
Report to Audit and Scrutiny Committee

Date of Meeting: 12th June 2025

**Subject: HSCP – Clackmannanshire Locality Performance Report
2024/25 Q3 & Q4 (October to March)**

Report by: Head of Strategic Planning and Health Improvement

1.0 Purpose

- 1.1. The purpose of the report is to highlight the work and performance of the Clackmannanshire and Stirling Health and Social Care Partnership in relation to performance for the locality of Clackmannanshire.

2.0 Recommendations

- 2.1. That Committee notes the report, commenting and challenging as appropriate.

3.0 Considerations

- 3.1. Integration Joint Boards are responsible for effective monitoring and reporting on the delivery of Health & Social Care services, relevant targets and measures aligned to the themes in the [Strategic Plan 2023-2033](#).
- 3.2. The Scottish Government developed National Health and Wellbeing Outcomes to help Health and Social Care Partnerships better understand how well integrated services are meeting the individual outcomes of people as well as the wider community. Appendix 1 details the links between the Strategic Themes and the National Health and Wellbeing Outcomes.
- 3.3. Appendix 2 provides a Clackmannanshire quarterly overview for the period October 2024 – March 2025.

- 3.4. This report is developed with operational service leads to ensure the information provided is meaningful and supports ongoing service delivery and improvement. The HSCP Performance team will work with Service managers to identify any gaps/targets in information and align with the priorities in the 2023-2033 Strategic Plan for the Clackmannanshire and Stirling HSCP.
- 3.5. There are some challenges accessing data which continue to be worked through to provide fuller reporting in future.

4.0 Sustainability Implications

4.1. NA

5.0 Resource Implications

5.1. *Financial Details*

5.2. The full financial implications of the recommendations are set out in the report. This includes a reference to full life cycle costs where appropriate. Yes

5.3. Finance have been consulted and have agreed the financial implications as set out in the report. Yes

5.4. *Staffing*

6.0 Exempt Reports

6.1. Is this report exempt? Yes (please detail the reasons for exemption below) No

7.0 Declarations

The recommendations contained within this report support or implement our Corporate Priorities and Council Policies.

(1) **Our Priorities** (Please double click on the check box)

| | |
|--|-------------------------------------|
| Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all | <input type="checkbox"/> |
| Our families; children and young people will have the best possible start in life | <input checked="" type="checkbox"/> |
| Women and girls will be confident and aspirational, and achieve their full potential | <input checked="" type="checkbox"/> |
| Our communities will be resilient and empowered so that they can thrive and flourish | <input checked="" type="checkbox"/> |

(2) **Council Policies**

Complies with relevant Council Policies



8.0 Equalities Impact

8.1 Have you undertaken the required equalities impact assessment to ensure that no groups are adversely affected by the recommendations?

Yes No

9.0 Legality

9.1 It has been confirmed that in adopting the recommendations contained in this report, the Council is acting within its legal powers. Yes

10.0 Appendices

10.1 Appendix 1 - National Health & Wellbeing Outcomes mapped against our 2023-2033 Strategic Plan.

10.2 Appendix 2 - Clackmannanshire locality data 2024/25 Q3 & Q4 (October to March).

11.0 Background Papers

11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes (please list the documents below) No

Author(s)

| NAME | DESIGNATION | TEL NO / EXTENSION |
|-------------|-------------------------------|--------------------|
| Ann Farrell | Principal Information Analyst | |

Approved by

| NAME | DESIGNATION | SIGNATURE |
|------------------|-----------------------|-----------|
| Joanna MacDonald | Interim Chief Officer | |

Appendix 1 - National Health & Wellbeing Outcomes mapped against our 2023-2033 Strategic Plan.

All themes and priorities are linked to the Health and Wellbeing Outcomes. Each theme will demonstrate improvement for people and communities, how we are embedding a human rights based approach, consideration for equalities and evidencing improvement across the services we deliver.

Health and Wellbeing Outcomes

1. People are able to look after and improve their own health and wellbeing and live in good health for longer.
2. People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
3. People who use health and social care services have positive experiences of those services, and have their dignity respected.
4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
5. Health and social care services contribute to reducing health inequalities.
6. People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact on their caring role on their own health and wellbeing.
7. People who use health and social care services are safe from harm.
8. People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
9. Resources are used effectively and efficiently in the provision of health and social care services.

| | Prevention, early intervention & harm reduction | Independent living through choice and control | Care Closer to Home | Supporting empowered people & communities | Loneliness & isolation |
|----|---|---|---------------------|---|------------------------|
| 1. | ● | ● | ● | ● | ● |
| 2. | ● | ● | ● | ● | ● |
| 3. | ● | ● | ● | ● | |
| 4. | ● | ● | ● | ● | ● |
| 5. | ● | ● | ● | ● | ● |
| 6. | | ● | ● | | |
| 7. | ● | ● | ● | | |
| 8. | Enabling Activities | | | | |
| 9. | | | | | |

Appendix 2 Clackmannanshire locality data 2024/25 Q1 & Q2 (April to September).

