

# **Quarterly and Annual Performance Report and National Comparisons**

**(January 06 – March 06)  
1<sup>st</sup> April 05 to 31<sup>st</sup> March 06**

*West Dunbartonshire ~ from the banks of Loch Lomond to the shores of the Clyde*





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This is the fourth Quarterly Performance Report, and as such, forms the Annual Performance Report for 2005/06. The report highlights our performance across all services delivered by the Department.

Our performance on statutory performance indicators for 2005/06 is reported against national and comparator group average for the year 2004/05 and all of our performance is measured across a number of key areas from January 2006 until March 2006 as follows:

- Statutory Performance Indicators
- Corporate and Service Objectives, Actions and Local Improvement Targets
- Quality Systems
- Best Value
- Corporate Customer Care Standards

Social Work Services for adults report on a total of eight Statutory Performance Indicators (SPIs) to Audit Scotland each year. Community Care Services have 5 individual SPIs and Criminal Justice, a further 3. Services to Families, Children and Young People report on seven SPIs for children. The indicators are further broken down for example by service type and age group which are represented in the following 28 traffic light reports. The performance sheets in this report highlight performance against a number of areas:

- Annual performance data compared to the Scottish average
- Annual performance data compared to our comparator group average
- Audit Scotland SPI data for all Scottish Councils

Most services have also set targets and a summary of the improvements planned for the forthcoming years is noted in the following performance sheets.

The Performance sheets contain 2 sets of 'traffic lights' that are designed to give an indication of how we are performing.

## **Position**

The 'Position' traffic light signal represents performance in thirds within our comparator authority group. For example, a green light would represent that we are one of the top two performers in our comparator four authorities, amber represents that we are in the middle two and a red would indicate that we are one of the bottom two performers.

### **Community Care (2004/05)**

- The five Performance Indicators form 15 Traffic Light reports. Of these, a total of 7 SPIs were in a red position which indicates a decline in performance, 1 was amber, which indicates that performance is steady, and 7 SPIs were in a green position indicating that performance is improving.

### **Criminal Justice (2004/05)**

- A total of 2 SPIs were in a red position which indicates a decline in performance, none were amber, and 1 SPI was green, indicating that performance is improving.

### **Children and Families (2004/05)**

- The seven Performance Indicators formed 11 Traffic Light reports for 04/05. Of these, a total of 4 SPIs were in a red position which indicates a decline in performance, 2 were amber, which indicates that performance is steady, and 5 SPIs were in a green position indicating that performance is improving.

**Please note that in the traffic light reports below, national and comparator group information relates to 2004/05 as updated information is not currently available. This also applies to the tables at the bottom of each sheet where the West Dunbartonshire figures are for 2005/06 but the national figures relate to 2004/05.**

## **Trend**

The 'Trend' traffic light signal represents improving (green), declining (red) or stationary (amber) annual trends in performance.

### **Community Care**

(2004/05)

- The five Performance Indicators form 15 Traffic Light reports. Of these, a total of 6 SPIs are in a red position which indicates a decline in performance, none were amber, and 9 SPIs were in a green position indicating that performance is improving.

(2005/06) – Based on un-audited figures

- The five Performance Indicators form 15 Traffic Light reports. Of these, 2 SPI is in a red position which indicates a decline in performance, none are amber, and 12 SPIs are in a green position indicating that performance is improving. The trend of the other SPI could not be determined as it is a new indicator

### **Criminal Justice**

(2004/05)

- A total of 3 SPIs are in a red position which indicates a decline in performance.

(2005/06) – Based on un-audited figures

- Of the 3 SPIs 2 are in a red position which indicates a decline in performance, none are amber, and 1 SPI is in a green position indicating that performance is improving.

### **Children and Families**

(2004/05)

- The seven Performance Indicators formed 11 Traffic Light reports for 04/05. Of these, a total of 6 SPIs were in a red position which indicates a decline in performance, 1 was amber, which indicates that performance is steady, and 4 SPIs were in a green position indicating that performance is improving.

(2005/2006) – Based on un-audited figures

- The seven Performance Indicators now form only 10 Traffic Light reports. Of these, 6 SPIs are in a red position which indicates a decline in performance, and 4 SPIs are in a green position indicating that performance is improving.

It should be noted that in some cases, while the trend is Red the performance of the council is still well above the comparator group and national average. An example of this is Indicator 4 – Home Care where, despite a Red Trend we have a Green Position as we remain in second position within Scotland.

A summary of traffic light performance is presented in table 1 below.

## **TABLE 1**

SPI Area	SPI Number	Statutory Performance Indicator	Traffic Light Signal	
			Position	Trend
Community Care	1	Community Care Assessments	Unknown	New
	2a	Residential Accommodation – Staff Qualification - Older People	Unknown	Green
	3	Privacy	Unknown	Green
	4b	Home Care / Home Help – Hours	Unknown	Red
	4c(i)	Home Care / Home Help – Personal Care	Unknown	Green
	4c(ii)	Home Care / Home Help – Evening/Overnight	Unknown	Green
	4c(iii)	Home Care / Home Help – Weekend	Unknown	Green
	5a	Respite Care – Overnights – Older People	Unknown	Green
	5b	Respite Care – Overnights not in care home – Older People	Unknown	Green
	5c	Respite Care – Daytime hours – Older People	Unknown	Green
	5d	Respite Care – Daytime hours not in day centre – Older People	Unknown	Green
	5e	Respite Care – Overnights – People aged 18-64	Unknown	Green
	5f	Respite Care – Overnights not in care home – People aged 18-64	Unknown	Red
	5g	Respite Care – Daytime hours – People aged 18-64	Unknown	Green
5h	Respite Care – Daytime hours not in day centre – People aged 18-64	Unknown	Green	
Criminal Justice	6d	Social Enquiry Reports – Submitted to court by due date	Unknown	Red
	7c	Probation - % of new probationers seen within one week	Unknown	Green
	8b	Community Service – Average no. of hours per week to complete orders	Unknown	Red
Children and Families	7b	LAC – Academic Attainment – One Subject	Unknown	Green
	7c	LAC – Academic Attainment – Maths & English	Unknown	Green
	8	LAC – Placements	Unknown	Red
	9	Staff Qualifications	Unknown	Green
	10	Privacy	Unknown	Red
	11a	Respite – Nights	Unknown	Red
	11b	Respite – Hours at home	Unknown	Red
	11c	Respite – Day Care	Unknown	Red
	12	Social Background Reports	Unknown	Green
	13	Supervision	Unknown	Red

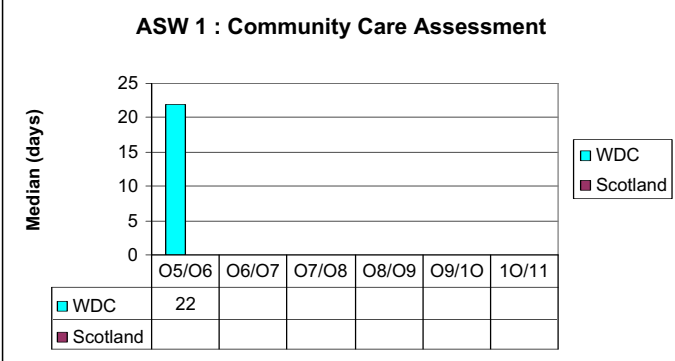
**Statutory Performance Indicators  
&  
Quarterly Monitoring**

**Community Care Services  
Year 2005/06**

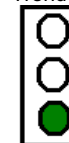
**ASW 1: Community Care Assessment**

**Department: Social Work Services Date: March 2006**

**Section:**

Annual Performance Data	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
 <p><b>ASW 1 : Community Care Assessment</b></p> <table border="1"> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr> <td>05/06</td> <td>22</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> <tr> <td>09/10</td> <td></td> <td></td> </tr> <tr> <td>10/11</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Scotland	05/06	22		06/07			07/08			08/09			09/10			10/11				<p>The departmental service plan has set baseline targets for operational managers across all community care. Managers will monitor assessment activity and ensure that staff works to agreed targets.</p>
Year	WDC	Scotland																					
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Comments	Comparator Group Information	Progress in 05/06																					
<p>This new indicator measures the average (median) time taken to provide community care services from first identification of need to first service provision. This is the first year this has been reported and so comparisons and national figures are not available.</p>	<p>Inverclyde, Dundee, Clackmannanshire and North Ayrshire</p>	<p><b>Oct – Dec 05</b>                      313 new clients receiving a service                      22 days medium interval from first identification to service start date</p>																					
Audit Scotland SPI data for all Scottish Councils. (04/05)		TARGETS																					
<p style="text-align: center;">Legend</p>		<p>05/06 - 5 days from referral to assessment                      06/07                      07/08                      08/09</p> <p><u>Forecast Out-turn for 05/06:</u>                      n/a</p>																					





**ASW 2a: Staff Qualifications: Residential Elderly**

**Department: Social Work Services Date: January 2006**  
**Section:**

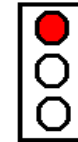
<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																																						
<table border="1"> <caption>ASW 2a Residential Accommodation - Staff Qualification: Older people (age 65+)</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr><td>01/02</td><td>32%</td><td>36%</td></tr> <tr><td>02/03</td><td>32%</td><td>39%</td></tr> <tr><td>03/04</td><td>31%</td><td>42%</td></tr> <tr><td>04/05</td><td>37%</td><td>47%</td></tr> <tr><td>05/06</td><td>50%</td><td></td></tr> <tr><td>06/07</td><td></td><td></td></tr> <tr><td>07/08</td><td></td><td></td></tr> <tr><td>08/09</td><td></td><td></td></tr> </tbody> </table>	Year	WDC	Scotland	01/02	32%	36%	02/03	32%	39%	03/04	31%	42%	04/05	37%	47%	05/06	50%		06/07			07/08			08/09			<table border="1"> <caption>ASW 2a Staff Qualifications: Elderly Residential</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr><td>01/02</td><td>32%</td><td>54%</td></tr> <tr><td>02/03</td><td>32%</td><td>50%</td></tr> <tr><td>03/04</td><td>31%</td><td>61%</td></tr> <tr><td>04/05</td><td>37%</td><td>57%</td></tr> <tr><td>05/06</td><td>50%</td><td></td></tr> <tr><td>06/07</td><td></td><td></td></tr> <tr><td>07/08</td><td></td><td></td></tr> <tr><td>08/09</td><td></td><td></td></tr> </tbody> </table>	Year	WDC	Comparator Group	01/02	32%	54%	02/03	32%	50%	03/04	31%	61%	04/05	37%	57%	05/06	50%		06/07			07/08			08/09			<p>As detailed in the departmental service action improvement plan targets have been set to: -</p> <p>Ensure that staff working in Older Peoples local authority residential homes undertaking SVQ's will complete their course within 12 months.</p> <ul style="list-style-type: none"> <li>80% of managers and 50% of staff to be qualified in 2006</li> </ul>
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<p>Comments</p> <p>The level of qualified staff has again increased during the year. West Dunbartonshire has met the improvement targets set for 2006, both for staff and for managers, (92% of whom are qualified). The comparative group and national averages are not yet available.</p>	<p>Comparator Group Information</p> <p>Inverclyde*, Dundee, Clackmannanshire, North Ayrshire</p> <p>*Not submitted 04/05</p>	<p>Progress in 05/06</p>																																																						
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<p>ASW 2a. Residential Accommodation - Elderly Care: Percentage of care staff who have appropriate qualification 04/05</p>	<p>Legend</p> <ul style="list-style-type: none"> <li>Council %</li> <li>WDC</li> <li>Comparator</li> <li>Average</li> </ul> <p>05/06 = 80%</p> <p>06/07 =</p> <p>07/08 =</p> <p>08/09 =</p>																																																							

**ASW 3a: Residential Accommodation: Privacy Older people (Local Authority Care Homes Only)**

**Department: Social Work Services Date: January 2006**  
**Section:**



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<p>We have now met the target set: all older people in care homes managed by West Dunbartonshire Council are now in single rooms.</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire.</p>	<p>Annual Reporting</p>																																																						
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<p>ASW 3a. Residential Accommodation: Percentage of single rooms in Council owned Elderly Care Homes 05/06</p> <p>Legend:</p> <ul style="list-style-type: none"> <li>Council % (Cyan bar)</li> <li>WDC (Red bar)</li> <li>Comparator (Hatched bar)</li> <li>Average (Horizontal line)</li> </ul>		<p>05/06 Based on outcome of Capacity Planning exercise.          06/07          07/08          08/09</p>																																																						



**ASW 4b: Homecare**

**Department: Social Work Services Date: March 2006**

**Section:**

<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																																
<p><b>ASW 4b Home Care: No. of Homecare hours per 1000 population age 65+</b></p> <table border="1"> <thead> <tr> <th></th> <th>01/02</th> <th>02/03</th> <th>03/04</th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>788.1</td> <td>917.8</td> <td>849.5</td> <td>802.8</td> <td>758.3</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td>542.4</td> <td>616.9</td> <td>512.2</td> <td>561.6</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		01/02	02/03	03/04	04/05	05/06	06/07	07/08	08/09	WDC	788.1	917.8	849.5	802.8	758.3				Scotland	542.4	616.9	512.2	561.6					<p><b>ASW 4b No. Homecare hours per 1000 pop.age 65+</b></p> <table border="1"> <thead> <tr> <th></th> <th>03/04</th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>849.5</td> <td>802.8</td> <td>758.3</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Comparator Group</td> <td>454.4</td> <td>576.5</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		03/04	04/05	05/06	06/07	07/08	08/09	WDC	849.5	802.8	758.3				Comparator Group	454.4	576.5					<p>As detailed in the departments service action improvement plan: -</p> <p>The department will closely monitor progress in order to sustain the current levels of homecare services.</p>
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<p>We have continued to develop the capacity of Mobile Teams to allow us to increase the number of clients within existing time slots resulting in more efficient use of resources. This means clients are receiving the same or increased numbers of interventions in the same or lower time period. There were also 242 clients who required two carers. Although the numbers of client hours given was 875, this involved 1750 hours of staff time</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>April 05 = 1,648 clients aged 65+                  Sept 05 = 1,678 clients aged 65+                  Dec. 05 = 1,636 clients aged 65+                  Mar 06 = 1,661 clients aged 65+</p>																																																
<p>Audit Scotland SPI data for all Scottish Councils. (05/06)</p>		<p>TARGETS</p>																																																
<p><b>ASW 4b. Home care: Number of homecare hours per 1,000 population age 65+ 04/05</b></p>	<p>Legend</p> <ul style="list-style-type: none"> <li>Council % (Cyan bar)</li> <li>WDC (Red bar)</li> <li>Comparator (Hatched bar)</li> <li>Average (Horizontal line)</li> </ul>	<p>05/06 Sustain current service level                  Further progress partnership service developments</p>																																																



**ASW 4c(i): Homecare: Personal Care**

**Department: Social Work Services Date: March 2006**

**Section:**

<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																										
<table border="1"> <caption>ASW 4. % of Homecare Clients Receiving Personal Care</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>32.6%</td> <td>57.2%</td> </tr> <tr> <td>04/05</td> <td>40.5%</td> <td>63.0%</td> </tr> <tr> <td>05/06</td> <td>43.0%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Scotland	03/04	32.6%	57.2%	04/05	40.5%	63.0%	05/06	43.0%		06/07			07/08			08/09			<table border="1"> <caption>ASW 4. % Homecare clients receiving Personal Care</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>32.6%</td> <td>56.5%</td> </tr> <tr> <td>04/05</td> <td>40.5%</td> <td>65.2%</td> </tr> <tr> <td>05/06</td> <td>43.0%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Comparator Group	03/04	32.6%	56.5%	04/05	40.5%	65.2%	05/06	43.0%		06/07			07/08			08/09			<p>The department will closely monitor progress in order to sustain the current levels of homecare services and target clients with personal care issues.</p>
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05/06	43.0%																																											
06/07																																												
07/08																																												
08/09																																												
<p>Comments</p> <p>There has been an increase in the level of personal care. In West Dunbartonshire Council we do not charge for meal preparation. If all meal preparation was categorised as personal care 59% of Home Care clients would be said to be receiving a personal care service.</p>	<p>Comparator Group Information</p> <p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Progress in 04/05</p> <p>April 05 = 668                  Sept 05 = 655                  Dec.05 = 652                  Mar. 06 = 714</p>																																										
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>	<p>TARGETS</p>																																											
<p>Legend</p> <ul style="list-style-type: none"> <li>Council %</li> <li>WDC</li> <li>Comparator</li> <li>Average</li> </ul>	<p>05/06 Sustain current service level                  Further progress partnership service developments</p>																																											



