% feel able to continue with their role.

All children and young people continue receiving Child and Adolescent Mental Health Services treatment within 18 weeks of referral and an average wait of 4 weeks.

A significant delay in receiving fully validated unscheduled care data from Public Health Scotland. Emergency admissions and unscheduled bed days data up to December 2024 only and Accident and Emergency Attendance data to June 2025. More timely NHSGGC monthly data being used for internal monitoring purposes.

Less than half of people waited less than the target time of 18 weeks for Psychological Therapies treatment.

Delay in securing financing to recruit to a Clinical Associate in Applied Psychology (CAAP) post vacated in August 2025.

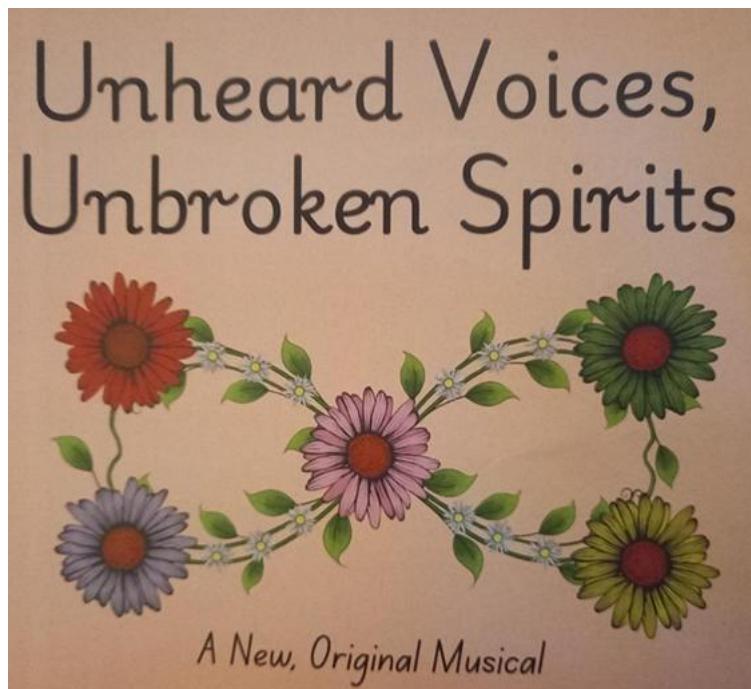
The temporary moratorium of one care home within West Dunbartonshire and limited bed availability in other care homes, along with capacity challenges in specific areas within Care at Home, have contributed to the significant increase in delayed discharges on the previous quarter, April to June 2025.

Long term sickness absence within Criminal Justice Social Work meaning an inability to allocate orders within National Standards and continued challenges with meeting targets.

Continued challenges in meeting MSK Physiotherapy waiting times.

WDC HSCP staff absence has continued to fall during July to September after peaking at 7.02 in January to March 2025. While NHS HSCP staff has risen in September, it was at its lowest point in the last 3 years in August 2025.

Voices of the Promise: The development of 'Unheard Voices, Unbroken Spirits' a new original musical written and performed by young people with care experience from across West Dunbartonshire, which will be performed in Clydebank Town Hall and the Denny Civic Theatre late October/early November.



## 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	
	Alert
	Warning
	OK
	Unknown
	Data Only

Target Type	
N	National Target
L	Local Target
M	Monitoring only – no target set

Short Term Trends	
	Improving*
	No Change
	Getting Worse*

\*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 2025/26					Q1 2025/26	Q2 2024/25	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend			
1	Percentage of carers who feel able to continue in their caring role when asked through their Adult Carer Support Plan	94.2%	95%	L			97.4%	88.7%	
2	Percentage of carers who feel willing to continue in their caring role when asked through their Adult Carer Support Plan	96.2%	95%	L			98.7%	95.2%	
3	Number of Adult Carer Support Plans completed	52	N/A	M			77	65	
4	Balance of Care for looked after children: % of children being looked after in the Community	89.2%	90%	N			89.3%	90.3%	
5	Number of Looked After Children	473	N/A	M			484	475	
6	Number of Looked After children looked after in a residential setting	51	N/A	M			52	46	
7	Number of Looked After children looked after at home with parents	87	N/A	M			86	80	
8	Number of Looked After children looked after by foster carers	118	N/A	M			120	118	
9	Number of Looked After children looked after in other community settings	217	N/A	M			226	231	

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend			
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			4	3	
12	Percentage of patients who started Psychological Therapies treatments within 18 weeks of referral	48.1%	90%	N			48.5%	57%	
13	Percentage of clients waiting no longer than 3 weeks from referral received to appropriate drug or alcohol treatment that supports their recovery	Published December	90%	N	Not yet available	Not yet available	98.4%	97.8%	

## Safe and Thriving Communities

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend			
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 and are working to address this issue.							
16	Number of Child Protection investigations	77	N/A	M			86	91	
17	Number of children on the Child Protection Register at end of reporting period (Excluding temporary and transfers in)	70	N/A	M			69	54	
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	M		Not yet available	145	58	
19	Number of children referred to the Scottish Children's Reporter Administration (SCRA) on offence grounds	Not yet available	N/A	M		Not yet available	31	30	
20	Percentage of Adult Support and Protection clients who have current risk assessments and care plan/protection plan	100%	100%	N			64.3%	47.4%	
21	Number of delayed discharges over 3 days (72 hours) non-complex cases	27	0	N			22	13	
22	Number of bed days lost to delayed discharge 18+ All reasons	4,061	3,420	L			3,512	2,327	

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend			
23	Number of bed days lost to delayed discharge 18+ Complex Codes	1,865	1,422	L			1,303	702	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	3,307	2,694	L			2,927	1,724	
25	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	1,318	1,049	L			929	410	
26	Number of clients receiving Home Care Pharmacy Team support	251	290	L			256	298	
27	Number of people receiving Telecare/Community Alarm service - All ages	1,813	1,894	L			1,818	1,851	
28	Number of people receiving homecare - All ages	1,138	N/A	M			1,116	1,237	
29	Number of weekly hours of homecare - All ages	8,286	N/A	M			7,242	9,143	
30	Percentage of people who receive 20 or more interventions per week	39.8%	40%	L			44.4%	46.3%	
31	Percentage of homecare clients receiving personal care	100%	99%	L			99.6%	99.7%	
32	Number of people receiving reablement homecare	234	N/A	M			113	61	
33	Number of hours of reablement homecare	418	N/A	M			153	184	

