

Mr. Keith Redpath,
Director,
West Dunbartonshire CH(C)P,
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Date: 12th January, 2011.
Our Ref: RC/RD/KRedpath120111

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Dear Keith,

**WEST DUNBARTONSHIRE CH(C)P ORGANISATIONAL PERFORMANCE REVIEW:
22ND NOVEMBER, 2010**

I am writing to confirm the outcome and actions agreed at your recent Organisation Performance Review (OPR). Progress against each of the actions outlined below will be considered at your next OPR alongside revisiting those year one actions from your Development Plan that were identified as incomplete or work in progress.

1. ACUTE

1.1. AWI

Delayed discharges caused by AWI were a major issue at our last OPR and performance has since declined further. While your team flagged some actions it did not seem that there was a clear focus on action to address this issue you agreed to ensure the required focus on this issue and we should see a significant and sustained improvement in performance at the next OPR.

2. ADULT MENTAL HEALTH

2.1. Anti-Depressant Prescribing

You agreed to continue to monitor this in order to try and reverse the upward trend.

2.2. Psychological Therapies

You highlighted that the redesign brief was being finalised and expect full implementation by your next OPR.

2.3. PCMHT Waiting Times

You agreed to work towards a target of a maximum four weeks waiting time in relation to Primary Care Mental Health Teams, we will review progress at the next OPR.

3. ALCOHOL AND DRUGS

3.1. Drug Care Plan to Treatment

You agreed to examine the reasons behind the downturn in performance during the last quarter.

3.2. GP Practices Signed Up to Deliver ABIs

I noted your positive performance in this area. You indicated that only two GP practices were not signed up to deliver ABIs and agreed to identify whether these were Keepwell practices.

4. CHILDREN AND YOUNG PEOPLE

4.1. Parenting Strategy

You agreed to ensure that a process to agree a comprehensive parenting strategy was put in place, to include Triple P. Formally progressing through the Council's policy process will ensure support across the Council.

4.2. Breastfeeding Data

The Corporate Performance Team agreed to source CMU breastfeeding data. You are keen to implement the actions identified at the recent Breastfeeding Summit.

4.3. Child Healthy Weight Intervention Programme

You agreed to link with Renfrewshire CHP to learn from their success and explore if this could be replicated in West Dunbartonshire CH(C)P. Catriona Renfrew agreed to ask Linda de Caestecker to review experience from across the system and consider how the programme might be modified.

4.4. Smoking In Pregnancy

You reported that your action plan has been agreed with the Director of Public Health and is currently being implemented. You agreed to ensure local cessation services are focussed on targeting pregnant women.

4.5. IAF

You confirmed that the IAF was being rolled out to all children requiring a multi-agency assessment and that health staff were entering assessment data onto Carefirst, facilitating electronic, real time data exchange.

5. OLDER PEOPLE

5.1. Draft Older People's Integrated Strategy

You confirmed that the consultation on the draft Older People's Integrated Strategy is underway and you expect to be finalised by March/April 2011 for implementation.

6. PRIMARY CARE

6.1. SCI Gateway

Performance continues to be below target and you agreed to follow up and resolve this.

7. SEXUAL HEALTH

7.1. LARC

The Corporate Performance Team will contact Tom Clackson with regards to resolving the data issues.

8. UNPLANNED CARE

8.1. DDA Compliance

You highlighted that both Clydebank and Dumbarton Health Centres were now DDA compliant.

8.2. Accommodation Strategy

It was agreed that the CH(C)P needs to develop an Accommodation Strategy, looking at opportunities for integration with council services, while recognising the particular challenge of Clydebank Health Centre. You also agreed in the short term to meet with Jane Grant with regard to the changes planned for Acute estate.

9. TACKLING INEQUALITIES

9.1. EQIA'S

You agreed to confirm your list of EQIAs with the Corporate Inequalities Team.

10. EFFECTIVE ORGANISATION

10.1. Sickness Absence and e-KSF

The Panel were impressed with your performance in relation to both sickness absence and e-KSF.

11. OPTOMETRY

11.1. Optometry Referral

The issue of direct referrals needs to be resolved urgently with Acute and Catriona Renfrew agreed to action this.

12. CONDITIONS MANAGEMENT

12.1.CMT Report

You agreed to draft a report highlighting progress on conditions management staff redeployment for an early CMT in 2011.

13. FINANCE

13.1.Current Financial Position

Whilst the September financial position is positive, you reported a significant risk due to a decision you had taken to fund a very high cost care package. I confirmed my expectation that the CH(C)P would need to take responsibility for covering the consequences of this decision. Catriona Renfrew agreed to establish a Board-wide overview of significant cost cases and consider the development of an appropriate policy.

Finally, I would like to take this opportunity to thank you and your team for providing a comprehensive overview of performance. A number of performance successes were identified including sickness absence, e-KSF and your efficiency savings programme. We identified a number of challenges over the coming months for the CH(C)P.

Yours sincerely



R. Calderwood
Chief Executive