**ASW 4c(ii): Homecare: Evening/Overnight**

**Department:** Social Work Services **Date:** January 2006

**Section:**

<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																										
<table border="1"> <caption>ASW 4c. % Homecare clients receiving a service during evening/overnight</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>17.9%</td> <td>24.3%</td> </tr> <tr> <td>04/05</td> <td>17.7%</td> <td>27.2%</td> </tr> <tr> <td>05/06</td> <td>19.0%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Scotland	03/04	17.9%	24.3%	04/05	17.7%	27.2%	05/06	19.0%		06/07			07/08			08/09			<table border="1"> <caption>ASW 4c. Homecare clients receiving a service during evening/overnight</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>17.9%</td> <td>22.6%</td> </tr> <tr> <td>04/05</td> <td>17.7%</td> <td>21.6%</td> </tr> <tr> <td>05/06</td> <td>19.0%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Comparator Group	03/04	17.9%	22.6%	04/05	17.7%	21.6%	05/06	19.0%		06/07			07/08			08/09			<p>The department will closely monitor progress in order to sustain the current levels of homecare services as well as adopting an imaginative and creative approach to meeting clients needs.</p>
Year	WDC	Scotland																																										
03/04	17.9%	24.3%																																										
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<p>Comments</p>	<p>Comparator Group Information</p>	<p>Progress in 04/05</p>																																										
<p>There has been an increase in the number of people receiving a service during the evening or overnight. The evening time band reflects 7pm to 10pm and so does not take account of services delivered in the early evening like meal preparation. If we were to include services delivered in the early part of the evening this would increase the percentage to 29%</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>April 05 = 291                  Sept 05 = 255                  Dec.05 = 253                  Mar 06 = 315</p>																																										
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>	<p>TARGETS</p>																																											
<p><b>ASW 4c(ii) Percentage of Homecare Clients receiving a service during evenings/overnight 04/05</b></p> <p>Legend:</p> <ul style="list-style-type: none"> <li>Council % (Blue bar)</li> <li>WDC (Red bar)</li> <li>Comparator (Hatched bar)</li> <li>Average (Horizontal line)</li> </ul>		<p>05/06 Sustain current service level                  Further progress partnership service developments</p>																																										

**ASW 4c(iii): Homecare: % Receiving Weekend Service**

**Department: Social Work Services Date: January 2006**  
**Section:**

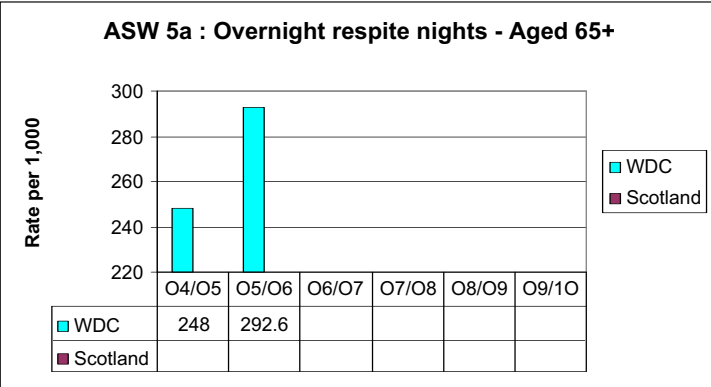


<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																										
<table border="1"> <caption>ASW 4c. % of Homecare clients receiving a weekend service</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>45.9%</td> <td>48.3%</td> </tr> <tr> <td>04/05</td> <td>46.8%</td> <td>53.9%</td> </tr> <tr> <td>05/06</td> <td>47.1%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Scotland	03/04	45.9%	48.3%	04/05	46.8%	53.9%	05/06	47.1%		06/07			07/08			08/09			<table border="1"> <caption>ASW 4c. % of Homecare clients receiving a weekend service</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>45.9%</td> <td>43.7%</td> </tr> <tr> <td>04/05</td> <td>46.8%</td> <td>47.7%</td> </tr> <tr> <td>05/06</td> <td>47.1%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Comparator Group	03/04	45.9%	43.7%	04/05	46.8%	47.7%	05/06	47.1%		06/07			07/08			08/09			<p>The department will closely monitor progress in order to sustain the current levels of homecare services as well as adopting an imaginative and creative approach to meeting clients needs.</p>
Year	WDC	Scotland																																										
03/04	45.9%	48.3%																																										
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<p>Comments</p>	<p>Comparator Group Information</p>	<p>Progress in 04/05</p>																																										
<p>Our performance has improved this year and we are only slightly below the 2004/2005 levels presented by our comparator group of councils</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>April 05 = 771 Sept 05 = 763 Dec. 05 = 731 Mar 06 = 782</p>																																										
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>	<p>TARGETS</p>																																											
<p><b>ASW 4c(iii) Percentage of Homecare Clients receiving a service at weekends 04/05</b></p>		<p>05/06 Sustain current service level Further progress partnership service developments</p>																																										

**ASW 5a : Total overnight respite nights provided as a rate per 1,000 population aged 65+**

**Department: Social Work Services Date: March 2006**  
**Section:**



Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
 <table border="1" data-bbox="174 710 707 807"> <tr> <td></td> <td>04/05</td> <td>05/06</td> <td>06/07</td> <td>07/08</td> <td>08/09</td> <td>09/10</td> </tr> <tr> <td>WDC</td> <td>248</td> <td>292.6</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	248	292.6					Scotland							<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	<p>Through consultation with carers the level and range of respite provision has expanded.</p>
	04/05	05/06	06/07	07/08	08/09	09/10																	
WDC	248	292.6																					
Scotland																							
<p>Comments</p>	<p>Comparator Group Information</p>	<p>Progress in 05/06</p>																					
<p>This is a simplified indicator but is comparable to indicator 5a) from last year. There has been an increase in the level of residential respite for Older People.</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Annual Reporting</p>																					
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>		<p>TARGETS</p>																					
<p>Legend</p> <table border="1" data-bbox="1182 1157 1480 1305"> <tr> <td style="background-color: cyan;"> </td> <td>Council %</td> </tr> <tr> <td style="background-color: red;"> </td> <td>WDC</td> </tr> <tr> <td style="background: repeating-linear-gradient(45deg, transparent, transparent 2px, black 2px, black 4px);"> </td> <td>Comparator</td> </tr> <tr> <td style="border: 1px solid black;"> </td> <td>Average</td> </tr> </table>			Council %		WDC		Comparator		Average	<p>06/07 07/08 08/09 09/10</p>													
	Council %																						
	WDC																						
	Comparator																						
	Average																						



**ASW 5b : Percentage of respite nights not in a care home for people aged 65+**

**Department: Social Work Services Date: March 2006**  
**Section:**

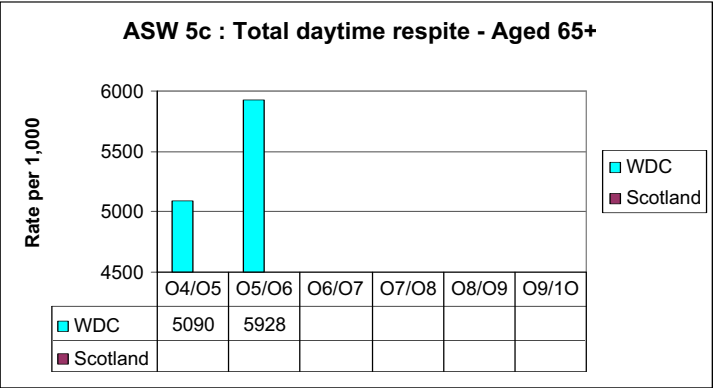
Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
<p><b>ASW 5b : Percentage of respite nights not in care home - Aged 65+</b></p> <table border="1" data-bbox="123 710 705 813"> <tr> <td></td> <td>04/05</td> <td>05/06</td> <td>06/07</td> <td>07/08</td> <td>08/09</td> <td>09/10</td> </tr> <tr> <td>WDC</td> <td>0.0%</td> <td>0.5%</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	0.0%	0.5%					Scotland							<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	<p>Through consultation with carers the level and range of respite provision has expanded.</p>
	04/05	05/06	06/07	07/08	08/09	09/10																	
WDC	0.0%	0.5%																					
Scotland																							
<p>Comments</p>	<p>Comparator Group Information</p>	<p>Progress in 05/06</p>																					
<p>This is a new indicator measuring the level of respite nights provided which were not in a care home</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Annual Reporting</p>																					
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>		<p>TARGETS</p>																					
<p>Legend</p> <table border="1" data-bbox="1176 1181 1478 1332"> <tr> <td></td> <td>Council %</td> </tr> <tr> <td></td> <td>WDC</td> </tr> <tr> <td></td> <td>Comparator</td> </tr> <tr> <td></td> <td>Average</td> </tr> </table>			Council %		WDC		Comparator		Average	<p>06/07 07/08 08/09 09/10</p>													
	Council %																						
	WDC																						
	Comparator																						
	Average																						





**ASW 5c : Total daytime respite hours provided as a rate per 1,000 population aged 65+**

**Department: Social Work Services Date: March 2006**  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
 <table border="1" data-bbox="174 710 712 810"> <thead> <tr> <th></th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> <th>09/10</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>5090</td> <td>5928</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	5090	5928					Scotland							<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	<p>Through consultation with carers the level and range of respite provision has expanded.</p>
	04/05	05/06	06/07	07/08	08/09	09/10																	
WDC	5090	5928																					
Scotland																							
Comments	Comparator Group Information	Progress in 05/06																					
<p>This is a simplified indicator but is comparable to a combination of indicator 5b) and 5ci) from last year. There has been an increase in the level of daytime respite for Older People.</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Annual Reporting</p>																					
Audit Scotland SPI data for all Scottish Councils. (04/05)		TARGETS																					
<p>Legend</p> <table border="1" data-bbox="1182 1171 1480 1318"> <tr> <td style="background-color: cyan;"> </td> <td>Council %</td> </tr> <tr> <td style="background-color: red;"> </td> <td>WDC</td> </tr> <tr> <td style="background-color: #cccccc;"> </td> <td>Comparator</td> </tr> <tr> <td style="border: 1px solid black;"> </td> <td>Average</td> </tr> </table>			Council %		WDC		Comparator		Average	<p>06/07 07/08 08/09 09/10</p>													
	Council %																						
	WDC																						
	Comparator																						
	Average																						



**ASW 5d: Percentage of daytime respite hours not in a care home for people aged 65+**

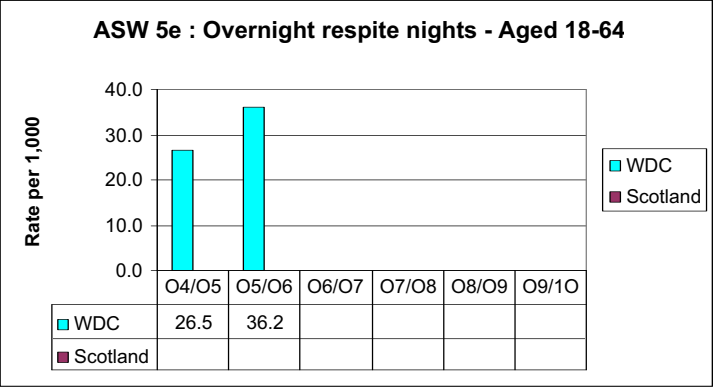












**Department: Social Work Services Date: March 2006**  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
<p><b>ASW 5d : Daytime respite not in day centre - Aged 65+</b></p> <table border="1"> <thead> <tr> <th></th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> <th>09/10</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>16.2%</td> <td>23.7%</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	16.2%	23.7%					Scotland							<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	<p>Through consultation with carers the level and range of respite provision has expanded.</p>
	04/05	05/06	06/07	07/08	08/09	09/10																	
WDC	16.2%	23.7%																					
Scotland																							
Comments	Comparator Group Information	Progress in 05/06																					
<p>This is a simplified indicator but is comparable to indicator 5b) from last year. There has been an increase in the level of daytime respite which is not in a day centre for Older People, partly due to the expansion of the MacMillan Carers Service.</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Annual Reporting</p>																					
Audit Scotland SPI data for all Scottish Councils. (04/05)		TARGETS																					
<p>Legend</p> <table border="1"> <tr> <td></td> <td>Council %</td> </tr> <tr> <td></td> <td>WDC</td> </tr> <tr> <td></td> <td>Comparator</td> </tr> <tr> <td></td> <td>Average</td> </tr> </table>			Council %		WDC		Comparator		Average	<p>06/07 07/08 08/09 09/10</p>													
	Council %																						
	WDC																						
	Comparator																						
	Average																						



**ASW 5e : Total overnight respite nights provided as a rate per 1,000 population aged 18-64**

**Department: Social Work Services Date: March 2006**  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
<p><b>ASW 5e : Overnight respite nights - Aged 18-64</b></p>  <table border="1" data-bbox="168 710 705 778"> <thead> <tr> <th></th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> <th>09/10</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>26.5</td> <td>36.2</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	26.5	36.2					Scotland							<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	<p>Through consultation with carers the level and range of respite provision has expanded.</p>
	04/05	05/06	06/07	07/08	08/09	09/10																	
WDC	26.5	36.2																					
Scotland																							
<p><b>Comments</b></p> <p>This is a simplified indicator but is comparable to indicator 5a) from last year. There has been an increase in the level of residential respite for people aged 18-64.</p>	<p><b>Comparator Group Information</b></p> <p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p><b>Progress in 05/06</b></p> <p>Annual Reporting</p>																					
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>		<p><b>TARGETS</b></p>																					
<p><b>Legend</b></p> <table border="1" data-bbox="1176 1125 1478 1273"> <tbody> <tr> <td></td> <td>Council %</td> </tr> <tr> <td></td> <td>WDC</td> </tr> <tr> <td></td> <td>Comparator</td> </tr> <tr> <td></td> <td>Average</td> </tr> </tbody> </table>			Council %		WDC		Comparator		Average	<p>06/07 07/08 08/09 09/10</p>													
	Council %																						
	WDC																						
	Comparator																						
	Average																						



**ASW 5f : Percentage of respite nights not in a care home for people aged 18-64**

**Department:** Social Work Services **Date:** March 2006  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
<p><b>ASW 5f : Percentage of respite nights not in care home - Aged 18-64</b></p> <table border="1"> <thead> <tr> <th></th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> <th>09/10</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>1.6%</td> <td>0.0%</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td>0.0%</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	1.6%	0.0%					Scotland		0.0%					<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	
	04/05	05/06	06/07	07/08	08/09	09/10																	
WDC	1.6%	0.0%																					
Scotland		0.0%																					
Comments	Comparator Group Information	Progress in 05/06																					
<p>This is a new indicator measuring the level of respite nights provided which were not in a care home</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Annual Reporting</p>																					
Audit Scotland SPI data for all Scottish Councils. (04/05)		TARGETS																					
<p>Legend</p> <table border="1"> <tr> <td></td> <td>Council %</td> </tr> <tr> <td></td> <td>WDC</td> </tr> <tr> <td></td> <td>Comparator</td> </tr> <tr> <td></td> <td>Average</td> </tr> </table>			Council %		WDC		Comparator		Average	<p>06/07 07/08 08/09 09/10</p>													
	Council %																						
	WDC																						
	Comparator																						
	Average																						