## Equal Communities

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend			
34	Percentage of Criminal Justice Social Work Reports submitted to court by noon on the day prior to calling.	64.8%	98%	N			69.6%	62.7%	
35	Percentage of Community Payback Orders attending an induction session within 5 working days of sentence.	69.2%	80%	N			67.7%	71.2%	
36	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	12.8%	80%	N			32.9%	52.1%	
37	Percentage of children from BME communities who are looked after that are being looked after in the community	81.3%	90%	L			81.3%	91.3%	

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	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	0%	80%	L			50%	100%	
39	Percentage of people under 65 consenting to a referral for benefits maximisation at point of assessment/review	18.9%	N/A	M			25.8%	27%	
40	Percentage of people aged 65 and over consenting to a referral for benefits maximisation at point of assessment/review	4.9%	N/A	M			9.1%	10%	
41	Percentage of females consenting to a referral for benefits maximisation at point of assessment/review	7.5%	N/A	M			8.5%	14%	
42	Percentage of males consenting to a referral for benefits maximisation at point of assessment/review	9.6%	N/A	M			17.1%	16%	

Healthy Communities									
Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	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	Not yet available	2,338	
44	Number of emergency admissions aged 65+	Not yet available	1,066	L	Not yet available	Not yet available	Not yet available	1,257	
45	Emergency admissions aged 65+ as a rate per 1,000 population	Not yet available	60	L	Not yet available	Not yet available	Not yet available	69.2	
46	Number of unscheduled bed days 18+	Not yet available	20,094	L	Not yet available	Not yet available	Not yet available	21,914	
47	Unscheduled acute bed days (aged 65+)	Not yet available	14,565	L	Not yet available	Not yet available	Not yet available	15,571	
48	Unscheduled acute bed days (aged 65+) as a rate per 1,000 population	Not yet available	818	L	Not yet available	Not yet available	Not yet available	857.1	
49	Number of Attendances at Accident and Emergency 18+	Not yet available	5,005	L	Not yet available	Not yet available	Not yet available	6,294	
50	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSSCP	30%	90%	N			31%	40%	
51	Prescribing cost per weighted patient (Annualised)	Not yet available	£187.73	N	Not yet available	Not yet available	£179.35	£192.24	
52	Compliance with Formulary Preferred List	Not yet available	78%	N	Not yet available	Not yet available	74.28%	74.54%	

## Financial Update

The HSCP Board meeting on 25th November 2025 considered the following financial papers:

- 2024/25 Financial Performance Report as at Period 6 (30th September 2025)

The financial performance report provided an update on the position to 30th September 2025 and a projection to 31st March 2026 based on Quarter 2 activity and performance.

The financial projection based on Quarter 2 data reported an overspend of £2.559m (1.18%) after net application of earmarked reserves of £1.016m are accounted for. There continues to be financial pressures in relation to care at home services and ongoing demand for supporting children and young people (in both community placements and other residential accommodation).

The report highlighted the impact of the current overspend projection and an update to pay and non-pay inflationary assumptions on the budget gaps for 2026/27 a budget gap of circa £12m now anticipated as reported below.

WD HSCP - Composition of Budget Gaps	Health Care £000	Social Care £000	Total HSCP £000
Recurring Budgets (excluding Set Aside)	118,692	93,632	212,324

### Net Expenditure Pressures as at September 2025

#### Pay Pressures

2025/26 Pay Uplift - based on agreed uplifts		565	565
2026/27 Pay Uplift - based on agreed uplifts	1,437	1,941	3,378
Increase in Local Authority Eer's Superannuation		3,258	3,258

#### Non Pay Budget and Inflationary Pressures

Other Inflationary Uplifts	289	232	520
Cost of Current Level of Service Adjustments		1,345	1,345
New Burdens / New Policy Initiatives / Budget Removal		1,761	1,761
WWIT		(751)	(751)

#### National Budget Pressures

Scottish Living Wage		2,904	2,904
Demographic Pressures		1,752	1,752

#### Other Budget Pressures

Adjustment to previously approved options	432	1,003	1,435
Prescribing	1,379		1,379

2026/27 Estimated Budget	122,230	107,642	229,872
Rollover Funding	(118,692)	(93,635)	(212,328)

Assumed Uplift	(1,672)		(1,672)
Additional Health Pay Funding	(671)		(671)

Assumed Scottish Living Wage Funding		(2,400)	(2,400)
2026/27 Assumed Funding from Partners	(121,035)	(96,036)	(217,070)

Estimated Funding Gap	1,195	11,606	12,801
WD HSCP - Closing the Budget Gaps	Health Care £000	Social Care £000	Total HSCP £000

Options Submitted to Date	761	1,611	2,372
Application of Reserves		3,084	3,084

Total Measures Summarised Above	761	4,695	5,456
Revised Budget Gap	434	6,911	7,345

The 2026/27 budget setting process is ongoing and the Senior Management Team are developing a range of savings options to close the gap for presentation to the HSCP Board early in 2026.

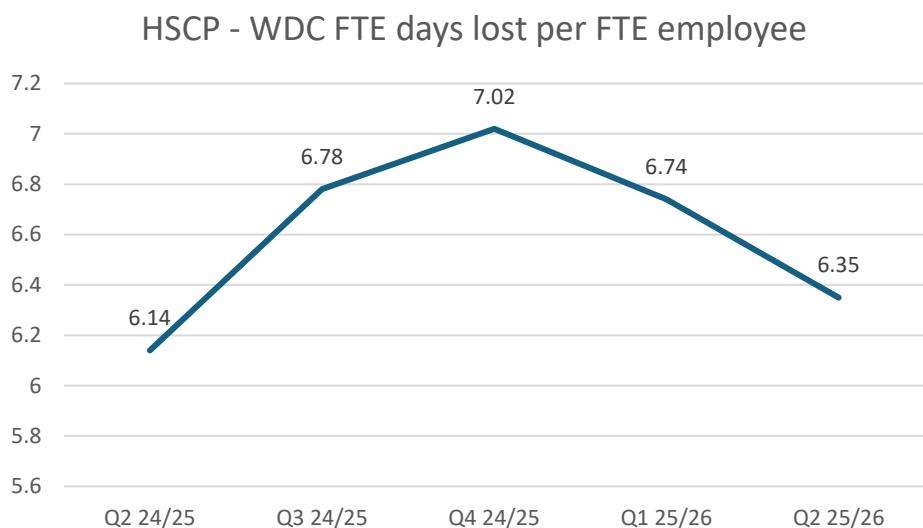
Minimising the projected overspend will be an ongoing priority.