ST1 Prevention, early intervention and harm reduction

Working with partners to improve overall health and wellbeing and preventing ill health. Promote positive health and wellbeing, prevention, early interventions and harm reduction. Promoting physical activity, reduce exposure to adverse behaviours. Right levels of support and advice at the right time, maintaining independence and improving access to services at times of crisis.



| PI Code | Description | Q1 2024/25 | | | Q2 2024/25 | | | Q3 2024/25 | | | Q4 2024/25 | | | 2024/25 | 2023/24 |
|--------------------|--|------------|--------|--------|----------------------------|--------|--------|----------------------------|--------|--------|----------------------------|--------|--------|----------------------------|---------|
| | | Value | Target | Status | Value | Target | Status | Value | Target | Status | Value | Target | Status | Value | Value |
| ADC MHO 001 | Number of Emergency Detention Certificates (Mental Health) Section 36 | 8 | | | 14 | | | 7 | | | 5 | | | 34 | 23 |
| ADC MHO 002 | Number of Short Term Detention Certificates (Mental Health) Section 44 | 15 | | | 15 | | | 16 | | | 14 | | | 60 | 45 |
| ADC MHO 007 | Total number of Existing Guardianships (private and local authority) | 168 | | | 172 | | | 176 | | | 190 | | | 190 | 158 |
| IJB.02.c lac_AS P1 | Number of Adult Support and Protection referrals to Clackmannanshire Adult Social Care | 174 | | | Not Available IT issues | |
| ADP.C GL.CLA CK.01 | Number of HSCLP residents attending Face to Face group sessions with Forth Valley Recovery Community | 963 | | | 679 | | | 609 | | | 632 | | | | |
| ADP.C GL.CLA CK.02 | Number of Clackmannanshire residents individual sessions with Forth Valley Recovery Community | 7 | | | 7 | | | 0 | | | <5 | | | | |
| ADP.CL ACK | Referral to Treatment Waiting Times for Clacks Substance Misuse Services (exc Prisons) against 3 Week HEAT Target. These data pertain to Experienced Waits where adjustments have been made to account for periods of unavailability | 100% | 90% | | 99% | 90% | | Not Available | | | Not Available | | | 100% | 89.9% |
| DD.09. CLACK | All Forth Valley Delayed Discharges (Code 9) for Clackmannanshire residents at census point. | 5 | | | 13 | | | 8 | | | 12 | | | 8.75 | 4.67 |

Appendix 2 Clackmannanshire locality data 2024/25 Q1 & Q2 (April to September).

| PI Code | Description | Q1 2024/25 | | | Q2 2024/25 | | | Q3 2024/25 | | | Q4 2024/25 | | | 2024/25 | 2023/24 |
|----------------------|--|------------|--------|--------|------------|--------|--------|------------|--------|--------|------------|--------|--------|--------------------------------|-------------------------------|
| | | Value | Target | Status | Value | Value |
| DD.100. CLACK | All Forth Valley Delayed Discharges (Code 100) for Clackmannanshire residents at census point. | 0 | | | 0 | | | 0 | | | 0 | | | 0 | 0 |
| DD.2W K.CLACK | All Forth Valley Delayed Discharges Over 2 Weeks for Clackmannanshire residents at census point. | 8 | 0 | | 8 | 0 | | 8 | 0 | | 3 | 0 | | 3 | 4.25 |
| DD.OB D.CLACK | Occupied Bed Days attributed to standard Delayed Discharges at census point end of QTR, for Clackmannanshire residents. | 384 | 0 | | 521 | 0 | | 527 | 0 | | 130 | 0 | | 130 | 304 |
| DD.ST. CLACK | All Forth Valley Standard Delayed Discharges (exc. Code 9 and Code 100) for Clackmannanshire residents at census point end of QTR. | 13 | | | 8 | | | 10 | | | 7 | | | 10.4 Average of months | 8 Average of months |
| DD.TO T.CLACK | Clackmannanshire Delayed Discharges - Total number of delays (inc Code 9 and Code 100) Census Point end of QTR | 18 | | | 21 | | | 18 | | | 19 | | | 19.167 Average of months | 12.67 Average of months |
| ADC.A DA.002 m | Number of Clackmannanshire clients entering bed based intermediate care from hospital. Reducing delayed discharges. | <5 | | | <5 | | | <5 | | | <5 | | | 7 | 4 |

Delayed Discharge

Standard Delays include 'health and social care reasons' which account for assessment delays, statutory funding, place availability or care arrangements, 'patient/carers/family related reasons', where there are disagreements (other than a medical appeal), legal issues or patients exercising right of choice.