**ASW 5g : Total daytime respite hours provided as a rate per 1,000 population aged 18-64**

**Department: Social Work Services Date: March 2006**  
**Section:**



Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan														
<p><b>ASW 5g : Daytime respite provided - Aged 18-64</b></p> <table border="1" data-bbox="168 742 705 805"> <tr> <td>WDC</td> <td>3003</td> <td>3406</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	WDC	3003	3406					Scotland							<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	<p>Through consultation with carers the level and range of respite provision has expanded.</p>
WDC	3003	3406														
Scotland																
<p>Comments</p>	<p>Comparator Group Information</p>	<p>Progress in 05/06</p>														
<p>This is a simplified indicator but is comparable to a combination of indicator 5b) and 5c) from last year. There has been an increase in the level of daytime respite for adults aged 18-64</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Annual Reporting</p>														
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>		<p>TARGETS</p>														
<p>Legend</p> <table border="1" data-bbox="1176 1157 1478 1300"> <tr> <td style="background-color: cyan;"> </td> <td>Council %</td> </tr> <tr> <td style="background-color: red;"> </td> <td>WDC</td> </tr> <tr> <td style="background-color: #cccccc;"> </td> <td>Comparator</td> </tr> <tr> <td style="border: 1px solid black;"> </td> <td>Average</td> </tr> </table>			Council %		WDC		Comparator		Average	<p>06/07 07/08 08/09 09/10</p>						
	Council %															
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	Comparator															
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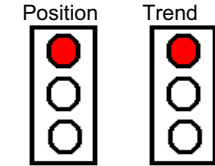
**ASW 5h: Percentage of daytime respite hours not in a care home for people aged 18-64**

**Department: Social Work Services Date: March 2006**  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
<p><b>ASW 5h : Daytime respite not in day care - Aged 18-64</b></p> <table border="1" data-bbox="129 710 712 810"> <thead> <tr> <th></th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> <th>09/10</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>12.6%</td> <td>34.8%</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	12.6%	34.8%					Scotland							<p>This is a simplified indicator which varies from last year as so comparator group and national comparisons are not currently available</p>	<p>Through consultation with carers the level and range of respite provision has expanded.</p>
	04/05	05/06	06/07	07/08	08/09	09/10																	
WDC	12.6%	34.8%																					
Scotland																							
<p>Comments</p>	<p>Comparator Group Information</p>	<p>Progress in 05/06</p>																					
<p>This is a simplified indicator but is comparable to indicator 5b) from last year. There has been an increase in the level of daytime respite which is not in a day centre for people aged 18-64, partly due to the expansion of the MacMillan Carers Service.</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p>	<p>Annual Reporting</p>																					
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**Statutory Performance Indicators  
&  
Quarterly Monitoring**

**Criminal Justice Services  
Year 2005/06**

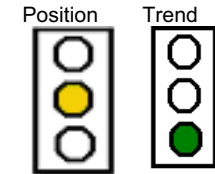


**ASW 6d: Social Enquiry Reports: submitted To court by due date**

**Department: Social Work Services Date: January 2006**  
**Section:**

<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																				
<table border="1"> <caption>ASW 6d. % of Social Enquiry Reports submitted to Court by Due date</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr><td>2005</td><td>96.5</td><td></td></tr> <tr><td>2006</td><td>95.4</td><td></td></tr> <tr><td>2007</td><td>100.0</td><td>95.5</td></tr> <tr><td>2008</td><td>98.3</td><td>96.5</td></tr> <tr><td>2009</td><td>85.9</td><td></td></tr> </tbody> </table>	Year	WDC	Scotland	2005	96.5		2006	95.4		2007	100.0	95.5	2008	98.3	96.5	2009	85.9		<table border="1"> <caption>ASW 6d % of Social Enquiry Reports submitted to Court by Due date</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr><td>2005</td><td>99%</td><td></td></tr> <tr><td>2006</td><td>98%</td><td></td></tr> <tr><td>2007</td><td>100%</td><td>100%</td></tr> <tr><td>2008</td><td>98.3%</td><td>98.3%</td></tr> <tr><td>2009</td><td>85.9%</td><td></td></tr> </tbody> </table>	Year	WDC	Comparator Group	2005	99%		2006	98%		2007	100%	100%	2008	98.3%	98.3%	2009	85.9%		<ul style="list-style-type: none"> <li>Further work to be undertaken on recording practice</li> <li>Quarterly Performance Reports to Departmental Management Team</li> <li>Monthly monitoring by Criminal Justice Managers</li> </ul>
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<p>Comments</p> <p>The provisional figure is 85.9. There have been difficulties in capturing the information on our information system due to recording anomalies across the Criminal Justice Partnership. Further work is required on this indicator. We envisage a slight drop in performance due to staff turnover and the use of agency staff.</p>	<p>Comparator Group Information</p> <p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire East Dunbartonshire, Argyll and Bute</p>	<p>Progress in 05/06</p>																																				
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<p>ASW 6d. Criminal Justice: Proportion submitted to court by due date 04/05</p> <p>Average 96.5% WDC 85.9%</p> <p>Legend:  <span style="color: cyan;">█</span> Council %  <span style="color: red;">█</span> WDC  <span style="background-color: #cccccc;">█</span> Comparator  <span style="border-bottom: 1px solid black; display: inline-block; width: 20px;"></span> Average</p>		<p>05/06 100%</p> <p>06/07</p> <p>07/08</p> <p>08/09</p> <p>Forecast Out-turn for 05/06: n/a</p>																																				

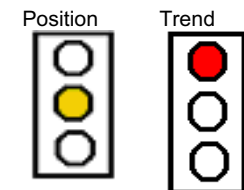




**ASW 7c: Probation: %of new Probationers seen within one week**

**Department: Social Work Services Date: January 2006**  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																																																						
<p><b>ASW 7c. % of New Probationers seen by Supervising Officer within One Week</b></p> <table border="1"> <thead> <tr> <th></th> <th>01/02</th> <th>02/03</th> <th>03/04</th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>61.7%</td> <td>67.7%</td> <td>100.0%</td> <td>62.5</td> <td>83.2%</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td>55.9%</td> <td>56.1%</td> <td>60.0%</td> <td>63.5%</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		01/02	02/03	03/04	04/05	05/06	06/07	07/08	08/09	WDC	61.7%	67.7%	100.0%	62.5	83.2%				Scotland	55.9%	56.1%	60.0%	63.5%					<p><b>ASW 7c % of Probationers seen by Supervising Officer within one week</b></p> <table border="1"> <thead> <tr> <th></th> <th>01/02</th> <th>02/03</th> <th>03/04</th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>61.7%</td> <td>67.7%</td> <td>100.0</td> <td>62.5%</td> <td>83.2%</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Comparator Group</td> <td>77.5%</td> <td>76.2%</td> <td>83.7%</td> <td>81.9%</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		01/02	02/03	03/04	04/05	05/06	06/07	07/08	08/09	WDC	61.7%	67.7%	100.0	62.5%	83.2%				Comparator Group	77.5%	76.2%	83.7%	81.9%					<ul style="list-style-type: none"> <li>Continue to monitor progress</li> </ul>
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Provisional figure is 83.2% which exceeds the target for the next three years.	Inverclyde, Dundee, Clackmannanshire, North Ayrshire  East Dunbartonshire, Argyll and Bute																																																							
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<p><b>ASW 7(c) Criminal Justice: The proportion of new probationers seen by a supervising officer within one week 04/05</b></p> <p>Average 63.5%      WDC 83.2%</p> <p><b>Legend</b></p> <table border="1"> <tr> <td>Blue bar</td> <td>Council %</td> </tr> <tr> <td>Red bar</td> <td>WDC</td> </tr> <tr> <td>Patterned bar</td> <td>Comparator</td> </tr> <tr> <td>Horizontal line</td> <td>Average</td> </tr> </table>		Blue bar	Council %	Red bar	WDC	Patterned bar	Comparator	Horizontal line	Average	<table border="1"> <tr> <td>05/06</td> <td>70%</td> </tr> <tr> <td>06/07</td> <td>75%</td> </tr> <tr> <td>07/08</td> <td>80%</td> </tr> </table>	05/06	70%	06/07	75%	07/08	80%																																								
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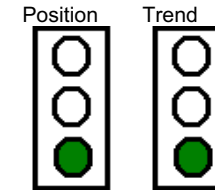
**ASW 8b: Community Service: average no. of Hours per week to complete orders**

**Department: Social Work Services Date: January 2006**  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																														
<table border="1"> <caption>ASW 8b. Average no. of hours per week taken to complete Community Service Orders</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr> <td>02/03</td> <td>5.1</td> <td>3.4</td> </tr> <tr> <td>03/04</td> <td>8.2</td> <td>3.6</td> </tr> <tr> <td>04/05</td> <td>4.3</td> <td>3.6</td> </tr> <tr> <td>05/06</td> <td>3.7</td> <td></td> </tr> </tbody> </table>	Year	WDC	Scotland	02/03	5.1	3.4	03/04	8.2	3.6	04/05	4.3	3.6	05/06	3.7		<table border="1"> <caption>ASW 8b. Average no. of hour per week taken to complete SCO's</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr> <td>02/03</td> <td>5.1</td> <td>3.5</td> </tr> <tr> <td>03/04</td> <td>8.2</td> <td>4.2</td> </tr> <tr> <td>04/05</td> <td>4.3</td> <td>3.6</td> </tr> <tr> <td>05/06</td> <td>3.7</td> <td></td> </tr> </tbody> </table>	Year	WDC	Comparator Group	02/03	5.1	3.5	03/04	8.2	4.2	04/05	4.3	3.6	05/06	3.7		<ul style="list-style-type: none"> <li>Audit data processes and recording practices</li> <li>Report to Departmental Management Team August 2006</li> </ul>
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<p>Provisional figure. This year's average number of hours per week taken to complete community service orders shows a decrease from 4.3 hours to 3.7 hours. The total number of community service orders hours decreased by 10% to 15,181 and the number of orders completed fell by 6%. This may have impacted on the number of hours allocated.</p>	<p>Inverclyde, Dundee, Clackmannanshire, North Ayrshire</p> <p>East Dunbartonshire and Argyll and Bute</p>																															
Audit Scotland SPI data for all Scottish Councils. (04/05)		TARGETS																														
<p>Average 3.6hrs</p> <p>WDC 3.7hrs</p> <p>Legend:</p> <ul style="list-style-type: none"> <li>Council %</li> <li>WDC</li> <li>Comparator</li> <li>Average</li> </ul>		<p>05/06: 6 hours per week</p> <p>06/07</p> <p>07/08</p> <p>08/09</p> <p>Forecast Out-turn for 05/06: n/a</p>																														

**Statutory Performance Indicators  
&  
Quarterly Monitoring**

**Children's Services  
Year 2005/06**



**EC 7b: Looked After Children - Academic Achievement in One subject**

**Department: Social Work Services Date: January 2006**  
**Section:**

<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																																																		
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<p>Provisional figure (75%) indicates that for the 5<sup>th</sup> year in succession the percentage of looked after children obtaining qualifications have increased. This indicator is affected by the length of time the Department has been involved with the young person prior to them sitting standard grades.</p>		<p>Annual Monitoring</p>																																																																		
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**EC 7c: Looked After Children - Academic Achievement: English & Maths- standard grade**

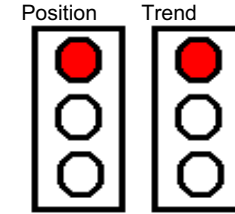
**Department: Social Work Services Date: January 2006**  
**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																																																						
<p><b>EC 7c Looked After Children: achievement in Maths and English - standard grade</b></p> <table border="1"> <tr> <td></td> <td>01/02</td> <td>02/03</td> <td>03/04</td> <td>04/05</td> <td>05/06</td> <td>06/07</td> <td>07/08</td> <td>08/09</td> </tr> <tr> <td>WDC</td> <td>38.9%</td> <td>36.4%</td> <td>26.3%</td> <td>50.0%</td> <td>75%</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td>37.5%</td> <td>36.4%</td> <td>40.4%</td> <td>36.8%</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		01/02	02/03	03/04	04/05	05/06	06/07	07/08	08/09	WDC	38.9%	36.4%	26.3%	50.0%	75%				Scotland	37.5%	36.4%	40.4%	36.8%					<p><b>EC 7c. Looked After Children achievement in Maths and English - Standard Grade</b></p> <table border="1"> <tr> <td></td> <td>01/02</td> <td>02/03</td> <td>03/04</td> <td>04/05</td> <td>05/06</td> <td>06/07</td> <td>07/08</td> <td>08/09</td> </tr> <tr> <td>WDC</td> <td>38.9%</td> <td>36.4%</td> <td>26.3%</td> <td>50.0%</td> <td>75%</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Comparator Group</td> <td>45.1%</td> <td>34.6%</td> <td>39.4%</td> <td>42.0%</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		01/02	02/03	03/04	04/05	05/06	06/07	07/08	08/09	WDC	38.9%	36.4%	26.3%	50.0%	75%				Comparator Group	45.1%	34.6%	39.4%	42.0%					<p>Develop and implement intensive tailored support packages to supplement mainstream education of hard to reach young people.</p>
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<p>Provisional figures indicate that 75% of looked after children achieved both English and Maths at SCQF level 3. This is a substantial increase on last year and approx double Scottish average for 04-05. This indicator is affected by the length of time the Department has been involved with the young person prior to them sitting standard grades.</p>		Annual Monitoring																																																						
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<p><b>EC 7c Children being looked after - attaining Standard Grade English and Maths 04/05</b></p> <p>WDC 75%      Average 36.8%</p>	<p>Legend</p> <ul style="list-style-type: none"> <li>Council % (Cyan bar)</li> <li>WDC (Red bar)</li> <li>Comparator (Blue line with diamond)</li> <li>Average (Blue line)</li> </ul>	<p>05/06 06/07 07/08 08/09</p> <p>Forecast Out-turn for 05/06: n/a</p>																																																						

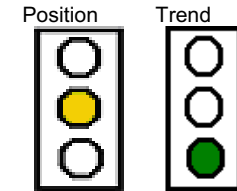
**EC 8d: Looked After Children- Placement (exc. Respite)rate per 1000 of population (0 – 17 yrs)**

**Department: Social Work Services Date: January 2006**

**Section:**



Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																																																
<table border="1"> <caption>EC 8d. Children Looked After (excluding respite) as a rate per 1000 of population (0 - 17Yrs)</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr><td>01/02</td><td>12.8</td><td>10.0</td></tr> <tr><td>02/03</td><td>13.0</td><td>10.5</td></tr> <tr><td>03/04</td><td>14.4</td><td>10.9</td></tr> <tr><td>04/05</td><td>15.9</td><td>11.3</td></tr> <tr><td>05/06</td><td>17.6</td><td></td></tr> <tr><td>06/07</td><td></td><td></td></tr> <tr><td>07/08</td><td></td><td></td></tr> <tr><td>08/09</td><td></td><td></td></tr> </tbody> </table>	Year	WDC	Scotland	01/02	12.8	10.0	02/03	13.0	10.5	03/04	14.4	10.9	04/05	15.9	11.3	05/06	17.6		06/07			07/08			08/09			<table border="1"> <caption>EC 8d. Children being Looked After: rate per 1000 of population (0 - 17Yrs)</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr><td>01/02</td><td>12.8</td><td>11.1</td></tr> <tr><td>02/03</td><td>13.0</td><td>11.8</td></tr> <tr><td>03/04</td><td>14.4</td><td>13.0</td></tr> <tr><td>04/05</td><td>15.9</td><td>14.8</td></tr> <tr><td>05/06</td><td>17.6</td><td></td></tr> <tr><td>06/07</td><td></td><td></td></tr> </tbody> </table>	Year	WDC	Comparator Group	01/02	12.8	11.1	02/03	13.0	11.8	03/04	14.4	13.0	04/05	15.9	14.8	05/06	17.6		06/07			<p>1. Reduce the number of young people placed in secure accommodation through the development of appropriately targeted intervention and support strategies.</p> <p>2. Sustain the current level of community based placements for younger children.</p> <p>3. Implement multi-agency care plans for all children and young people who require integrated care.</p>
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<p>This indicator is no longer included in Audit Scotland's SPI's. It is represented here to show the Looked after placements for the fourth quarter. Numbers fluctuated throughout the year and the trend is upward as it is nationally. A tidy up of legislation on CareFirst resulted in the larger increase for the 4<sup>th</sup> quarter. We will continue to monitor this as a Service Improvement action.</p>		<p>Q1: 16.4                  Q2: 16.5                  Q3: 15.9                  Q4: 17.6 Jan to March '06</p>																																																
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<p>EC 8(d). Children Looked After: Total looked after (excluding respite) as a rate per 1000 of population aged 0 - 17 04/05</p> <p>WDC 17.6      Average 11.3</p> <p>Legend:                  Council % (Cyan)                  WDC (Red)                  Comparator (Hatched)                  Average (Blue line)</p>																																																		