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 reported financial position of the Health and Social Care Partnership.

## 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) days lost per FTE employee each quarter and NHS by the percentage of rostered hours lost to staff absence.

WDC HSCP staff absence has continued to fall during July to September 2025 after peaking at 7.02 in January to March but is slightly higher than the 6.14 in July to September 2024.

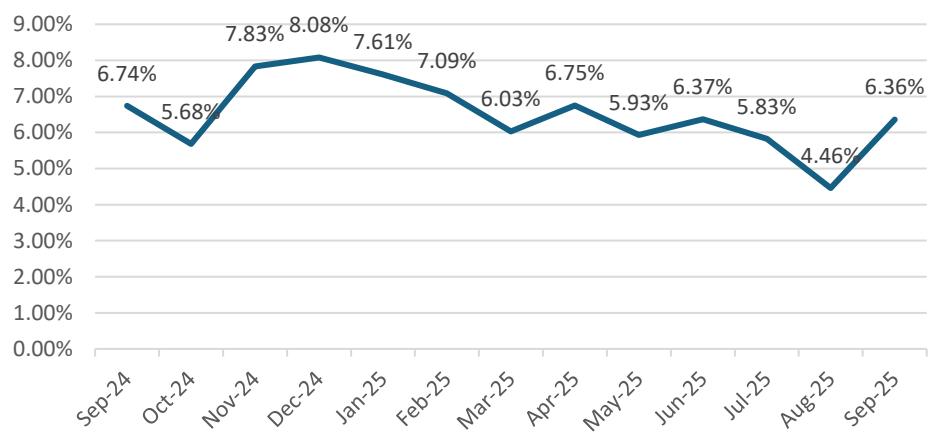


Nationally, West Dunbartonshire Council (all non-teaching staff) absence is published by the Improvement Service through the Local Government Benchmarking Framework. Latest figures are for 2024/25 where WDC had a higher number of Full Time Equivalent (FTE) days lost per employee at 15.87 than the Scotland figure of 14.54. This was slightly higher than the previous year's figure of 15.06 and we continue to have the 9<sup>th</sup> highest figure across Scotland.

	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
2024/25	15.87	14.54	24

NHS HSCP staff absence is reported monthly. Absence rates saw a decreasing trend to August 2025 with the lowest rate in the last year at 4.46%. However, there was a sharp increase in September 2025 to 6.36% which was slightly lower than in September 2024.

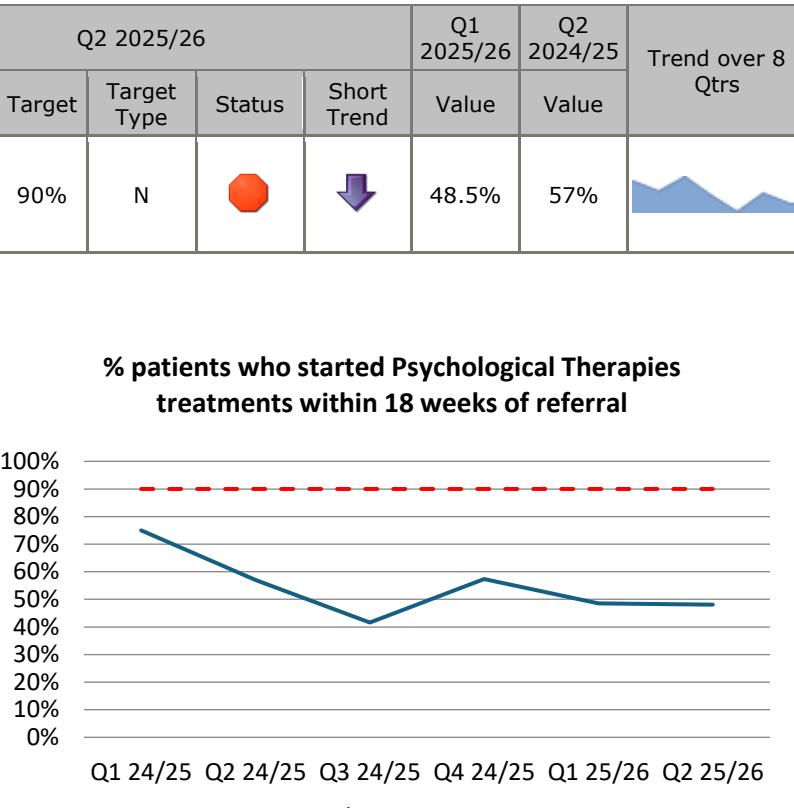
#### HSCP - NHS Percentage of Rostered Hours Lost to Sickness Absence



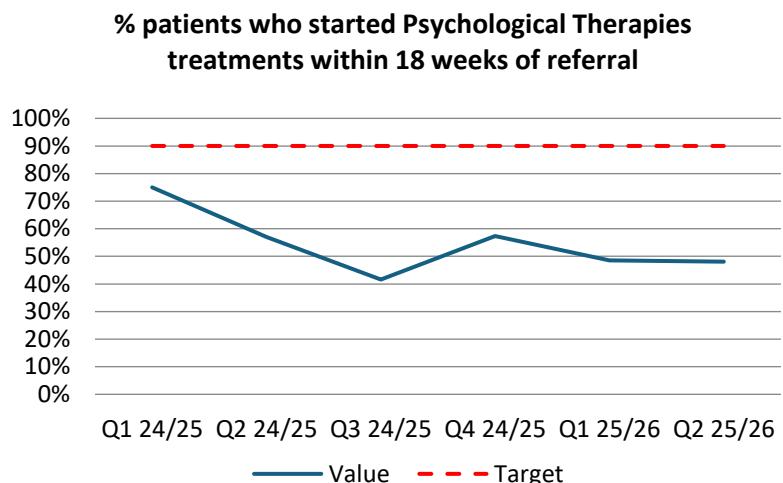
# West Dunbartonshire Health and Social Care Partnership