Code 9 Delays where the timely discharge is out with the control of health and/or social care authorities.

Code 100 patients receiving appropriate care while they go through a complex and lengthy re-provisioning exercise, so their discharge is on-going rather than delayed. Full definitions for Delayed Discharge codes can be found here [Delayed Discharge Definitions and National Reporting Requirements Advice Note \(publichealthscotland.scot\)](https://publichealthscotland.scot)

ST2 Independent living through choice and control - Clackmannanshire - QUARTERS 2024-25

Supporting people and carers to actively participate in making informed decisions about how they will live their lives and meet their agreed outcomes. Helping people identify what is important to them to live full and positive lives, and make decisions that are right for them. Coproduction and design of services with people with lived experience who have the insight to shape services of the future.



| PI Code | Description | Q1 2024/25 | | | Q2 2024/25 | | | Q3 2024/25 | | | Q4 2024/25 | | | 2024/25 | 2023/24 |
|----------------|---|------------|--------|--------|------------|--------|--------|------------|--------|--------|------------|--------|--------|---------|---------|
| | | Value | Target | Status | Value | Value |
| ADC ADA 025 | Number of SDS Option 1 clients in Adult Social Work in Clackmannanshire | 18 | | | 16 | | | 48 | | | 37 | | | 37 | |
| ADC ADA 026 | Number of SDS Option 2 clients in Adult Social Work in Clackmannanshire | 9 | | | 8 | | | 9 | | | 9 | | | 9 | |
| ADC ADA 027 | Number of SDS Option 3 clients in Adult Social Work in Clackmannanshire | 2,331 | | | 2,421 | | | 2,538 | | | 2,623 | | | 2,623 | |
| ADC ADA 029 | Number of SDS Option 4 clients in Adult Social Work in Clackmannanshire | 52 | | | 57 | | | 58 | | | 55 | | | 55 | |

ST3 Achieving care closer to home

Shifting delivery of care and support from institutional, hospital-led services towards services that support people in the community and promote recovery and greater independence where possible. Investing in and working in partnership with people, their carers and communities to deliver services. Improving access to care, the way services and agencies work together, working efficiently, improving the customer journey, ensure people are not delayed in hospital unnecessarily, co-design of services, primary care transformation and care closer to home.



| PI Code | Description | Q1 2024/25 | | | Q2 2024/25 | | | Q3 2024/25 | | | Q4 2024/25 | | | 2024/25 | 2023/24 |
|-----------------|--|------------|--------|--------|------------|--------|--------|------------|--------|--------|------------|--------|--------|---------|---------|
| | | Value | Target | Status | Value | Value |
| ADC ADA 01mg | Total number of new clients in the month for local authority reablement service in Clackmannanshire. | 79 | | | 60 | | | 46 | | | 69 | | | 254 | 286 |
| ADC ADA 01md | Number of new local authority reablement clients in the month who have stepped up into the service from their own home. Clackmannanshire | 37 | | | 28 | | | 22 | | | 29 | | | 116 | 114 |