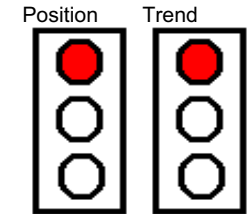


**EC 9: % of Staff Qualified: Children's Residential**

**Department: Social Work Services Date: January 2006**

**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																																																			
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<p>Provisionally the percentage of appropriately qualified residential care staff is 64% which is an increase of 10% on last year. Further improvements in the number of qualified staff are expected as a minimum of 10 unqualified staff are currently working towards appropriate qualifications.</p>		Annual Monitoring																																																			
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<p>WDC 64%      Average 58%</p> <p>Legend:  <span style="background-color: cyan; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> Council %  <span style="background-color: red; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> WDC  <span style="background-color: #cccccc; border: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> Comparator  <span style="border-bottom: 1px solid black; display: inline-block; width: 15px; height: 10px;"></span> Average</p>		<p>05/06 N/A                  06/07 N/A                  07/08 N/A                  08/09 N/A</p>																																																			



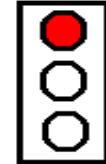
**EC 10: Looked After Children – Privacy**

**Department: Social Work Services Date: January 2006**

**Section:**

<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																																						
<table border="1"> <caption>EC 10 Children's Residential: Privacy</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr> <td>01/02</td> <td>66.7%</td> <td>87.1%</td> </tr> <tr> <td>02/03</td> <td>0.0%</td> <td>86.9%</td> </tr> <tr> <td>03/04</td> <td>66.7%</td> <td>86.3%</td> </tr> <tr> <td>04/05</td> <td>68.8%</td> <td>88.5%</td> </tr> <tr> <td>05/06</td> <td>64.7%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/9</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Scotland	01/02	66.7%	87.1%	02/03	0.0%	86.9%	03/04	66.7%	86.3%	04/05	68.8%	88.5%	05/06	64.7%		06/07			07/08			08/9			<table border="1"> <caption>EC 10. Children's Residential Privacy</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr> <td>01/02</td> <td>66.7%</td> <td>92.1%</td> </tr> <tr> <td>02/03</td> <td>0%</td> <td>91%</td> </tr> <tr> <td>03/04</td> <td>66.7%</td> <td>90.0%</td> </tr> <tr> <td>04/05</td> <td>68.8%</td> <td>90.4%</td> </tr> <tr> <td>05/06</td> <td>64.7%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/9</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Comparator Group	01/02	66.7%	92.1%	02/03	0%	91%	03/04	66.7%	90.0%	04/05	68.8%	90.4%	05/06	64.7%		06/07			07/08			08/9			<p>1. Establish capacity to meet the national privacy standards set by the Care Commission.</p>
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<p>Comments</p> <p>There is a small decrease in this indicator from previous years. The number of occupied single rooms is the same as last year but the number of children in placements increased by 2. Most of our homes are small "family group" homes.</p>	<p>Comparator Group Information</p>	<p>Progress in 05/06</p> <p>Annual Monitoring</p>																																																						
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**EC 11a: Residential Respite Care**

**Department: Social Work Services Date: January 2006**

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**EC 11b: Respite Care: Total hours day time respite provided to children 0 – 17 years**

**Department: Social Work Services Date: January 2006**

**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
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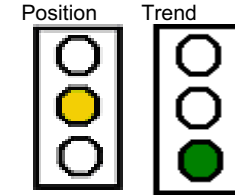


**EC 11c(i): Respite Care: Percentage day time respite not in a day centre.**

**Department: Social Work Services Date: January 2006**

**Section:**

Annual Performance Data compared to Scottish Average	Annual Performance Data compared to Comparative Group Average	Summary of Improvement Action Plan																					
<table border="1" data-bbox="123 518 750 758"> <caption>EC 11c Respite Care: Daytime respite not in day care centre - Aged 0 - 17 yrs</caption> <thead> <tr> <th></th> <th>04/05</th> <th>05/06</th> <th>06/07</th> <th>07/08</th> <th>08/09</th> <th>09/10</th> </tr> </thead> <tbody> <tr> <td>WDC</td> <td>27.0%</td> <td>17.4%</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Scotland</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		04/05	05/06	06/07	07/08	08/09	09/10	WDC	27.0%	17.4%					Scotland							<p>This is a simplified indicator which varies from last year and comparator group and national comparisons are not available</p>	<ol style="list-style-type: none"> <li>1. Identify issues pertaining to respite for children and young people through the consultation group.</li> <li>2. Develop support packages to meet identified need.</li> </ol>
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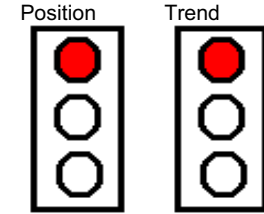


**EC 12b: Social Background Reports:**

**Department: Social Work Services Date: January 2006**

**Section:**

<p>Annual Performance Data compared to Scottish Average</p>	<p>Annual Performance Data compared to Comparative Group Average</p>	<p>Summary of Improvement Action Plan</p>																																										
<table border="1"> <caption>EC 12 % of Social Background reports submitted within 21 working days</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Scotland</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>24.1%</td> <td>37.6%</td> </tr> <tr> <td>04/05</td> <td>21.3%</td> <td>43.0%</td> </tr> <tr> <td>05/06</td> <td>40.0%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Scotland	03/04	24.1%	37.6%	04/05	21.3%	43.0%	05/06	40.0%		06/07			07/08			08/09			<table border="1"> <caption>EC 12. % of Social Background reports submitted within 20 working days</caption> <thead> <tr> <th>Year</th> <th>WDC</th> <th>Comparator Group</th> </tr> </thead> <tbody> <tr> <td>03/04</td> <td>24.1%</td> <td>36.6%</td> </tr> <tr> <td>04/05</td> <td>21.3%</td> <td>37.9%</td> </tr> <tr> <td>05/06</td> <td>40.0%</td> <td></td> </tr> <tr> <td>06/07</td> <td></td> <td></td> </tr> <tr> <td>07/08</td> <td></td> <td></td> </tr> <tr> <td>08/09</td> <td></td> <td></td> </tr> </tbody> </table>	Year	WDC	Comparator Group	03/04	24.1%	36.6%	04/05	21.3%	37.9%	05/06	40.0%		06/07			07/08			08/09			<ol style="list-style-type: none"> <li>1. Improve services and performance through increase in staff working with reports required by the Reporter.</li> <li>2. Set up Working Group to progress and monitor this indicator.</li> <li>3. Establish an electronic link with Reporter's Office.</li> <li>4. Implement standards</li> <li>5. Monthly reports to managers and quarterly to Committee</li> </ol>
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<p>The revised process is that SCRA will provide Councils with information on their IAR and SBR numbers for 2005/06. We estimate our performance for the year to be about 40%. However, Jan to March 2006 showed a drop in performance to 36%. Our target of 60% will not be met.</p>	<p>(Inverclyde, Dundee, North Ayrshire, Clackmannanshire)</p>	<p>Q1: 26% Q2: 32% Q3: 42% Q4: 36% <i>provisional fig for Jan to March 06</i></p>																																										
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<p><b>EC 12. Social Background Reports: % of reports requested by the Reporter submitted within 20 days</b> 04/05 WDC 40% Average 43%</p> <p>Legend:  <span style="display:inline-block; width:15px; height:10px; background-color:lightblue; border:1px solid black;"></span> Council %  <span style="display:inline-block; width:15px; height:10px; background-color:red; border:1px solid black;"></span> WDC  <span style="display:inline-block; width:15px; height:10px; background: repeating-linear-gradient(45deg, transparent, transparent 2px, black 2px, black 4px); border:1px solid black;"></span> Comparator  <span style="display:inline-block; width:15px; height:10px; border:1px solid black;"></span> Average</p>		<p>05/06 60% 06/07 07/08 08/09</p>																																										



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<p>57.7% is a provisional figure for 2005/06. Timely recording of this activity on CareFirst still presents a challenge to Area Teams. The figure for Jan to March 2006 is slightly higher at 59% which is well short of our target of 80%. We believe our drop in performance is due to a combination of inconsistent recording and staff turnover.</p>	<p>(Inverclyde, Dundee, North Ayrshire, Clackmannanshire)</p>	<p>Q1: 70% Q2: 61% Q3: 38% Q4: 59% <i>provisional figure for jan – march 2006</i></p>																																										
<p>Audit Scotland SPI data for all Scottish Councils. (04/05)</p>		<p>TARGETS</p>																																										
<p>EC 13. Supervision: Proportion of children seen by a supervising officer within 15 days 04/05</p> <p>WDC 57.7% Average 79%</p> <p>Legend:  <span style="display:inline-block; width:15px; height:10px; background-color:lightblue; border:1px solid black;"></span> Council %  <span style="display:inline-block; width:15px; height:10px; background-color:red; border:1px solid black;"></span> WDC  <span style="display:inline-block; width:15px; height:10px; background: repeating-linear-gradient(45deg, transparent, transparent 2px, black 2px, black 4px); border:1px solid black;"></span> Comparator  <span style="display:inline-block; width:15px; height:10px; border:1px solid black;"></span> Average</p>		<p>05/06 80% 06/07 07/08 08/09</p>																																										



All West Dunbartonshire Council Services contribute to the Corporate Plan which has identified six Corporate Priorities for the Council, as follows:

1. Develop our children and young people
2. Regenerate and develop the local economy
3. Provide high quality best value services
4. Promote health and well being
5. Create a better environment
6. Promote life long learning

The Department has designated a number of Corporate and Service Objectives / Actions to ensure the Council's six Corporate Priorities are achieved. All the Objectives are included in the Social Works Service Plan 2004 – 2009 and the Service Plan Review 2006 - 2007

### **Corporate Priorities and Social Work related objectives**

Currently, Community Care Services and Children's Services support the council in achieving two of its Corporate Priorities. This is to Promote Health and Wellbeing and Develop our Children and Young People. All of their objectives (listed in the associated bullet points noted below) are recorded in the Corporate Action Planning Database along with the required actions and outcomes we expect to achieve for 2006/07. All Social Work Services contribute to the Corporate Priority of High Value Best Value Services.

### **Promote health and well-being (vulnerable groups)**

In relation to vulnerable groups and the developing role of the Council as a health improvement organisation, Community Care Services objectives are to: -

- Provide an Integrated Support Service to all community care client groups
- Increase the proportion of people with learning disabilities able to live at home or in a homely environment
- Increase the number of older people able to live independently
- Provide effective day-to-day support for carers through assessments and care planning, service delivery and training
- Reduce the likelihood of vulnerable people remaining in hospital unnecessarily
- Prevent inappropriate hospital admissions

Linked to the above objective and in line with Scottish Executive requirements for Joint Performance Reporting through the Joint Performance Improvement Assessment Framework (JPIAF) we have developed a series of Local Improvement Targets (LITS).

### **Develop our children and young people**

- Through needs led assessment ensure that the most vulnerable young people, children and their families have, when required, early identification of need, the appropriate level of intervention and receive appropriate services at key stages in their lives.

- Provide good quality services to support families to care for children and young people safely at home or if that is not possible, to provide appropriate alternative care
- Ensure that children and young people who do have to be cared for are not disadvantaged either socially, educationally or in terms of health care
- Ensure that where children and young people have been cared for by the Council they are supported when they leave whether that is to return home, to move to other types of care, or for older young people to move on to independent living.

All of our Social Work Services can contribute to the achievement of these objectives.





# **Department of Social Work Services**

## **Community Care Local Improvement Targets**

**Year ending 31<sup>st</sup> March 2006**

DEPARTMENT OF SOCIAL WORK SERVICES

WEST DUNBARTONSHIRE JOINT FUTURE PARTNERSHIP

REPORT FOR YEAR ENDED 31<sup>ST</sup> MARCH 2006

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
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<p><b>OLDER PEOPLE</b></p> <p>Supporting more people at home, as an alternative to residential and nursing care.</p>	<p>OP1. Increase by 2% the number of homecare service-users aged 65+ receiving 10 to 20 client visits per week.</p>	<p>Total no. of homecare service-users aged 65+ receiving 10 to 20 client visits per week</p>	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> <li>Communities Scotland</li> <li>Community Care Planning &amp; Implementation Partnership</li> </ul>	<p>Baseline 2004/05 = 399</p> <p>Figure for last week in September 05 = 389 (2.5% decrease)</p> <p>Last wk in Mar 06 = 359 (overall decrease from baseline = 10%)</p>	<p>Progress on target will be reported to the Joint Strategy Group on an annual basis</p>	<p>The reported figures are taken as a snapshot from the last week in March 2006, and indicate a decrease of 10.5% in the number of people receiving this level of service. This indicator must be viewed in the context of the following LIT (OP2), which shows a significant increase in the number of clients receiving more intensive inputs. Initial analysis suggests that continuous review to promote independence and reduce over-care means that homecare inputs are now being better targeted.</p>
<p>Supporting more people at home, as an alternative to residential and nursing care.</p>	<p>OP2. Increase by 2% the number of homecare service-users aged 65+ receiving more than 20 visits per week.</p>	<p>Total No. of homecare service-users aged 65+ receiving more than 20 visits per week.</p>	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> <li>Communities Scotland</li> <li>Community Care Planning &amp; Implementation Partnership</li> </ul>	<p>Baseline 2004/05 = 278</p> <p>Figure for last week in September 05 = 261 (6% decrease)</p> <p>Last wk in Mar 06 = 427 (overall increase from baseline = 53.5%)</p>	<p>Progress on target will be reported to the Joint Strategy Group on an annual basis</p>	<p>As in the previous indicator (OP1), we expect a degree of fluctuation given the snapshot nature of our reporting. We are pleased to note such a large increase in the number of people receiving this most intensive level of homecare support. However we are carefully monitoring this target to ascertain future sustainability. We are optimistic that our new service management system will enable us to provide this enhanced level of support within agreed budgets.</p>

DEPARTMENT OF SOCIAL WORK SERVICES

WEST DUNBARTONSHIRE JOINT FUTURE PARTNERSHIP

REPORT FOR YEAR ENDED 31<sup>ST</sup> MARCH 2006

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Supporting more people at home, as an alternative to residential and nursing care.	OP3. Increase by 2% the number of homecare service -users aged 65+ receiving weekend homecare service	Total No. of homecare service users aged 65+ receiving weekend service	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004/05 = 763  Figure for last week in September 05 = 763 (no change)  Last wk in Mar 06 = 782 (2.5% increase)	Progress on target will be reported to the Joint Strategy Group on an annual basis	The number of clients receiving weekend service has increased by 0.5%. The service works in partnership with families and carers to ensure clients are supported. The figure also does not reflect the turnover of clients who require extended cover for a short period to regain a level of independence. (We do have unmet need for weekend cover, but this has not prevented discharge from hospital, nor has it necessitated a hospital admission).
Supporting more people at home, as an alternative to residential and nursing care.	OP4. Increase by 2% the number of homecare service users aged 65+ receiving evening service	Total No. of homecare service-users aged 65+ receiving evening service	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004/05 = 206  Last wk in Mar 06 = 485 (135% increase)	Progress on target will be reported to the Joint Strategy Group on an annual basis	Report for this indicator was previously based on H1 definitions of evening service (7pm – 10pm). This excluded our early evening services which are now included in this target return.

DEPARTMENT OF SOCIAL WORK SERVICES

WEST DUNBARTONSHIRE JOINT FUTURE PARTNERSHIP

REPORT FOR YEAR ENDED 31<sup>ST</sup> MARCH 2006

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Supporting more people at home, as an alternative to residential and nursing care.	OP5. Increase by 2% the number of homecare service -users aged 65+ receiving overnight service	Total No. of homecare service-users aged 65+ receiving overnight service	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004/05 = 218  Last wk in Mar 06 = 203 (7% decrease)	Progress on target will be reported to the Joint Strategy Group on an annual basis	This figure has fallen as a result of the recording system for tuck-in service, which was historically recorded as a night service, but has now been classified as late evening if delivered before 10pm.
Supporting more people at home, as an alternative to residential and nursing care.	OP6. Sustain smart technology packs for up to 100 people.	Number of individuals aged 65+ supported by smart technology.	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	2004 / 05 Pilot – 10 individuals  March 2006 = 100 people in sheltered housing have had smart technology installed.	Progress on target will be reported to the Joint Strategy Group on an annual basis	Installation programme in Sheltered Housing commenced in November 2005.  We have exceeded our 2005/06 target and will closely monitor the effectiveness before committing to further installations.