## Exceptions Reporting: Quarter 2 July to September 2025

### Performance Area: Psychological Therapies

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	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	48.1%	90%	N	<span style="color: red;">●</span>	<span style="color: purple;">⬇</span>	48.5%	57%	

Quarter	Value	Target
Q1 24/25	75.0%	90%
Q2 24/25	57.0%	90%
Q3 24/25	41.6%	90%
Q4 24/25	57.3%	90%
Q1 25/26	48.5%	90%
Q2 25/26	48.1%	90%



#### Key Points:

64 of the 133 people who started psychological therapies between July and September 2025 did so within 18 weeks of referral.

Some clients on the waiting list are awaiting specific treatments that require specialist-trained clinicians, which contributes to longer wait times.

Client preferences are accommodated, including gender of clinician and in some cases mode of delivery: face-to-face or remote sessions.

Team capacity is currently reduced due to one WTE Clinical Associate in Applied Psychology (CAAP) leaving post at the end of August 2025 and there has been a delay in securing financing to recruit to this post.

Long term impact of an 18 month Clinical Psychologist vacancy, appointed to in June 2025 at 0.6 WTE.

An Eye Movement Desensitization and Reprocessing (EMDR) Therapist funded centrally has reduced from 4 days to 1 day a week since Summer 2024 which has reduced our capacity to offer EMDR therapy.

Nurse wellbeing capacity has steadily reduced since 2024, leading to an increased number of referrals from areas without a wellbeing nurse. A further complicating factor is we are being referred more complex cases which take longer to assess, with the outcome often being that no service is suitable.

#### **Improvement Actions:**

Interviewing for one WTE CAAP/CBT therapist and a 12 month fixed term 0.6 WTE CAAP/CBT therapist at end of October 25, unlikely to start until January 2026. Five sessions of backfill of CAAP post approved for 6 months from 3 practitioners are due to start in October/November 2025.

New Psychologist in Riverview Community Mental Health Team will be picking up one clinic per week of treatment for Primary Care Mental Health Teams as of August 2025.

One clinic each to be covered by two Wellbeing Nurses in PCMHT to screen our longest waiters for assessment, approximately 80 patients. These patients were opted-in in September 2025 and the wellbeing nurses will assess them for suitability. This is a pilot and the impact will be evaluated.

Increased hours: CBT therapist increased from 0.6 to 0.8 WTE and Clinical Psychologist increased from 0.6 WTE to full time.

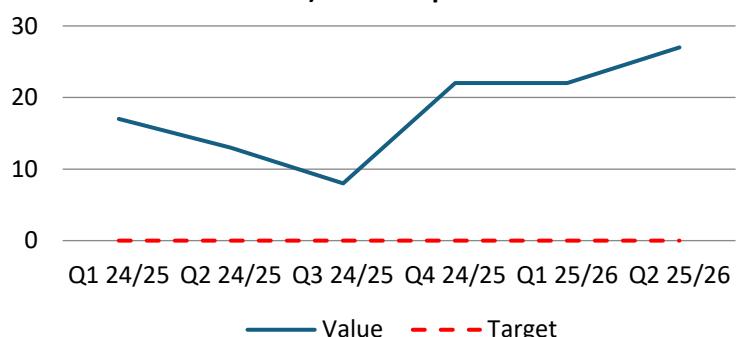
Digital Psychological Therapies team taking some referrals.

## **Performance Area: Delayed Discharge**

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	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	27	0	N			22	13	
22	Number of bed days lost to delayed discharge 18+ All reasons	4,061	3,420	L			3,512	2,327	
23	Number of bed days lost to delayed discharge 18+ Complex Codes	1,865	1,422	L			1,303	702	
24	Number of acute bed days lost to delayed discharges (inc Adults With Incapacity) Age 65 years & over	3,307	2,694	L			2,927	1,724	
25	Number of acute bed days lost to delayed discharges for Adults with Incapacity, age 65 and over	1,318	1,049	L			929	410	

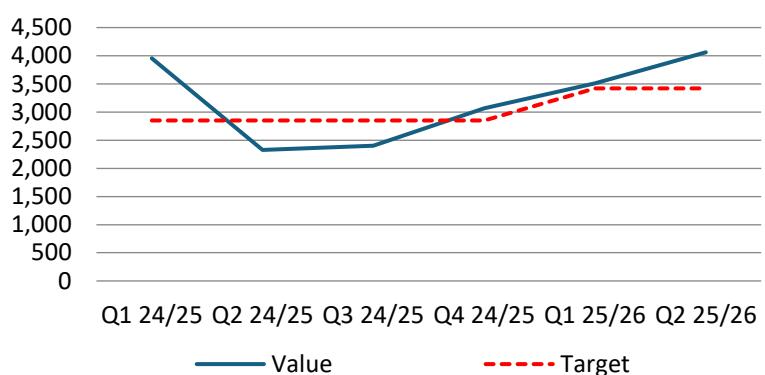
Quarter	Value	Target
Q1 24/25	17	0
Q2 24/25	13	0
Q3 24/25	8	0
Q4 24/25	22	0
Q1 25/26	22	0
Q2 25/26	27	0

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



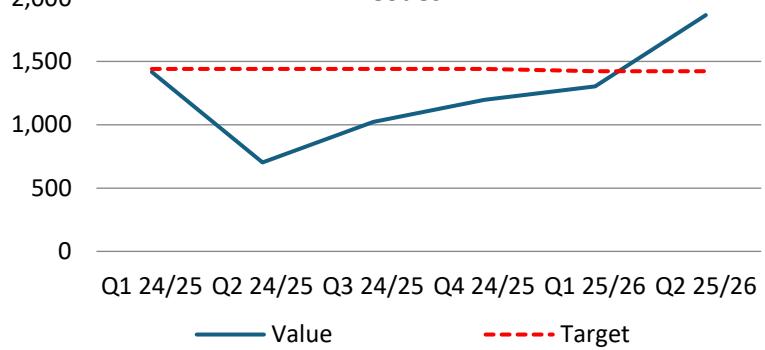
Quarter	Value	Target
Q1 24/25	3953	2850
Q2 24/25	2327	2850
Q3 24/25	2399	2850
Q4 24/25	3064	2850
Q1 25/26	3512	3420
Q2 25/26	4061	3420