DEPARTMENT OF SOCIAL WORK SERVICES

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<p><b>SINGLE SHARED ASSESSMENT (OLDER PEOPLE)</b></p> <p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>OP7. The number of working days between referral and assessment commencement should not exceed 5</p>	<p>Average number of days between referral and assessment commencement.</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	<p>Baseline 2004/05 = 7 days</p> <p>Apr 05 – Mar 06 = 3.26</p> <p>Target achieved</p>	<p>Progress on target will be reported to the Joint Strategy Group on an annual basis</p>	<p>We believe that our improvement in this target indicates a better service for older people in West Dunbartonshire.</p>
<p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>OP8. The number of working days between start of assessments to first service start should not exceed 30.</p>	<p>Average number of days between start of assessments and the first part of a care package to be delivered.</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	<p>Baseline 2004/05 = 32 days</p> <p>Apr 05 – Mar 06 Elderly Median = 21 Dementia Median = 30</p> <p>Target achieved</p>	<p>Progress on target will be reported to the Joint Strategy Group on an annual basis</p>	<p>Recording Processes will improve with the implementation of Care Assess.</p>
<p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>OP9. Number of working days between start of assessments and completion should not exceed 28.</p>	<p>Average No. days between start of and completion of assessment.</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	<p>Baseline 2004/05 = 29 days</p> <p>Apr 05 – Mar 06 = 24 days</p> <p>Target achieved</p>	<p>Progress on target will be reported to the Joint Strategy Group on an annual basis</p>	<p>We believe that our improvement in this target indicates a better service for older people in West Dunbartonshire.</p>

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Ensuring people receive an improved quality of care through faster access to services and better quality services.	OP10 Increase the number of people aged 65+ who receive SSA by 20%	No. of people aged 65+ having single shared assessments completed	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004/05: Frail Elderly = 1681 Dementia = 149 Total = 1830  Apr 05 – Mar 06 Frail Elderly = 1385 Dementia = 109 Total = 1,494	Progress on target will be reported to the Joint Strategy Group on an annual basis	Note – The definitions for this are different than those used for JPIAF 6 as they exclude on-going service users and this Local Improvement Target does not.
Ensuring people receive an improved quality of care through faster access to services and better quality services.	OP11. Increase the number of SSA completed by Health and Housing by 50%	No. of single shared assessments for 65+ completed	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004 / 05 Health = 256 Housing = 2  April to September 2005 Health = 88 Housing = 0  2005 / 06 Health = 168 Housing = 1	Progress on target will be reported to the Joint Strategy Group on an annual basis	The decrease in the number of SSAs completed by health workers appears to be a reflection in the overall decrease in the number of SSAs. We would however have expected to see more housing SSAs given the low baseline figures. This issue is currently under investigation.

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Ensuring people receive an improved quality of care through faster access to services and better quality services.	OP12. Increase the number of people aged 65+ receiving a care management service by 2%	Number of people aged 65+ receiving care management service.	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline: Cases open during last week in March 2006 = 1,229	Progress on target will be reported to the Joint Strategy Group on an annual basis	Local systems have now been developed to enable us to report on this indicator.
<p><b>DELAYED DISCHARGE</b> Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.</p>	DD1. Reduce delayed discharges over 6 weeks by 50%, in line with the national target set by the Scottish Executive.	Number of delayed discharges over 6 weeks	<ul style="list-style-type: none"> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• West Dunbartonshire Council</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline as at 15/04/05 = 43  At 15.04.06 = 25 (46.5% decrease)	Progress on target will be reported to the Joint Strategy Group on a quarterly basis.	Delayed discharges remain a serious issue in West Dunbartonshire, and we are committed to the new targets set by the Scottish Executive.  This report covers all delayed discharges in all settings, and no age split is available, therefore figures cover all ages. A more detailed breakdown reflecting the new targets will be provided at the October 2006 interim report.

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Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD2. Reduce delayed discharges in short stay beds by 50%, in line with the national target set by the Scottish Executive.	Number of delayed discharges in short stay beds	<ul style="list-style-type: none"> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• West Dunbartonshire Council</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	15th April 2006: number = 18	Progress on target will be reported to the Joint Strategy Group on a quarterly basis.	NHS Indicator
Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD3. Increase the number of people aged 65+ supported by Rapid Response Services by 2%.	Number of clients supported by Rapid Response Services.	<ul style="list-style-type: none"> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• West Dunbartonshire Council</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004/05 = 1025  2005 / 06 Apr – Mar = 903  (12% decrease)	Progress on target will be reported to the Joint Strategy Group on a quarterly basis.	There appears to be a decrease in the number of people supported by Rapid Response services. We are currently investigating this as we believe that all people who could benefit from these services have accessed them. We will undertake further analysis to ascertain whether there is any correlation between this indicator and the number of unplanned hospital admissions.



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Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD4. Reduce the number of people aged 65 - 74 with 2 or more emergency in-patient admissions in a year by 5%.	Number of people aged 65 - 74 with 2 or more emergency in-patient admissions	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2004/05 = 277  2005/06 = 247*  *This is an estimate based on 12 months data to 30.9.05. Estimate indicates an 11% reduction	Progress on target will be reported to the Joint Strategy Group on an annual basis	Estimated figures based on 12 months data to 30.9.05.  The 11% reduction indicated is subject to verification once year-end data is available.  NHS Indicator
Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD5. Reduce the number of people aged 75 - 84 with 2 or more emergency in-patient admissions in a year by 5%.	Number of people aged 75 - 84 with 2 or more emergency in-patient admissions.	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2004/05 = 343  2005/06 = 350*  * This is an estimate based on 12 months data to 30.9.05. Estimate indicates an 2% increase	Progress on target will be reported to the Joint Strategy Group on an annual basis	Estimated figures based on 12 months data to 30.9.05.  The 2% increase indicated is subject to verification once year-end data is available.  NHS Indicator

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Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD6. Reduce the number of people aged 85+ with 2 or more emergency in-patient admissions in a year by 5%.	Number of people aged 85+ with 2 or more emergency in-patient admissions.	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2004/05 = 132  2005/06 = 151*  *This is an estimate based on 12 months data to 30.9.05. Estimate indicates an 14% increase	Progress on target will be reported to the Joint Strategy Group on an annual basis	Estimated figures based on 12 months data to 30.9.05.  The 14% increase indicated is subject to verification once year-end data is available.  NHS Indicator
Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD7. To reduce the number of people aged 65 – 74 admitted to hospital as an urgent or emergency admission by 5%	Number of people aged 65 – 74 who are subject to urgent or emergency admissions.	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2003/04 = 1,091	Progress on target will be reported to the Joint Strategy Group on an annual basis	Figures for 2005/06 are not yet available from NHS systems. The 2005/06 figure will be reported in the interim report of October 2006.  NHS Indicator

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Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD8. To reduce the number of people aged 75 – 84 admitted to hospital as an urgent or emergency admission by 5%	Number of people aged 75 – 84 who are subject to urgent or emergency admissions.	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2003/04 = 1,028	Progress on target will be reported to the Joint Strategy Group on an annual basis	<p>Figures for 2005/06 are not yet available from NHS systems. The 2005/06 figure will be reported in the interim report of October 2006.</p> <p>NHS Indicator</p>
Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD9. To reduce the number of people aged 85 + admitted to hospital as an urgent or emergency admission by 5%	Number of people aged 85+ who are subject to urgent or emergency admissions.	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2003/04 = 439	Progress on target will be reported to the Joint Strategy Group on an annual basis	<p>Figures for 2005/06 are not yet available from NHS systems. The 2005/06 figure will be reported in the interim report of October 2006.</p> <p>NHS Indicator</p>
Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD10. To increase the number of clients benefiting from early / supported discharge by 2%	Number of clients benefiting from Early / Supported Discharge	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2004/05 = 315  2005 / 06 = 345 (9.5% increase)	Progress on target will be reported to the Joint Strategy Group on an annual basis	<p>We believe that our improved performance in this indicator has contributed to our reduction in the number of delayed discharges.</p> <p>NHS Indicator</p>

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Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD11. Reduce the number of people aged 65 – 74 who are re-admitted within 7 days of discharge by 2%	Number of people aged 65 - 74 who were re-admitted within 7 days of discharge	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2004/05 = 129  2005/06 = 117*  *This is an estimate based on 12 months data to 30.9.05. Estimate indicates an 9.5% reduction	Progress on target will be reported to the Joint Strategy Group on an annual basis	Estimated figures based on 12 months data to 30.9.05.  The 9.5% reduction indicated is subject to verification once year-end data is available.  NHS Indicator
Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD12. Reduce the number of people aged 75 – 84 who are re-admitted within 7 days of discharge by 2%	Number of people aged 75 - 84 who were re-admitted within 7 days of discharge	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2004/05 = 168  2005/06 = 158 *  *This is an estimate based on 12 months data to 30.9.05. Estimate indicates an 6% reduction	Progress on target will be reported to the Joint Strategy Group on an annual basis	Estimated figures based on 12 months data to 30.9.05.  The 6% reduction indicated is subject to verification once year-end data is available.  NHS Indicator

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Assisting people to lead independent lives through reducing inappropriate admission to hospital, reducing time spent inappropriately in hospital and enabling supported and faster discharge from hospital.	DD13. Reduce the number of people aged 85+ who are re-admitted within 7 days of discharge by 2%	Number of people aged 85+ who were re-admitted within 7 days of discharge	<ul style="list-style-type: none"> <li>• NHS GG &amp; C</li> <li>• WDC</li> <li>• Communities Scotland</li> </ul>	Baseline 2004/05 = 56  2005/06 = 73 *  This is an estimate based on 12 months data to 30.9.05. Estimate indicates an 30% increase	Progress on target will be reported to the Joint Strategy Group on an annual basis	Estimated figures based on 12 months data to 30.9.05.  The 30% increase indicated is subject to verification once year-end data is available.  NHS Indicator
<b>CARERS</b> Better involvement and support of carers	C1. Increase the number of people receiving a short break by 2%.	Number of people who received a short break	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004/05 = 61  2005/06 = 64 (increase = 5%)	Progress on target will be reported to the Joint Strategy Group on an annual basis	This service has been tailor made around the needs of the carer.  The Carers themselves were fully involved in designing and commissioning this service.

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Better involvement and support of carers	C2. Sustain residential respite at current levels	Residential respite nights	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2003/04 = 3,055  2004/05 = 3,648  2005/06 = 4,287 (based on un-audited figures)	Progress on target will be reported to the Joint Strategy Group on an annual basis	Un-audited figures suggest an increase of almost 18%
Better involvement and support of carers	C3. Sustain Respite at home at current levels	Respite at home	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2003/04 = 3,542  2004/05 = 12,096  2005/06 = 16,548 (based on un-audited figures)  (recorded in hours)	Progress on target will be reported to the Joint Strategy Group on an annual basis	Un-audited figures suggest an increase of almost 37%

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Better involvement and support of carers	C4. Sustain Respite at day services at current levels	Respite at day services	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2003/04 = 71,708  2004/05 = 62,759  2005/06 = 69,509 (based on au-audited figures)  (recorded in hours)	Progress on target will be reported to the Joint Strategy Group on an annual basis	Un-audited figures suggest an increase of almost 11%
Better involvement and support of carers	C5. Increase the number of carers' assessments to 60	Number of carers who received a Carers Support Plan	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Communities Scotland</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline 2004/05 = 36  2005/06 = 23 (36% decrease)	Progress on target will be reported to the Joint Strategy Group on an annual basis	Operational staff have reported that carers remain reluctant to complete a support plan, either under the self-assessment model or with a worker helping. We are keen to know if other partnerships are experiencing this difficulty, and to learn from any successful areas.

# **Department of Social Work Services**

## **Community Care Local Improvement Targets**

**New Targets for year ending 31<sup>st</sup> March  
2007**



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<p><b>LEARNING DISABILITY</b></p> <p>Everyone with a learning disability who wants to, should be able to have a 'personal life plan'.</p> <p>Reference:</p> <p>The Same as You? 2000 WDC PIP Agreement 2004 – 2007</p>	<p>LD1. Total number of clients with Personal Life Plan to increase by 10%</p>	<p>Total number of clients being offered a PCP</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline 2005/2006 = 194</p>	<p>Half yearly through JPIAF</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>
<p>Develop a range of employment opportunities for people with learning disabilities.</p> <p>Reference:</p> <p>The Same as You? 2000 WDC PIP Agreement 2004 - 2007</p>	<p>LD2. To increase the total number of people in paid employment by 5</p>	<p>Total number of people in paid employment</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline 2005/2006 = 19</p>	<p>Half Yearly Through JPIAF</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>

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<p>With partners implement a programme of Health Checks for people with a learning disability who wish one.</p> <p>Reference:</p> <p>The Same as You? 2000 WDC PIP Agreement 2004 - 2007</p>	<p>LD3. To increase the total number of people with a learning disability who are being offered a health check by 10%</p>	<p>Total number of people being offered a health check</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline 2005/2006 =119</p>	<p>Half yearly through JPIAF</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>
<p>The development and implementation of Health Logs</p> <p>Reference:</p> <p>The Same as You? 2000 WDC PIP Agreement 2004 - 2007</p>	<p>LD4. To increase the number of health logs being used by 8</p>	<p>Total number of Health Logs being used</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline 2005/2006 = 25</p>	<p>Half yearly through JPIAF</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>

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1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
<p>Ensuring people receive an improved quality of care through better trained staff.</p> <p>Access for staff to level one of Inclusive (Total) communication training to assist in their contact with people with a learning disability.</p> <p>Reference: The Same as You? 2000 WDC PIP Agreement 2004 - 2007</p>	<p>LD5. Increase number of staff being trained to level one of Inclusive (Total) communication training to assist in their contact with people with a learning disability by 35.</p>	<p>Total number of staff being trained in level 1 Inclusive (Total) Communication</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline 2005/2006 = 79</p>	<p>Quarterly through the quarterly performance report</p> <p>Annual reporting to SE and HISJP</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>
<p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>LD6. Specialist Single Shared Assessment to be implemented across LD Services</p>	<p>Number of SSAs completed.</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline to be established during 2006 / 2007</p>	<p>Quarterly through the quarterly performance report</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>

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WEST DUNBARTONSHIRE JOINT FUTURE PARTNERSHIP

NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
<p><b>ADDICTIONS</b></p> <p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>A1. Increase Number of individuals accessing addiction services by 5% per annum</p>	<p>New clients accessing addiction services</p>	<ul style="list-style-type: none"> <li>• WDC</li> <li>• WDCHP</li> </ul>	<p>Baseline to be established during 2006 / 2007</p>	<p>Quarterly Performance Reports</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>
<p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>A2. Reduce waiting times between referral to service and first appointment – 90% of clients seen within 14 days</p>	<p>Days between referral and first appointment</p>	<ul style="list-style-type: none"> <li>• WDC</li> <li>• WDCHP</li> </ul>	<p>Baseline July – September 2005 = 58% of individuals offered first appointment within 14 days of referral</p>	<p>Quarterly / Waiting Times Figures</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>Same targets across partner agencies</p>

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NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Ensuring people receive an improved quality of care through faster access to services and better quality services.	A3. Improve access to integrated addiction services through increasing the number of Single Shared Assessments, by 10 in year one and subsequently by 20% per annum	Number of Addiction SSA'S completed	<ul style="list-style-type: none"> <li>• WDC</li> <li>• WDCHP</li> </ul>	Baseline 2004/05 = 2  20% per annum 2005/06 = 12 2006/07 = 14 2007/08 = 17	Quarterly / Scottish Executive Returns	**NEW TARGETS FOR 2006/07**  Same % increase across partner agencies. Baseline to be established during 2006 / 07
Improve range of service choice for individuals	A4. Focus groups and client surveys to be used to test perceptions of clients and range of service choice relative to client need	Completed Surveys and reports on outcome to HISJP.	<ul style="list-style-type: none"> <li>• WDC</li> <li>• WDCHP</li> </ul>	To be set following first results of Focus Groups and Surveys	Reports to November 06 and February 07 HISJP	**NEW TARGETS FOR 2006/07**

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NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
<p><b>MENTAL HEALTH</b></p> <p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>MH1. The number of working days between referral and assessment commencement should not exceed 5.</p>	<p>Average number of days between referral and assessment commencement.</p>	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline will be developed during 2006 / 07</p>	<p>Progress on target will be reported to the Joint Strategy Group on an annual basis</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>Develop report that will capture required information.</p>
<p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>MH2. Increase the number of MH Specialist SSA's by 20%</p>	<p>Number of MH SSSAs completed</p>	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline: 2004/05 =9 2005/06 =29 (222% increase) Target for 2006/07 = 35</p>	<p>Report to WD MH Planning Group</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>
<p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>MH3. Increase the number of Carer's Support Plans by 100%</p>	<p>Number of Carer's Support Plans completed</p>	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	<p>Baseline 04/05 = 2 05/06 = 0  Target for 2006/07 = 4</p>	<p>Report to WD MH Planning Group</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>We note that we have not completed any Carer's Support Plans in respect of Mental Health Services, but would stress that these have been offered as a matter of course to every identified carer. We plan to further develop our systems to record the number of assessments offered, refused &amp; accepted.</p>

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WEST DUNBARTONSHIRE JOINT FUTURE PARTNERSHIP

NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Promote consumer involvement in the planning & delivery of services	MH4. Train 12 consumers in committee skills	No of consumers trained.	<ul style="list-style-type: none"> <li>• WDC</li> <li>• NHSGG&amp;C</li> <li>• MHF</li> <li>• LAAS</li> </ul>	New development – therefore no current baseline.	Report to WD MH Planning Group	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>Build on joint approach to consumer perspective monitoring, evaluation &amp; consultation</p>
<p><b>ACQUIRED BRAIN INJURY</b></p> <p>Supporting more people at home to live full and independent lives.</p>	ABI1. Establish baseline of the number of people receiving service provision for Acquired Brain Injury	Number of individuals accessing the service for the first time.	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Momentum</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	A baseline will be developed during 2006/07	Report to WD ABI Planning Group	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>Acquired Brain Injury clients may be recorded within a variety of Community Care Group classifications (e.g. Physical Disability; Mental Health), therefore our information system cannot readily report the current baseline. We are working to try to develop a baseline measure that can be reported more easily.</p>

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NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Ensuring people receive an improved quality of care through faster access to services and better quality services.	ABI2. Develop Specialist ABI SSA.	Specialist SSA fully operational by September 2006.	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Momentum</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline number of Specialist SSAs completed will be established during 2006/07.	Progress on target will be reported to the Joint Strategy Group on a regular basis.	<b>**NEW TARGETS FOR 2006/07**</b>
Better involvement and support of carers	ABI3. Undertake a consultation of ABI service users and their carers.	Consultation to be completed by Jan 07	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Momentum</li> <li>• Community Care Planning &amp; Implementation Partnership</li> </ul>	Baseline target will be set as result of consultation.	Progress on target will be reported to the Joint Strategy Group on a regular basis.	<b>**NEW TARGETS FOR 2006/07**</b>



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NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
<p><b>SENSORY IMPAIRMENT</b></p> <p>Supporting more people at home to live full and independent lives.</p>	<p>S11. Increase the number of people receiving rehabilitation services for sight loss by 2%</p>	<p>Total number of individuals accessing the service.</p>	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Community Care Planning &amp; Implementation Partnership</li> <li>• Focus</li> <li>• Visibility</li> <li>• RNIB</li> <li>• Bankie Talk</li> <li>• Rockvale Rebound</li> </ul>	<p>Baseline: 2005/06 number of people receiving the service = 34</p>	<p>Progress on target will be reported to the Sensory Impairment Strategy Group and Joint Strategy Group on a regular basis.</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p>

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NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Ensuring people receive an improved quality of care through faster access to services and better quality services.	SI2. Increase the number of users of the Outreach services within the community by 2% (including increased services delivered by Lomond Care and Repair for sensory impaired clients)	Number of clients attending Outreach Services increased	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Community Care Planning &amp; Implementation Partnership</li> <li>• Deafblind Scotland</li> <li>• Focus</li> <li>• Visibility</li> <li>• Deaf Connections</li> <li>• RNID</li> <li>• RNIB</li> <li>• Bankie Talk</li> <li>• Rockvale Rebound</li> </ul>	Baseline: 2005/06 number of people receiving the service = 225	Progress on target will be reported to the Sensory Impairment Strategy Group and the Joint Strategy Group on a regular basis.	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>Some issues around sensory impairment need to be identified at a very early stage to ensure optimum outcome for the affected person before deterioration of their condition affects mobility, access to information and communication</p>

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NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Ensuring people receive an improved quality of care through faster access to services and better quality services.	SI3. Further implement of Specialist Sensory Impairment SSA September 2006.	Specialist SSA fully operational by March 2007.	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> <li>• Community Care Planning &amp; Implementation Partnership</li> <li>• Deafblind Scotland</li> <li>• Focus</li> <li>• Visibility</li> <li>• Deaf Connections</li> <li>• RNID</li> <li>• RNIB</li> <li>• Bankie Talk</li> <li>• Rockvale Rebound</li> </ul>	Baseline number of Specialist SSAs completed will be established during 2006/07.	Progress on target will be reported to the Joint Strategy Group on a regular basis.	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>SSA needs to count number of assessments offered, refused &amp; accepted</p>
<p><b>EQUIPMENT &amp; ADAPTATIONS</b></p> <p>Ensuring people receive an improved quality of care through faster access to services</p>	E&A1. Decrease the number of people age 0-17 on the waiting list by 5%	Number of people aged 0-17 on waiting list	<ul style="list-style-type: none"> <li>• West Dunbartonshire Council</li> <li>• NHS Greater Glasgow &amp; Clyde</li> </ul>	Baseline under development	Quarterly waiting list figures	<p><b>**NEW TARGETS FOR 2006/07**</b></p>

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WEST DUNBARTONSHIRE JOINT FUTURE PARTNERSHIP

NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
Ensuring people receive an improved quality of care through faster access to services	E&A2. Decrease the number of people age 18-64 on the waiting list by 5%	Number of people aged 18-64 on waiting list	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	Baseline under development	Quarterly waiting list figures	<b>**NEW TARGETS FOR 2006/07**</b>
Ensuring people receive an improved quality of care through faster access to services	E&A3. Decrease the number of people age 65+ on the waiting list by 5%	Number of people aged 65+ on waiting list	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	Baseline under development	Quarterly waiting list figures	<b>**NEW TARGETS FOR 2006/07**</b>
Ensuring people receive an improved quality of care through faster access to services	E&A4. Increase the number of people age 0-17 receiving an assessment by 5%	Number of people aged 0-17 on waiting list	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	Baseline under development	Quarterly assessment figures	<b>**NEW TARGETS FOR 2006/07**</b>
Ensuring people receive an improved quality of care through faster access to services	E&A5. Increase the number of people age 18-64 receiving an assessment by 5%	Number of people aged 18-64 on waiting list	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	Baseline under development	Quarterly assessment figures	<b>**NEW TARGETS FOR 2006/07**</b>
Ensuring people receive an improved quality of care through faster access to services	E&A6. Increase the number of people age 65+ receiving an assessment by 5%	Number of people aged 65+ on waiting list	<ul style="list-style-type: none"> <li>West Dunbartonshire Council</li> <li>NHS Greater Glasgow &amp; Clyde</li> </ul>	Baseline under development	Quarterly assessment figures	<b>**NEW TARGETS FOR 2006/07**</b>

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NEW TARGETS FOR YEAR ENDED 31<sup>ST</sup> MARCH 2007

1. NATIONAL OUTCOME	2. LOCAL IMPROVEMENT TARGET 2006/ 2007	3. PROPOSED PERFORMANCE INDICATORS	4. STAKEHOLDERS INVOLVED IN SETTING TARGETS	5. TARGET VALUE 2004 / 2005 & 2005 / 2006	6. MONITORING ARRANGEMENTS	7. COMMENTS
<p><b>WELFARE RIGHTS</b></p> <p>Ensuring people receive an improved quality of care through faster access to services and better quality services.</p>	<p>WR1. Increase the number of people given advice / support (where a benefit / grant claim is not applicable) by 2%.</p>	<p>Number of people given advice / support.</p>	<ul style="list-style-type: none"> <li>• WDC</li> <li>• Macmillan</li> <li>• WDCHP</li> </ul>	<p>Baseline to be developed.</p>	<p>Quarterly Performance Report</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>People tell us that advice and/or support is extremely valuable when coming to terms with a cancer diagnosis. It is therefore important to reflect this part of the service, even if there is no financial improvement for patients or their families.</p>
<p>Improve Social Inclusion in respect of disadvantaged groups.</p>	<p>WR2. Increase the no. of lone parents supported to return to work by 2%</p>	<p>Number of lone parents supported to return to work.</p>	<ul style="list-style-type: none"> <li>• WDC</li> <li>• WDCHP</li> </ul>	<p>Baseline to be developed.</p>	<p>Quarterly Performance Report</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>New service area and performance management framework still under development.</p>
<p>Improve Social Inclusion in respect of disadvantaged groups.</p>	<p>WR3. Increase the no. of people referred from <i>Working for Families</i> to the Welfare Rights Debt Money Advice Service by 2%</p>	<p>Number of people referred from <i>Working for Families</i> to the Welfare Rights Debt Money Advice Service.</p>	<ul style="list-style-type: none"> <li>• WDC</li> <li>• WDCHP</li> </ul>	<p>Baseline to be developed.</p>	<p>Quarterly Performance Report</p>	<p><b>**NEW TARGETS FOR 2006/07**</b></p> <p>New service area and performance management framework still under development.</p>

# **Local Improvement Targets**

## **Criminal Justice**

**2005 / 2006**

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> High Quality Best Value Services <b>Departmental priority :</b> The provision of an efficient service to the Criminal Justice system  <b>New target for 2005-2007</b>	<b>National objective</b>	Local Government in Scotland Act 2003 – Section 1 Securing Best Value
	<b>Cross Reference</b>	<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Criminal Justice Plan</li> <li>• Social Work Services Plan (Pages 38)</li> <li>• ROA Objective 1</li> </ul> <b>Related Performance Indicators / Statistical Returns</b> <ul style="list-style-type: none"> <li>• Audit Scotland - Statutory Performance Indicator – Criminal Justice – Social Enquiry Reports</li> </ul>
	<b>Departmental Objective</b>	To ensure reports to the court are submitted on time
	<b>Service Performance Indicator/Target</b>	14.0 The number of reports submitted to the courts during the year 14.1 The proportion of these submitted to courts by the due date

Action	Status Inter Departmental Working / Inter Agency Working	Officers involved	Reporting Frequency	Baseline Target	Annual Targets	Inputs	Outputs	Outcome Comments
14.0.1 To continue to monitor reports to the courts in terms of quality and adherence to agreed timescales.  14.1.1 To build on sentences evaluation of court reports to address any issues identified	Inter agency	Raymund McQu HAR	Annual	2203/04 947 100%	2004/05 = 100% 2005/06 = 100% 2006/07 = 100%	Officer time	Reports which are of high quality and are submitted timeously	<ul style="list-style-type: none"> <li>• Performance is 75.8%</li> <li>• Sentences evaluation provided positive feedback</li> </ul>

**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority:</b> High Quality Best Value Services <b>Departmental priority :</b> The provision of an efficient service to the Criminal Justice system</p> <p><b>New target for 2005-2007</b></p>	<b>National objective</b>	Local Government in Scotland Act 2003 – Section 1 Securing Best Value
	<b>Cross Reference</b>	<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>• Criminal Justice Plan</li> <li>• Social Work Services Plan (Pages 38)</li> <li>• ROA Objective 1</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <ul style="list-style-type: none"> <li>• Audit Scotland - Statutory Performance Indicator – Criminal Justice - Probation</li> </ul>
	<b>Departmental Objective</b>	To ensure all of those sentenced to a probation order are seen within one week.
	<b>Service Performance Indicator/Target</b>	<p>15.0 The number of new Probation Orders issued during the year</p> <p>15.1 The proportion of new probationers seen by a supervising officer within one week</p>

<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers involved</b>	<b>Reporting Frequency</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
15.0-1 To continue to monitor adherence to standards through audit process	Departmental	Raymund McQ HAR	Annual	2003/04 162 100%	2004/05 =100% 2005/06 = 100% 2006/07 = 100%	Officer time	Probationers seen within one week	<ul style="list-style-type: none"> <li>• Can be affected by probationers not keeping appointments</li> <li>• Improved performance in 2005/06 is 83.2%</li> </ul>



**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority:</b> High Quality Best Value Services  <b>Departmental priority :</b> The provision of an efficient service to the Criminal Justice system</p> <p><b>New target for 2005-2007</b></p>	<b>National objective</b>	Local Government in Scotland Act 2003 – Section 1 Securing Best Value
	<b>Cross Reference</b>	<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>Social Work Services Plan (Pages 38)</li> <li>Criminal Justice Plan</li> <li>ROA Objective 1</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <ul style="list-style-type: none"> <li>Audit Scotland - Statutory Performance Indicator – Criminal Justice – Community Service</li> </ul>
	<b>Departmental Objective</b>	To provide an efficient Community Service scheme in line with National Standards
	<b>Service Performance Indicator/Target</b>	<p>16.0 The number of new Community Service Orders issued during the year</p> <p>16.1 The average number of hours per week taken to complete orders</p>

Action	Status Inter Departmental Working / Inter Agency Working	Officers involved	Reporting Frequency	Baseline Target	Annual Targets	Inputs	Outputs	Outcome Comments
16.0-1 Continue to monitor attendance levels of offenders sentenced to Community Service	Departmental	Norman Firth HAR	Annual	100 8.19 hours	2004/05 = tbc 2005/06 = tbc 2006/07 = tbc	Officer time	Efficient delivery of Community Service scheme	<ul style="list-style-type: none"> <li>Reduction in hours allocated due to drop in length of orders imposed by the court, 3.7 hours is average.</li> </ul>

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide High Quality Best Value Services <b>Departmental priority :</b> The provision of High Quality Best Value Social Work Services to the Criminal Justice System  <b>New target for 2005-2006</b>			<b>National objective</b>					
			<b>Cross Reference</b>			<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Criminal Justice Partnership Plan</li> <li>• Social Work Services Plan (Pages 35)</li> </ul> <b>Related Performance Indicators / Statistical Returns</b> <ul style="list-style-type: none"> <li>• PI's 6-8 Audit Scotland - Statutory Performance Indicator</li> </ul>		
			<b>Departmental Objective</b>			To ensure that all staff receive the training that they require to deliver High Quality Best Value Services		
			<b>Service Performance Indicator/Target</b>			Number of staff trained in specific risk assessment tools.		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Reporting Frequency</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
Audit of current risk assessment tools. Training of staff in - Risk Assessment (Sex Offenders) - Risk Management - Risk Assessment Generic	Partnership	NF HAR	Annual	N/a	2005/06 tbc 2006/07 tbc 2007.08 tbc	Officer time and training resources	Accurate risk assessment to inform service delivery	Partly implemented on target
Standards for preparation of reports to be developed and implemented	Partnership	NF HAR	Quarterly	N/a		Officer time and training resources	Uniform standard of reports within the Partnership	Partly implemented on target

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide High Quality Best Value Services <b>Departmental priority :</b> The provision of High Quality Best Value Social Work Services to the Criminal Justice System  <b>New target for 2005-2006</b>	<b>National objective</b>	
	<b>Cross Reference</b>	<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Criminal Justice Partnership Plan</li> <li>• Social Work Services Plan (Pages 35)</li> </ul> <b>Related Performance Indicators / Statistical Returns</b> <ul style="list-style-type: none"> <li>• PI's 6-8 Audit Scotland - Statutory Performance Indicator</li> </ul>
	<b>Departmental Objective</b>	To ensure performance monitoring and information dissemination is standardised
	<b>Service Performance Indicator/Target</b>	Systems in place to monitor Public Performance Reporting and disseminate information