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



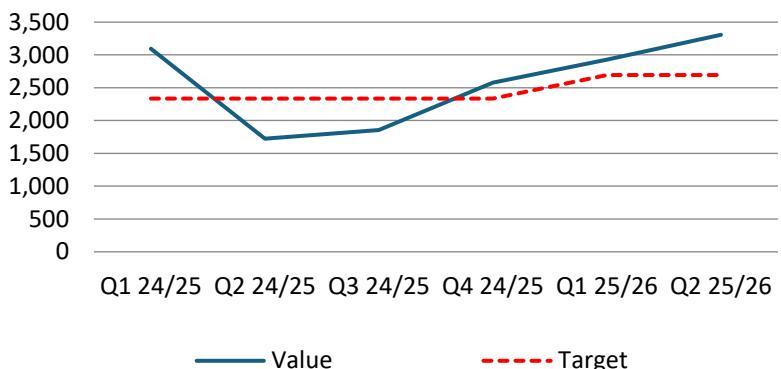
Quarter	Value	Target
Q1 24/25	1416	1440
Q2 24/25	702	1440
Q3 24/25	1023	1440
Q4 24/25	1197	1440
Q1 25/26	1303	1422
Q2 25/26	1865	1422

**Bed Days Lost to Delayed Discharge 18+ Complex Codes**



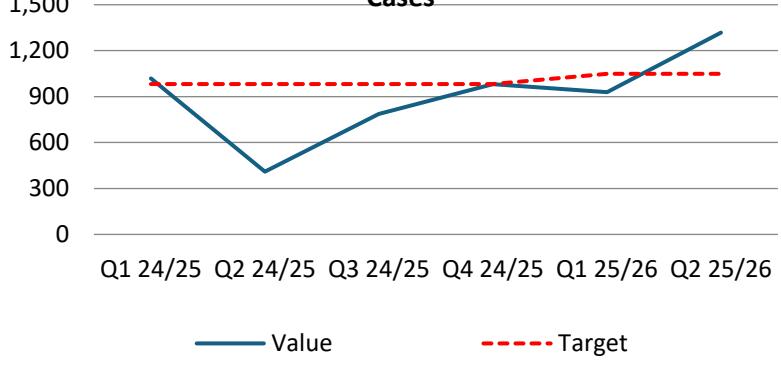
Quarter	Value	Target
Q1 24/25	3097	2335
Q2 24/25	1724	2335
Q3 24/25	1854	2335
Q4 24/25	2577	2335
Q1 25/26	2927	2694
Q2 25/26	3307	2694

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



Quarter	Value	Target
Q1 24/25	1020	982
Q2 24/25	410	982
Q3 24/25	787	982
Q4 24/25	981	982
Q1 25/26	929	1049
Q2 25/26	1318	1049

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



### 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. Local targets have been reviewed in line with performance to August 2025 and an improvement trajectory to a maximum of 27 acute delays and 3 mental health delays by March 2026. This has meant an increase on 2024/25 targets however is a more accurate reflection of our recent performance and efforts to reduce delays.

The average number of complex and non-complex daily delays was 44 compared with 39 in the previous quarter. The temporary moratorium of one care home within West Dunbartonshire and limited bed availability in other care homes has impacted on the pace at which people can be discharged out of acute sites. In addition, there have been capacity challenges in specific areas within Care at Home, leading to an increase in people delayed while waiting for a package of care.

### Improvement Actions:

As above, local trajectories have been set to significantly reduce delays from September 2025 to March 2026.

A new Senior Social Worker will be leading the Hospital Discharge Social Work Team. They will work closely with the Integrated Operations Manager to ensure agreed timescales are met, with enhanced focus on discharging people home to assess.

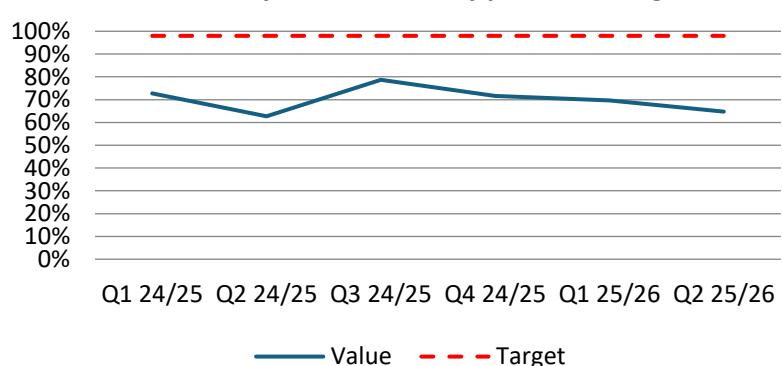
Wider 'whole system' quality improvement activities are being developed, enhancing the existing collaborative approach between the HSCP and high referring wards across NHS GG&C.

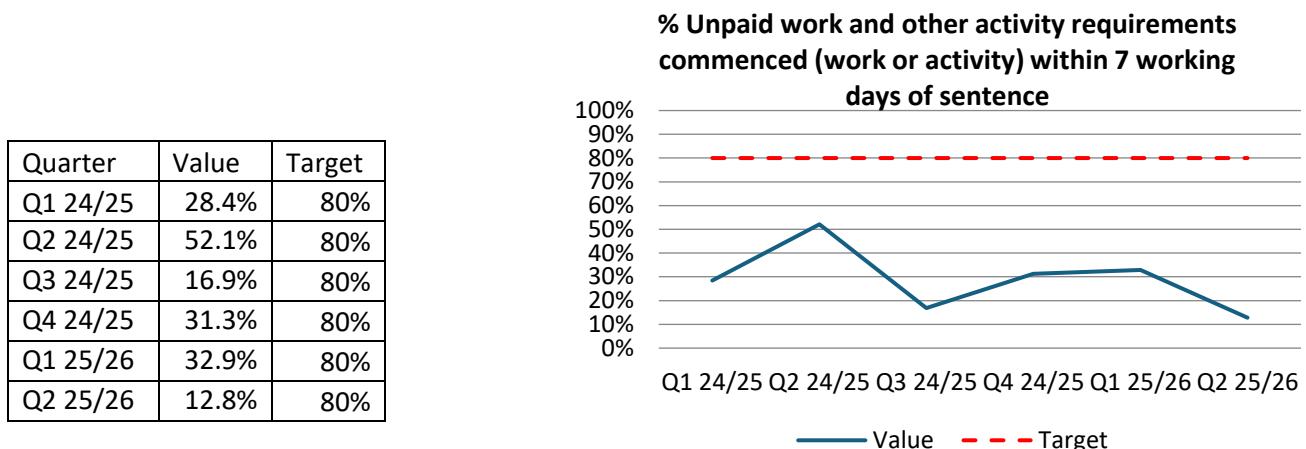
## Performance Area: Criminal Justice Social Work

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	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.	64.8%	98%	N	<span style="color: red;">●</span>	<span style="color: purple;">⬇</span>	69.6%	62.7%	
36	Percentage of Unpaid work and other activity requirements commenced (work or activity) within 7 working days of sentence.	12.8%	80%	N	<span style="color: red;">●</span>	<span style="color: purple;">⬇</span>	32.9%	52.1%	

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

Quarter	Value	Target
Q1 24/25	72.8%	98%
Q2 24/25	62.7%	98%
Q3 24/25	78.7%	98%
Q4 24/25	71.7%	98%
Q1 25/26	69.6%	98%
Q2 25/26	64.8%	98%





#### **Key Points:**

In Quarter 2 there were 281 requests for Justice Social Work Reports to Courts between July and September 2025. An increase of 10.2% on Quarter 2 2024/25. Figures indicate an average of 64.8% 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.

Service users attending work placements within 7 days has decreased from 32.9% in Quarter 1 to 12.8% in Quarter 2 2025/26. The decrease in service users attending work placements has been due to the inability to fund additional work placement supervisors to support an increase in availability of squad placements.

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.

During Quarter 2, we have had two staff absent on long term sick leave and we were unable to allocate orders within National Standards. This has a direct impact on service users commencing unpaid work.

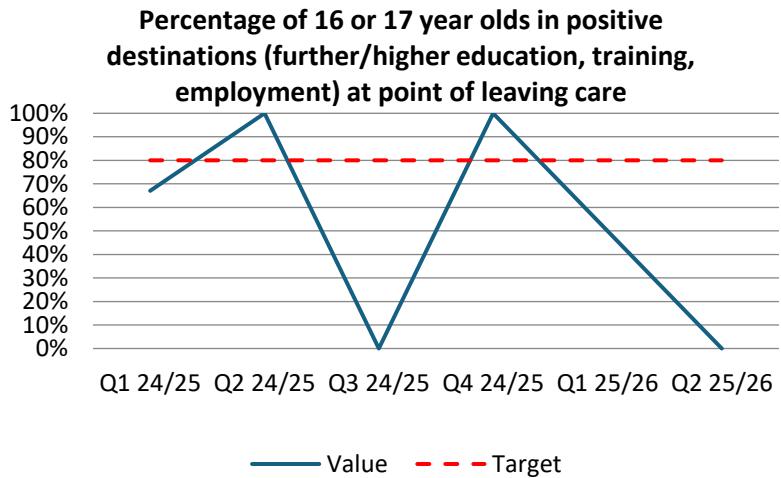
#### **Improvement Actions:**

We require further investment in main grade qualified social worker posts to support the demands placed on the service by additional domestic abuse assessments for Caledonian work and to negate the impact of long-term absence on our ability to meet key performance indicators. We have an agency worker identified and start date to be confirmed. This has been agreed to alleviate the increased demands on our staff. While this is only a short-term solution, it is required to meet the immediate needs of the service.

## Performance Area: Looked After Children

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	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	0%	80%	L			100%	67%	

Quarter	Value	Target
Q1 24/25	67%	80%
Q2 24/25	100%	80%
Q3 24/25*	N/A	80%
Q4 24/25	100%	80%
Q1 25/26	50%	80%
Q2 25/26	0%	80%



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

### Key Points:

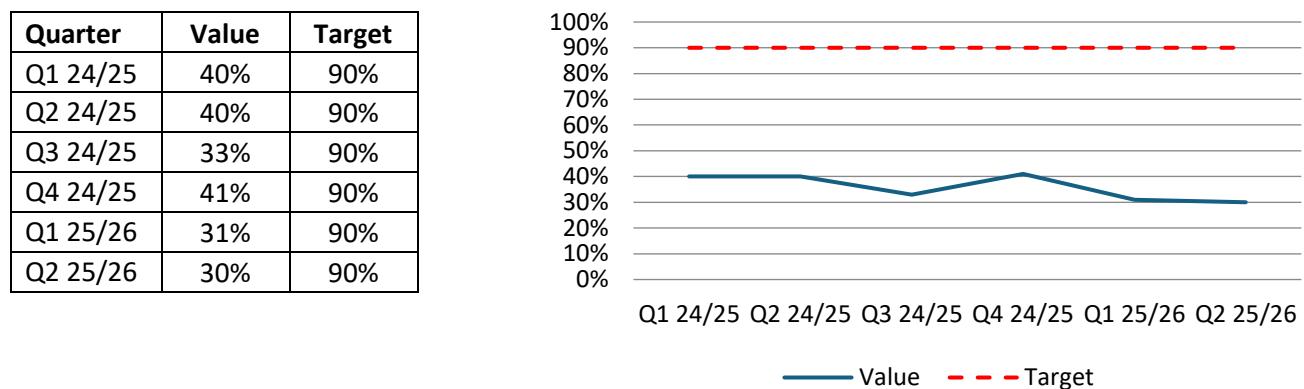
This relates to a very small number of young people and therefore percentages fluctuate more significantly. Numbers are also so low that they are potentially identifiable.