<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Reporting Frequency</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
Working Groups to develop consistent service information across Partnership area	Partnership	Raymund McQ HAR	Annual	N/a	2005/06 tbc 2006/07 tbc 2007.08 tbc	Officer time and training resources	Consistent approach across Partnership	Ongoing
Monitoring and Reporting Working Group to be established	Partnership	Raymund McQ HAR	Quarterly	N/a	2005/06 tbc 2006/07 tbc 2007.08 tbc	Officer time and training resources	A culture of continuous improvement which includes ongoing monitoring of interventions on service outputs	Group in place

**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority:</b> Provide High Quality Best Value Services / Create a Better Environment  <b>Departmental priority :</b> The provision of a High Quality Best Value Services within Criminal Justice which will contribute to the safety of the citizens of West Dunbartonshire  <b>New target for 2005-2006</b></p>			<b>National objective</b>					
			<b>Cross Reference</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>• Criminal Justice Partnership Plan</li> <li>• Social Work Services Plan (Pages 38)</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <ul style="list-style-type: none"> <li>• PI's 6-8 Audit Scotland - Statutory Performance Indicator</li> </ul>			
			<b>Departmental Objective</b>		To ensure services/programmes are in place to meet key priorities.			
			<b>Service Performance Indicator/Target</b>		Appropriate and effective services and programmes implemented and evaluated			
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Reporting Frequency</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
Develop and implement:- - Domestic Abuse Perpetrator Programme - Diversion Programme for Drugs and Alcohol Misusing Offenders - Drug Treatment and Testing Orders - Groupwork and one to one Programmes	Partnership	Raymund McQ HAR	Annual	N/a	2005/06 tbc 2006/07 tbc 2007.08 tbc	Officer time and resources	Range of programmes in place to meet key policy / practice imperatives	In place Evaluation underway. Accreditation underway. Revised programme awaited
Evaluation Plan for all programmes/projects	Partnership	Raymund McQ HAR	Annual	N/a	2005/06 tbc 2006/07 tbc 2007.08 tbc	Officer time and resources	All information subject to evaluation over a period of time	In place

# **Local Improvement Targets**

## **Children and Families**

**2005 / 2006**

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Develop our Children and Young People <b>Sub-priority :</b> Vulnerable Children and Young People		<b>National objective</b>				
		<b>Cross Reference</b>		<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Integrated Children's Services Plan</li> <li>• Social Work Services Plan (Pages 26)</li> <li>• ROA Objective 4 &amp; 5</li> </ul> <b>Related Performance Indicators / Statistical Returns</b> <ul style="list-style-type: none"> <li>• Number of Looked After Children</li> </ul>		
		<b>Corporate Objective</b>		Increase the number of families receiving support where addiction is a issue		
		<b>Service Performance Indicator/Target</b>		7.0 Number of Young People who misuse substances. 7.1 Number of families receiving support where children are affected by parental substance misuse.		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Baseline Target 2003/04</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
7.0.1 Inter agency group set to develop and monitor support services to this group of vulnerable young people	Inter Agency	80	2004 - 105 2005 - 130 2006 - 130 2007 - tbc	Officer Time Financial Resources	Increased level of support to Young People and their families	The Corporate objective states we will support the number of families needing support where addiction is an issue. Experience in reporting this target has shown us that very often it is difficult to separate purely support to the parent or to the child.
7.1.1 Inter agency group set to develop and monitor support services to this group of vulnerable young people	Inter Agency	173	2004 - 173 2005 - 200 2006 - 200 2007 - tbc	Officer Time Financial Resources	Increased level of support to Young People and their families	As at the end of April 2006, 247 children, families and young people were receiving support

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Service Plan 2005 - 2009**

<b>Corporate priority</b> Develop our children and Young People <b>Sub-priority</b> : Vulnerable Children and Young People		<b>National objective</b>				
		<b>Cross Reference</b>		<b>Related Plans</b> <ul style="list-style-type: none"> <li>Social Work Services Plan (Pages 26)</li> <li>ROA Objective 4 &amp; 5</li> </ul> <b>Related Performance Indicators / Statistical Returns</b> <ul style="list-style-type: none"> <li>P15 Number of Looked After Children</li> </ul>		
		<b>Corporate Objective</b>		Develop and support services to vulnerable families and children aged under 5		
		<b>Service Performance Indicator/Target</b>		8.0 Number of families supported through the Young Families Support		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Baseline Target 2003/04</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
8.0.1 Interagency partnership to work together to provide integrated support services to vulnerable families with young children.	Inter Agency	68	2004/05 - 175 2005/06 - 200 2006/07 tbc	Officers time Changing Children's Services Fund	Number of families supported in positive caring	This project has proved successful in supporting vulnerable families in preventing family breakdown. This rate of referral, coupled with information on current service users, indicates that the service is on line to achieve targets. A second phase of the service i.e. the development of outreach services has been implemented. Since it started 521 families have been supported. 4 outreach staff are now in post.

**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority:</b> Provide high quality, Best Value Services  <b>Departmental priority :</b> To support children, young people and families at key stages of their lives</p> <p><b>New target for 2005-2007</b></p>		<b>National objective</b>				
		<b>Cross Reference</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>• Integrated Children's Services Plan</li> <li>• Social Work Services Plan (Pages 26 )</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <p>None</p>		
		<b>Departmental Objective</b>		Provide a full range of mechanisms and processes that meet the different needs of the people in West Dunbartonshire		
		<b>Service Performance Indicator/Target</b>		26.0 Number of Young Children Supported through transitional planning arrangements		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
26.0.1 Inter-agency working group to further develop integrated support packages for Children and Young People and families at key points of transition	Inter Departmental	30 young people	tbc	Pilot Project Scheme Financial Resources	Increased range of targeted support packages in place at key periods of transition for children with special needs and those who are looked after and accommodated children who cannot return home	Audit underway.



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# **Departmental Performance Improvement Action Plan**

## **Departmental Wide**

### **2005 / 2006**

# Departmental Performance Indicators

- 23.0 Number of users satisfied with service across all departmental services
- 24.0 Number of departmental staff who have received Racial Equality awareness training
- 25.0 Number of staff needing to be trained on a common range of multi-agency training
- 27.0 Each service section and/or specialism to have a Performance Improvement Action Plan, which is communicated to and understood by team members
- 28.0 Each section has agreed criteria on what they report and progress is regularly reported through team meetings and the DMT.
- 29.0 Improve Customer Care Standards
- 30.0 To ensure that our system of financial reporting is efficient and clearly documented and adhered to by all staff
- 31.0 To ensure that our Personnel system is efficiently delivered and is responsive to the needs of staff

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide high quality, Best Value Services Departmental Priority: Develop communication and information strategy  <b>New target for 2005-2007</b>			<b>National objective</b>		Customer First Agenda, Modernising Government Agenda		
			<b>Cross Reference</b>		<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Corporate Plan</li> <li>• Social Work Services Plan (Pages 20 and 22)</li> <li>• All Departmental Plans</li> </ul> <b>Related Performance Indicators / Statistical Returns</b>  None		
			<b>Departmental Objective</b>		Increase accountability to stakeholders		
			<b>Service Performance Indicator/Target</b>		23.0 Number of users satisfied with service across all departmental services		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
23.0.1 Adopt corporate customer satisfaction tool kit and develop a programme of consultation on key service areas	Departmental	Moira S SW	April 06		Staff time Financial Resources	Increased level of satisfaction with services	On target
23.0.2 Review all current departmental communication and information	Departmental	Moira S SW	April 06		Staff time Financial Resources	Increased level of satisfaction with services	On target
23.0.3 Develop a departmental communications and information strategy in line with corporate guidance	Departmental	Moira S SW	September 2006		Staff time Financial Resources	Increased level of satisfaction with services	On target
23.0.4 Carry out a range of pilot satisfaction surveys across all service areas	Departmental	Moira S SW	3 audits annually	2005/06 = tbc 2006/07 = tbc	Staff time Financial Resources	Measure year on year service satisfaction trends	3 completed in 05/06 5 planned in 06/07

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide high quality, Best Value Services <b>Departmental Priority:</b> To ensure Social Work Services are accessible to all people within West Dunbartonshire  <b>New target for 2005-2007</b>			<b>National objective</b>				
			<b>Cross Reference</b>		<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Social Work Services Plan (Pages 22 )</li> <li>• Workforce Development Plan</li> </ul> <b>Related Performance Indicators / Statistical Returns</b>  None		
			<b>Departmental Objective</b>		To meet statutory requirements in equalities legislation		
			<b>Service Performance Indicator/Target</b>		24.0 Number of departmental staff who have received Racial Equality awareness training		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
24.0.1 Complete Racial Equality training needs analysis	Departmental	Beryl M SW	To be set		Staff time Financial Resources	A baseline measure for staff needing to be trained	Now part of Induction process and is being rolled-out to existing staff. Target is all staff by end of 06/07
24.0.2 Develop an ongoing programme of events for Racial Equality across all services	Inter Departmental	Beryl M SW	To be set		Staff time Financial Resources	Increased staff awareness of equality issues to better respond to client need	Being achieved through 24.01

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide high quality Best Value Services <b>Departmental Priority:</b> To support and develop all staff in order that they can provide high quality services  <b>New target for 2005-2007</b>			<b>National objective</b>		<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Workforce Development Plan</li> <li>• Social Work Services Plan (Pages 22 and 31)</li> </ul> <b>Related Performance Indicators / Statistical Returns</b>  None		
			<b>Cross Reference</b>				
			<b>Departmental Objective</b>		Provide employees with opportunities to learn and develop to help them fulfil their roles to the best of their abilities		
			<b>Service Performance Indicator/Target</b>		25.0 Number of staff needing to be trained on a common range of multi-agency training		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
25.0.1 Convene Joint Training Group to identify current training across all partner agencies for example Moving and Handling, Welfare Benefits, Single Shared Assessment awareness training and set baseline targets	Interagency and Inter Departmental	Beryl M SW	To be established		Staff time Financial Resources	Joint Plan which facilitates Inter-Agency training to form the basis of Joint Working	Slipped. Being developed in 2006/07

**Social Work Services  
Service Plan 2005 - 2009 - Departmental Action Plan**

<p><b>Corporate priority</b> High Quality Best Value Services  <b>Departmental Priority</b> : To ensure Best Value Services through a culture of continuous improvement  <b>New target for 2005-2007</b></p> <p>Each service section and/or specialism to have a Performance Improvement Action Plan, which is communicated to and understood by team members.</p>			<b>National objective</b>				
			<b>Cross Reference</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>• Workforce Development Plan</li> <li>• Social Work Services Plan (Pages 20, 22, 34 and 40)</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b> None</p>		
			<b>Departmental Objective</b>		Evidence of continuous improvement		
			<b>Service Performance Indicator/Target</b>		27.0 Each service section and/or specialism to have a Performance Improvement Action Plan, which is communicated to and understood by team members		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
27.0.1 Key Managers work with identified Strategy Officers to develop service specific targets to support departmental and corporate objectives.	Departmental	All DMT	To be established through audit of current actions	04 05 06	Officers Time.	Each service section has a performance improvement action plan. 31.3.06	Slipped - 5 services have been developed to date - all to be complete by 31/12/06
27.0.2 Key Managers will have responsibility to ensure that the evidence available is accessible and accurate.	Departmental	All DMT	To be established through audit of current actions	04 05 06	Officers Time.	Management and performance information will be accurate. 31.3.06	Slipped due to staffing shortages and turnover. New target 31/12/06
27.0.3 Performance and management information on agreed targets reported at Team Meetings.	Departmental	All DMT	To be established through audit of current actions	04 05 06	Officers Time.	Improved ownership is evident. 31.3.06	All teams discuss performance though not all have team performance improvement plans. Being developed per 27.01
27.0.4 Each member of staff should have an agreed work programme showing key accountabilities and responsibilities including those in relation to information gathering, care first & case recording.	Departmental	All DMT	To be established through audit of current actions	04 05 06	Officers Time.	All staff have a work plan showing key responsibilities and accountabilities. 31.3.06	Slipped due to slippages noted above and slippage in roll-out of PDP process. To be developed by 31/3/07
27.0.5 Each sections Workforce development plan is linked to the service plan	Departmental	All DMT	To be established through audit of current actions		Officers Time.	Each section to have WFD Plan by 31.3.06	Slipped - developmental workforce development plans has slipped. To be complete by 30/9/06

**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority</b> High Quality Best Value Services  <b>Departmental Priority</b> : To ensure Best Value Services through a culture of continuous improvement   <b>New target for 2005-2007</b></p> <p>Each section has an agreed criteria on what they report and progress is regularly reported through the DMT.</p>			<b>National objective</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>Social Work Services Plan (Pages 20, 22, 34 and 40)</li> <li>Workforce Development Plan</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b> None</p>		
			<b>Cross Reference</b>				
			<b>Departmental Objective</b>		Evidence of continuous improvement		
			<b>Service Performance Indicator/Target</b>		28.0 Each section has agreed criteria on what they report and progress is regularly reported through team meetings and the DMT.		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
28.0.1 Regular team meetings to take place at agreed intervals.	Departmental	All DMT	To be established through an audit	04 05 06	Officers Time.	Minutes reflect discussion/actions. 31.3.06 Improved communication standard programme of supervision	Complete. Regular team meetings take place. Audit in October 2006
28.0.2 Each member of staff to have 1:1 supervision at agreed intervals.	Departmental	All DMT	To be established through an audit	04 05 06	Officers Time.	Supervision Records. 31.3.06	Ongoing - audit to take place in November 2006
28.0.3 Absence monitoring policy is implemented and sickness levels regularly reported.	Departmental	All DMT	To be established through an audit	04 05 06	Identified staff have been trained in the use of Maximising Attendance Policy.	Accurate recording. 2005/06 Sickness absence reduces.	Completed - policy in place and sickness discussed at SMT/DMT and team meetings
28.0.4 There is an implementation plan for PDP & 20% of the staff group to have a PDP by 2005/06.	Departmental	All DMT	To be established through an audit	04 05 - 20% 06 - 100%	Staff are appropriately trained and there is an implementation plan.	All staff have an annual PDP. 2006/07 A culture where performance improvement is recognised, understood and regularly reported.	Slipped due to staff turnover. Plans in place for 100% by 31.3.07

**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority</b> High Quality Best Value Services  <b>Departmental Priority</b> : To ensure Best Value Services through a culture of continuous improvement   <b>New target for 2005-2007</b>                   Through supervision and PDP each staff member will understand their development needs, responsibilities and accountabilities.</p>			<b>National objective</b>				
			<b>Cross Reference</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>Social Work Services Plan (Pages 20, 22, 34 and 40)</li> <li>Workforce Development Plan</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <p>None</p>		
			<b>Departmental Objective</b>		Evidence of continuous improvement.		
			<b>Service Performance Indicator/Target</b>		28.0 Each section has an agreed criteria on what they report and progress is regularly reported through team meetings and the DMT		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Targets</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
28.0.6 All staff understand how their contribution fits into the team objectives.	Departmental	All DMT		04 05 06	Officers Time.	All staff have a PDP by 2006/07 Staff understand how their contribution benefits the service.	Slippage linked to PDP process however team meetings have been held to inform and include staff and set team objectives
28.0.7 All staff demonstrate awareness of the links between corporate, service & team objectives.	Departmental	All DMT		04 05 06	Officers Time.	All staff have a PDP. 2006 Staff understand how their contribution benefits the organisation.	Slippage linked to PDP process however team meetings have been held to inform and include staff and set team objectives
28.0.8 All relevant staff can demonstrate opportunities to evidence CPD.	Departmental	All DMT		04 05 06	Officers Time.	Agreed programme of CPD based on professional bodies requirements. Annual Staff can evidence CPD as part of their continued registration with professional bodies.	CPD policy agreed and relevant staff now required to comply with SSSC guidelines and CPD policy  Development of on-line knowledge base resource
28.0.9 All staff can demonstrate they understand their responsibilities and accountabilities.	Departmental	All DMT		04 05 06	Officers Time.	All staff have workplans. Improved awareness	Workplans slipped as noted above. Staff survey to be done in 2006/07 to establish baseline.