### 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 life skills.

## Performance Area: MSK Physiotherapy

Ref	Performance Indicator	Q2 2025/26					Q1 2025/26	Q2 2024/25	Trend over 8 Qtrs
		Value	Target	Target Type	Status	Short Trend	Value	Value	
50	Percentage of patients seen within 4 weeks for musculoskeletal physiotherapy services - WDHSCP	30%	90%	N			31%	40%	



### Key Points:

Demand for MSK service continues to rise and has risen 20% over the last 2 years. The workforce has not increased to meet rising demand due to financial constraints.

In Quarter 1 the service was challenged in ensuring that all urgent patients were seen within 4 weeks. This was due to several factors. Firstly, as demand has risen, so too has the need for urgent appointments to meet the proportion of demand that relates to urgent referrals. The availability of urgent appointments had been approaching the 4 weeks over several months and in Quarter 1 and throughout Quarter 2 the service reached tipping point where urgent patients could not all be accommodated within the 4 weeks.

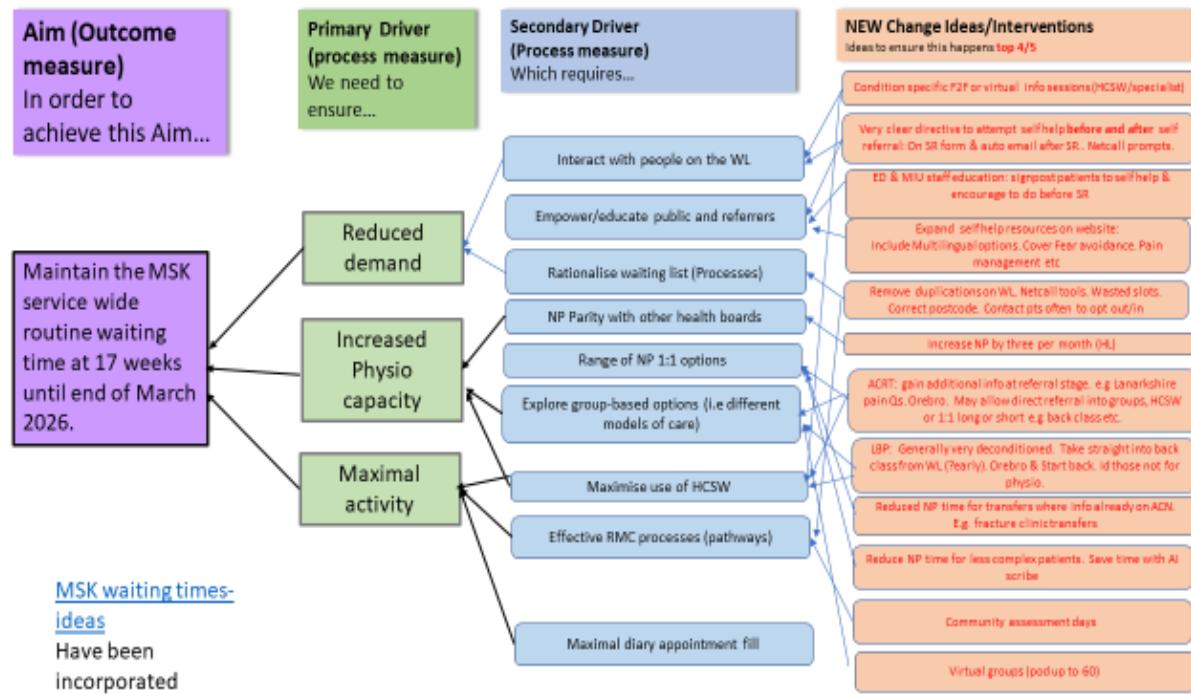
Any urgent appointments not utilised are converted to routine appointments and offered to those who have waited longest. Until the maximum wait for a routine appointment reduces, the percentage of patients seen within 4 weeks will vary minimally as this figure will relate to the proportion of urgent referrals which is reasonably consistent.

### Improvement Actions:

The service took steps to remedy this, but it is taking time to correct. The only way to do this was by prioritisation of urgent patients by converting routine appointments to urgent appointments. This resulted in the maximum routine waiting times for MSK increasing within Quarter 1 and Quarter 2

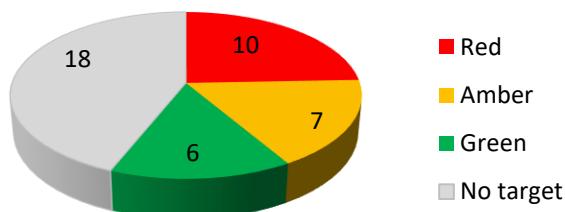
this year. The service continues to do a lot of background work with Referral Management colleagues to ensure that urgent patients are prioritised with no clinical detriment.

The service continues to support orthopaedics by releasing staff to support Orthopaedic Spinal waiting times. The service will be going through an external audit in February 2026 to ensure that long waiters are managed appropriately and that patients are clinically categorised consistently and correctly.

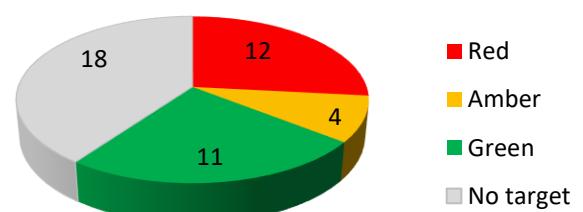


## Summary of Strategic Plan Key Performance Indicators

Quarter 2: July to September 2025  
(Partial Data)



Quarter 1: April to June 2025 (Partial Data)



## **West Dunbartonshire Health and Social Care Partnership Complaints Reporting: Quarter 2 July – September 2025**

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 2025 the following learning points or actions were identified through the investigation of complaints received by the HSCP.

Service Area	Lessons Learned/Actions Taken
Community Older People Team – Social Work	<ul style="list-style-type: none"><li>Communication, internal process review for respite provision, timely allocation and reduction in social care packages of support.</li><li>There has been work done with the teams to ensure effective communication and relationship-based practice is key to their service delivery.</li><li>We have been reviewing and screening more efficiently the activity within the single point of access duty system to ensure that there is not unnecessary delay in responding to needs.</li><li>The delay in timely re-allocation of respite services has an immediate resolution in that we will allow roll-on of respite until annual review can be completed to minimise unnecessary stress for carers. Once reviewed the "rolled over" provision will be deducted from the new allocation.</li></ul>
Community Mental Health Team	<ul style="list-style-type: none"><li>Work to be done on internal processes, communication skills and service delivery going forward including signposting processes that were mentioned within a complaint.</li></ul>
Learning Disability	<ul style="list-style-type: none"><li>The service is currently reviewing a process to enable more timely reviews for service users.</li></ul>
Children's Services	<ul style="list-style-type: none"><li>Regular review/prioritisation of unallocated casework by team manager.</li><li>Permanence Tracking Meetings established to ensure managerial oversight of such cases.</li></ul>

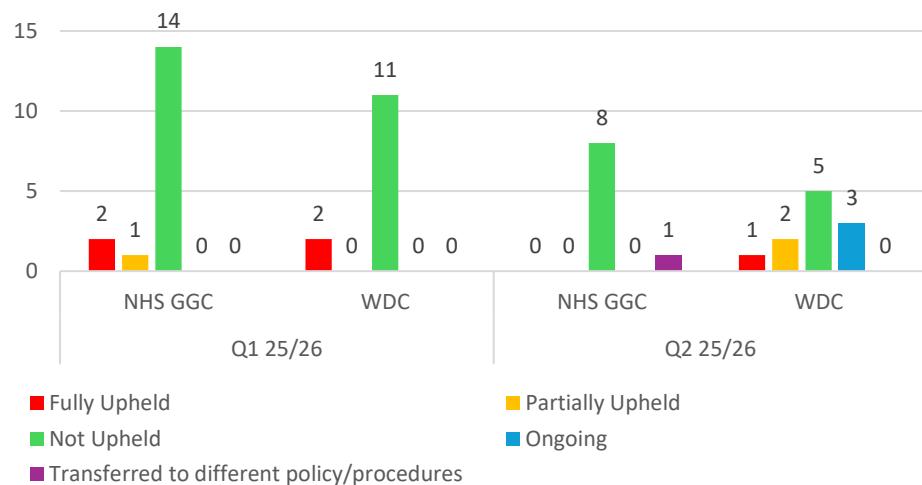
SPSO Indicator	Measure	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25	Q1 25/26	Q2 25/26
2	Number of Stage 1 complaints (whether escalated to Stage 2 or not)	73	83	67	56	56	82
	Number of complaints direct to Stage 2	27	10	17	26	30	19
	Total number of complaints	100	93	84	82	86	101
3	% closed within timescale - Stage 1					Not available*	
	% closed within timescale - direct to Stage 2	55%	40%	65%	68%	80%	74%
	% closed within timescale - escalated to Stage 2	N/A	50%	N/A	N/A	N/A	100%
4	Average response time - Stage 1					Not available*	
	Average response time - direct to Stage 2	23	21	17	22	17	17
	Average response time - escalated to Stage 2	N/A	31	N/A	N/A	N/A	20

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

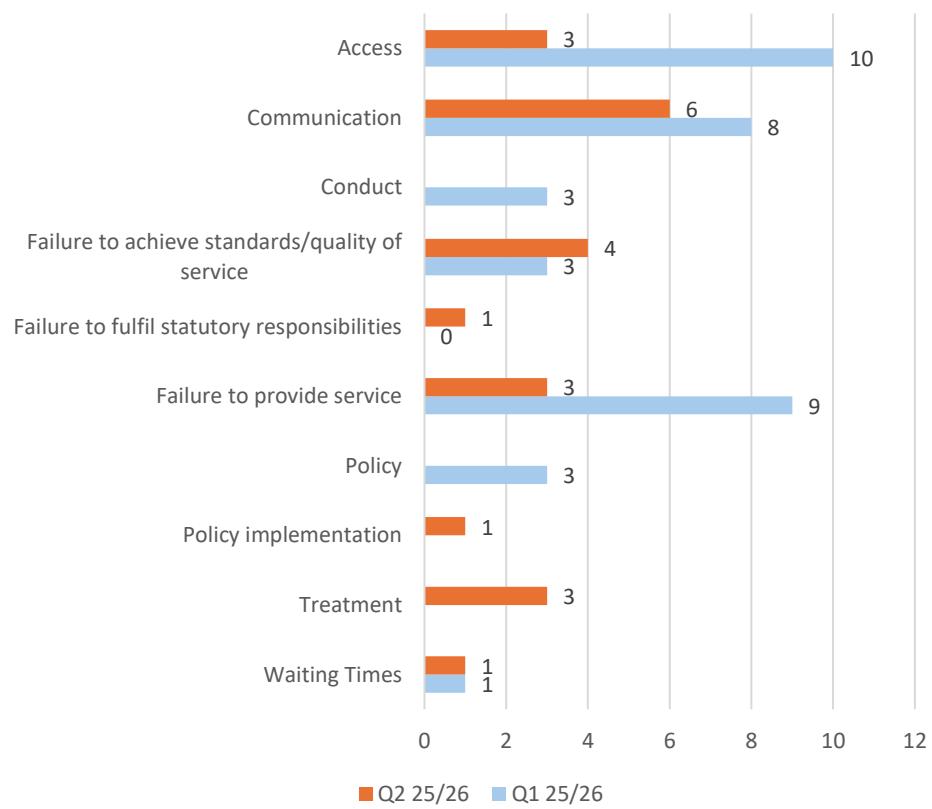
### Indicator 5: Outcomes of Complaints

		Model Complaints Handling Procedure		% of total
Stage 2 Outcomes Q2 2025/26		NHS GG	WDC	
Fully Upheld	0	1		5%
Partially Upheld	0	2		10%
Not Upheld	8	5		65%
Ongoing	0	3		15%
Transferred to different policy/procedure	1	0		5%
Total	9	11		100%

## Stage 2 Outcomes 2025/26



## Themes of Stage 2 Complaints 2025/26



Complaints may cover more than one theme.