**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority</b> High Quality Best Value Services  <b>Departmental Priority</b> : To ensure Best Value Services through a culture of continuous improvement   <b>New target for 2005-2007</b>                   Core Management information will be regularly discussed at team meetings.</p>			<b>National objective</b>				
			<b>Cross Reference</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>• Social Work Services Plan (Pages 20, 22, 34 and 40)</li> <li>• Workforce Development Plan</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <p>None</p>		
			<b>Departmental Objective</b>		Evidence of continuous improvement		
			<b>Service Performance Indicator/Target</b>		28.0 Each section has an agreed criteria on what they report and progress is regularly reported through team meetings and the DMT		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Targets</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
28.0.11 Meetings are recorded and minutes circulated timeously.	Departmental	All DMT	Audit to establish base line	04 05 06	Officers Time.	Timetable, agenda and minutes of team meetings.	Minutes to be recorded on Social Work Intranet as from 1/4/06
28.0.14 Regular reporting back on courses/conferences takes place.	Departmental	All DMT	Audit to establish base line	04 05 06	Officers Time.	Agenda and minutes of team meetings.	Slipped - due to be reinforced through Access to Training Policy

**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority</b> High Quality Best Value Services  <b>Departmental Priority</b> : To ensure Best Value Services through a culture of continuous improvement</p> <p><b>New target for 2005-2007</b></p> <p>Information on absence is collected, analysed and communicated.</p>			<b>National objective</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>Social Work Services Plan (Pages 20, 22, 34 and 40)</li> <li>Workforce Development Plan</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <p>None</p>		
			<b>Cross Reference</b>				
			<b>Departmental Objective</b>		Evidence of continuous improvement		
			<b>Service Performance Indicator/Target</b>		28.0 Each section has an agreed criteria on what they report and progress is regularly reported through team meetings and the DMT		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Targets</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
28.0.16 All staff aware of maximising attendance procedures.	Departmental	All DMT		04 05 06	Maximising attendance policy.		In place - audit to take place by 31/12/06
28.0.17 Absence recorded using appropriate paperwork.	Departmental	All DMT		04 05 06	Staff time.		In place - audit to take place by 31/12/06
28.0.18 Telephone monitoring sheets to be used.	Departmental	All DMT		04 05 06	Staff time.		Social Work Complaints Procedure to be adopted by 31/12/06. This will enforce use of telephone monitoring sheets. Complete
28.0.19 Monthly analysis of absence figures to be reported at team meetings.	Departmental	All DMT		04 05 06	Staff time.	Sickness absence levels reduce.	In place - audit to take place

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide High Quality Best Value Services <b>Departmental -priority :</b> To provide a responsive service  <b>New target for 2005-2007</b>  The Customer Services Strategy is understood and implemented by all staff.			<b>National objective</b>		Local Government in Scotland Act 2003 – Section 1 Securing Best Value		
			<b>Cross Reference</b>		<b>Related Plans</b> <ul style="list-style-type: none"> <li>The Customer Service Strategy</li> <li>Social Work Services Plan (Pages 20, 22, 34 and 40)</li> </ul> <b>Related Performance Indicators / Statistical Returns</b> None		
			<b>Departmental Objective</b>		Evidence of continual improvement		
			<b>Service Performance Indicator/Target</b>		29.0 Improve Customer Care Standards		
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
29.0.1 All staff are aware of the Customer Service Strategy and it is included in induction of new staff.	Departmental	All DMT	Audit to establish base line	04 05 06	Officers Time	The Customer Service Standards can be evidenced and reported.	Complete. Audit in 2006/07
29.0.2 The Guidelines for telephone management are followed and monitored and included in induction of new staff.	Departmental	All DMT	Audit to establish base line	04 05 06	Officers Time	The Customer Service Standards can be evidenced and reported.	Included in induction and covered through Customer Services Strategy and all staff being aware of it. Audit in 2006/07
29.0.3 The Guideline on producing written materials, including timescales, are followed and monitored and included in induction of new staff.	Departmental	All DMT	Audit to establish base line	04 05 06	Officers Time	The Customer Service Standards can be evidenced and reported.	Included in induction and covered through Customer Services Strategy and all staff being aware of it. Audit in 2006/07
29.0.4 The Guidance on email management are followed and included in induction of new staff.	Departmental	All DMT	Audit to establish base line	04 05 06	Officers Time	The Customer Service Standards can be evidenced and reported.	Included in induction and covered through Service Standards Strategy and all staff being aware of it. Audit in 2006/07
29.0.5 The Guidance on conduct for meetings are followed and included in induction of new staff.	Departmental	All DMT	Audit to establish base line	04 05 06	Officers Time	The Customer Service Standards can be evidenced and reported.	Included in induction and covered through Customer Services Strategy and all staff being aware of it. Audit in 2006/07

**Social Work Services  
Service Plan 2005 - 2009**

<p><b>Corporate priority:</b> Provide High Quality Best Value Services <b>Departmental -priority :</b> Efficient Financial Report Service</p> <p><b>New target for 2005-2007</b></p>	<b>National objective</b>		Local Government in Scotland Act 2003 – Section 1 Securing Best Value				
	<b>Cross Reference</b>		<p><b>Related Plans</b></p> <ul style="list-style-type: none"> <li>• Social Work Services Plan (Pages 17)</li> <li>• Workforce Development Plan</li> </ul> <p><b>Related Performance Indicators / Statistical Returns</b></p> <p>None</p>				
	<b>Departmental Objective</b>		Evidence of continuous improvement				
	<b>Service Performance Indicator/Target</b>		30.0 To ensure that our system of financial reporting is efficient and clearly documented and adhered to by all staff				

<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
30.0.1 Carry-out 15 "audit" checks on services to ensure financial policy and procedures are properly implemented	Departmental	Stephen W WWC	15	April 06	Officers time	Improved financial and policy procedures	All visits arranged to take place Jun - Aug 2006
30.0.2 Develop a programme to revise departmental financial procedural documentation	Departmental	Stephen W WWC	N/A	July 06	Officers time	Revised documentation	Finance Team - unavoidable delay in programme development. New target date set.
30.0.3 Develop a programme to review financial work plans and procedures	Departmental	Stephen W WWC	N/A	Mar 07	Officers time	Revised documentation	Plan to review 5 within Finance Team
30.0.4 Develop the financial functionality of the CareFirst system	Departmental	Stephen W WWC	N/A	Mar 06	Officers time	Completed workload plans	Programme established Mar 06 and some reviews already being implemented. Reviews ongoing. Plan to review 5 within Community Care Finance Team and 5 within Finance Team

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide High Quality Best Value Services <b>Departmental -priority :</b> Efficient Financial Report Service  <b>New target for 2005-2007</b>	<b>National objective</b>	Local Government in Scotland Act 2003 – Section 1 Securing Best Value
	<b>Cross Reference</b>	<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Social Work Services Plan (Pages 17)</li> <li>• Workforce Development Plan</li> </ul> <b>Related Performance Indicators / Statistical Returns</b>  None
	<b>Departmental Objective</b>	Evidence of continuous improvement
	<b>Service Performance Indicator/Target</b>	30.0 To ensure that our system of financial reporting is efficient and clearly documented and adhered to by all staff

<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
30.0.5 Develop a customer survey questionnaire	Departmental	Stephen W WWC	N/A	March 08	Officers time	Improved knowledge of customer satisfaction	Development delayed due to unavoidable delays relating to workload. New, more realistic target date for full functionality being achieved.
30.0.6 Develop a customer survey questionnaire	Departmental	Stephen W WWC	N/A	Ongoing	Officers time	Improved knowledge of customer satisfaction	Programme of consultations produced. First questionnaire due to be issued Aug 06 for Finance Team and June 06 for Community Care Finance Team.

**Social Work Services  
Service Plan 2005 - 2009**

<b>Corporate priority:</b> Provide High Quality Best Value Services <b>Departmental -priority :</b> Efficient and Responsive Personnel Service  <b>New target for 2005-2007</b>		<b>National objective</b>		Local Government in Scotland Act 2003 – Section 1 Securing Best Value			
		<b>Cross Reference</b>		<b>Related Plans</b> <ul style="list-style-type: none"> <li>• Social Work Services Plan (Pages 17)</li> <li>• Workforce Development Plan</li> </ul> <b>Related Performance Indicators / Statistical Returns</b> None			
		<b>Departmental Objective</b>		Evidence of continuous improvement			
		<b>Service Performance Indicator/Target</b>		31.0 To ensure that our Personnel system is efficiently delivered and is responsive to the needs of staff			
<b>Action</b>	<b>Status Inter Departmental Working / Inter Agency Working</b>	<b>Officers and SMT involved</b>	<b>Baseline Target</b>	<b>Annual Targets</b>	<b>Inputs</b>	<b>Outputs</b>	<b>Outcome Comments</b>
31.0.1 Improve departmental absence statistics through continued application of Maximising Attendance Policy by reviewing sickness statistics	Departmental	Stephen W WWC	tbc	Dec 06	Officers time	Improved absence levels	Check absence levels April 05-05 Delayed effects due to employee turnover and other work issues
31.0.2 Test a range of alternative means of maximising attendance	Departmental	Stephen W WWC	tbc	Dec 06	Officers time	Improved absence levels	Incentive scheme established Nov 06 - effect to be assessed Dec 06
31.0.3 Develop a programme to revise departmental personnel procedural documentation	Departmental	Stephen W WWC	tbc	Sept 06	Officers time	Revised documentation	Slippage due to other work issues and employee turnover
31.0.4 Develop a programme to review and personnel work plans and procedures	Departmental	Stephen W WWC	tbc	June 06	Officers time	Revised documentation	Slippage due to other work issues and employee turnover
31.0.5 Develop a customer survey questionnaire	Departmental	Stephen W WWC	tbc	Sept 05	Officers time	Improved knowledge of customer satisfaction	Complete - Developed and programme of reviews in place commencing June 06

Social Work is commitment to introducing accreditation to recognised quality management systems for all services. It reflects the corporate strategy, which has agreed on a dual approach of achieving either Investors in People (IIP) or Chartermark for all services and sets out a phased approach to implementation.

Investors in People (IIP) provides a framework for workforce development and sets a level of good practice for improving organisations through their employees. IIP is underpinned by 10 indicators of good practice including strategies to improve the performance of the organisation, evidence that action is taken to improve performance, and evidence that improvements are continually made to improve the performance of the organisation.

Useful sources of evidence include the department having policies and procedures in place and operating effectively for Performance and Development Planning (PDP) and effective communication. Confirmation is sought that employees understand their individual contribution to their team and to the wider departmental and corporate strategies and priorities. The new IIP performance standards include an examination of management capabilities and evidence of cost benefit analysis taking place.

Chartermark is the government's national standard and improvement scheme for customer service in the public sector. It is said to be straightforward and easy to use and might suit a single entity such as a residential unit or a defined group such as Learning Disability.

As a general guide Chartermark suits customer-focused services and IIP suits services with a strategic or administrative function.

Currently the Quality Assurance and Training Section have achieved IIP and Planning, Research and Finance are in the early stages of preparation for accreditation.

The residential homes for older people and children and young people are in the early stages of preparing a submission for Chartermark. Home care are considering EFQM.

Further information is available with Social Work Services Quality Management Systems Policy.

## Community Care Services

A programme of Best Value Reviews (BVRs) for Community Care Services has been developed and will be completed using the Council's Toolkit.

Reviews underway at present are: -

- Commissioning services for older people
- Review of Community Equipment and Adaptations Service
- Review of Youth Justice Service
- Review of Emergency contact services (out of hours)
- Supporting People service reviews.

## Welfare Rights

Welfare Rights Services in conjunction with the Community Planning Partnership recently completed a review of Information and Advice Services.

## Community Work

Community Work have been working with Inverclyde to investigate business process in order to take forward a programme of Best Value Reviews.

## Services to Children and Families





Services to Children and Families are currently carrying out a process benchmarking exercise with Inverclyde Council on work within the Children's Hearings System. A similar exercise is also planned for Child Protection Services

## Future best Value Reviews

The department has prepared a database of future Best Value Reviews to 2011.

Please refer to the legend below and the table on the following page for further information.

### Legend

	Complete and Reported to Members
	Complete
	In Progress
	Planned



## Database of Best Value Reviews

		Start Date	BV1 Review Planning	BV2 Current Service	BV3 Consultation	BV4 Bench marking	BV5 Option Appraisal	BV6 Final Report & Action Plan	Comments
Social Work	Learning Disability-Residential services	Nov-01							PMP 00/01. Follow-up review completed 2002
Social Work	Criminal Justice Services								Completed PMP 01/02
Social Work	Advice Services	Mar-05							Reported to Corporate Services Committee Oct05
Social Work	Learning Disability - Day Services	Aug-04							Reported to HISJ Partnership Aug 05.
Social Work	Community Equipment & adaptations	Mar-04						Mar-05	Follow-up to Audit Scotland study. Action Plan reported to A&PR Committee 3/05.
Social Work	Commissioning Services for Older People								Audit Scotland study (of Commissioning Services for older people) reported to A&PRC 3/05.
Social Work	Community Equipment & adaptations	Aug-05	completed Sept 05	completed May 06	Survey results analysed reported to Phs Disability PIG				New BV review commenced 9/05, aiming to complete equipment service by 6/06. Adaptations later with H&TS
Social Work	Youth Justice Services	Feb-06	completed 5/06						Final report planned for O1/12/06
Social Work	Review of the use of Care Homes	Mar-05	ongoing	planned for 12/05	planned for Feb 06	planned for Feb 06	planned for Feb 06	planned for Apr 06	Follow-up to Audit Scotland study of commissioning services for Older people
Social Work	Emergency Contact Services (out-of-Hours)	Sep-05	completed oct 05	in progress	Stakeholder consultation Apr -May 06	planned for Apr 06	planned for May06	Report by June06	Audit of the use of emergency contacts and their outcomes. Linked to BV Audit of West of Scotland standby service
Social Work	SP Service Review Programme	Jul-05	complete 9/05	Stage 1 Reviews sep05-Mar06	Stage 1 Reviews sep05-Mar06	Stage 2 Reviews nov05-Mar07	Stage2 and 3 Reviews Nov05-Mar07	planned Mar 07	All Stage 1 Reviews were completed by Mar-06.29 reviews are now complete with 13 moving on to stage 2

Social Work Services are committed to providing the best quality services which we can afford and we aim constantly to improve those services. However, as in all big organisations like ours, things sometimes go wrong. When we receive a complaint we aim to identify problems, solve it quickly and to prevent it from happening again.

People can make complaints by phoning or visiting our offices where a member of staff will try and sort things out straight away. Failing that, a complaint form can be completed (with assistance from a member of staff if required) or the complaint can be submitted by letter.

Social Work will make sure that: -

- The complaint is treated fairly and thoroughly investigated;
- The name of the officer handling the complaint is provided;
- A written acknowledgement within 5 working days is sent to the complainant. If possible, we will give a full reply at this stage;
- A response to the complaint will be made within 20 days. If the complaint is very complex or if we need to contact other organisations it may take longer, but we will let the person know.

If the complainant is still unsatisfied once they have received a final reply from the department they can contact: -

- The Chief Executive;
- Their local Councillor; or
- The Scottish Public Services Ombudsman

## **Quarterly and Annual Report on Complaints**

### 4<sup>th</sup> Quarter

During the period 1<sup>st</sup> January to 31<sup>st</sup> March 2006 three formal complaints were received by the department of these.

- One concerned Children's Services
- One concerned Community Care Services
- One concerned parking at Bruce Street premises in Clydebank

In two instances the complaint was found to be justified and in one instance the complaint was unsubstantiated

### Annual

During the period 1<sup>st</sup> April 2005 to 31 March 2006 30 formal complaints were received by the department of these:

- Eleven concerned child care
- Ten concerned community care
- Five concerned home care
- Three concerned Bruce Street parking
- One concerned welfare rights

Overall, three complaints were justified, four were part justified, nine were found to be unsubstantiated and eleven were unjustified. One complaint was unable to be investigated as the complainant had moved away, one complaint was withdrawn while the investigation was under way and in one the investigation is ongoing.