| PI Code | Description | Q1 2024/25 | | | Q2 2024/25 | | | Q3 2024/25 | | | Q4 2024/25 | | | 2024/25 | 2023/24 |
|--------------------|--|------------|--------|--------|------------|--------|--------|------------|--------|--------|------------|--------|--------|----------|----------|
| | | Value | Target | Status | Value | Value |
| ADC ADA 01me | Number of new local authority reablement clients in the month who have stepped down into the service from CCHC or FVRH. Clackmannanshire | 35 | | | 24 | | | 17 | | | 23 | | | 99 | 137 |
| ADC ADA 01mf | Number of new reablement clients in the month who have entered service from bed based intermediate care. Clackmannanshire | 7 | | | 8 | | | 7 | | | 17 | | | 39 | 35 |
| ADC ADA 01sc | Average length of wait (days) from community referral date to start of local authority reablement service. Clackmannanshire | 14 | 11 | | 23 | 11 | | 6 | 11 | | 15 | 11 | | 14.5 | 39.25 |
| ADC ADA 01sd | Length of wait (days) from hospital referral date to start of local authority reablement services. Clackmannanshire | 7 | 6 | | 4 | 6 | | 4 | 6 | | 4 | 6 | | 4.75 | 5.75 |
| ADC ADA 002q | Average wait in weeks for assessment to be completed in local authority reablement care. Clackmannanshire | 5 | 4 | | 5 | 4 | | 5 | 4 | | 5 | 4 | | 5 | 5 |
| ADC ADA 002c | Number of clients who went home from bed based intermediate care with a package of care. Clackmannanshire | 0 | | | 0 | | | <5 | | | 5 | | | 6 | 8 |
| ADC ADA 002d | Number of clients who went home from bed based intermediate care with no package of care. Clackmannanshire | 0 | | | <5 | | | 0 | | | 0 | | | <5 | 0 |
| ADC ADA 002r | Average length of wait at end of local authority reablement care in Clackmannanshire for a Framework Provider (weeks). | <5 | 3 | | <5 | 3 | | <5 | 3 | | <5 | 3 | | <5 | 4 |
| ADC ADA 002w | Average total length of stay in local authority reablement for those clients transferring to a care provider. (Average stay for those who are independent is less). Clackmannanshire | 8 | 9 | | 7 | 9 | | 9 | 9 | | 9 | 9 | | 8 | 9 |
| ADC ADA 01m | Number of hours care at start of local authority reablement for all clients receiving a service in Clackmannanshire - shows demand on service. | 948.5 | | | 675.25 | | | 500.5 | | | 708 | | | 2,832.25 | 2,796.75 |
| ADC ADA 01n | Number of hours care post local authority reablement (after 6 weeks) in Clackmannanshire | 703.0 | | | 595.5 | | | 413 | | | 442 | | | 2153.5 | 2415.4 |
| ADC ADA 01mc | % of local authority reablement double up staff clients who completed the service. Clackmannanshire | 17.93% | 10% | | 17.09% | 10% | | 13.79% | 10% | | 12.5% | 10% | | 15.51% | 9.79% |
| ADC ADA 01pb | % of clients with increased care hours at end of local authority reablement services. Clackmannanshire | 6.5% | 10% | | 17.3% | 10% | | 27% | 10% | | 15.1% | 10% | | 15.2% | 19.8% |

| PI Code | Description | Q1 2024/25 | | | Q2 2024/25 | | | Q3 2024/25 | | | Q4 2024/25 | | | 2024/25 | 2023/24 |
|--------------|--|------------|--------|--------|------------|--------|--------|------------|--------|--------|------------|--------|--------|---------|---------|
| | | Value | Target | Status | Value | Value |
| ADC ADA 01p | % of clients with reduced care hours at the end of local authority reablement period in Clackmannanshire | 29% | 2% | | 20% | 2% | | 32% | 2% | | 36% | 2% | | 28% | 28% |
| ADC ADA 01q | % of clients receiving no care after local authority reablement in Clackmannanshire | 24% | 30% | | 31% | 30% | | 14% | 30% | | 22% | 30% | | 25% | 25% |
| ADC ADA 002a | Total number of intermediate beds occupied by clients in period. Clackmannanshire | 6 | | | 7 | | | 3 | | | 12 | | | TBC | 25 |
| ADC ADA 002L | Number of Clackmannanshire clients entering bed based intermediate care from community (home) preventing admission to hospital | <5 | | | <5 | | | 0 | | | <5 | | | 7 | 14 |
| ADC ADA 002b | Number of Clackmannanshire clients who moved from bed based intermediate to care home long term care | <5 | | | <5 | | | <5 | | | <5 | | | <5 | 8 |
| ADC ADA 002f | Average length of stay (weeks) for service users who were discharged in period who had used bed based intermediate care in Adult Social Care Clackmannanshire. | 3.66 | 8 | | 2.5 | 8 | | 10 | | | 7 | | | 5.79 | 5.5 |
| ADC ADA 002N | Number of clients who moved from intermediate care to hospital. Clackmannanshire | <5 | | | <5 | | | <5 | | | 0 | | | <5 | 2 |
| ADC ADA 021 | % annual reviews completed within timescale in Adult Care Clacks Social Services | 26.1% | 100.0% | | 32.3% | 100.0% | | 32.7% | 100% | | TBC | | | TBC | 14.8% |
| ADC ADA 035 | Number of completed social care assessments in period. | 653 | 672 | | 548 | 672 | | 573 | 672 | | TBC | | | TBC | 2,191 |

ST4 Supporting empowered people and communities

Working with communities to support and empower people to continue to live healthy, meaningful and satisfying lives as active members of their community. Being innovative and creative in how care and support is provided. Support for unpaid carers; helping people live in their local communities, access to local support, dealing with isolation and loneliness. Planning community supports with third sector, independent sector and housing providers. Neighbourhood care, unpaid carers, third sector supports.



| PI Code | Description | Q1 2024/25 | | | Q2 2024/25 | | | Q3 2024/25 | | | Q4 2024/25 | | | 2024/25 | 2023/24 |
|--------------|--|------------|--------|--------|------------|--------|--------|------------|--------|--------|------------|--------|--------|---------|---------|
| | | Value | Target | Status | Value | Value |
| ADC ADA 011B | Number of Adult Support Plans for carers offered in Clackmannanshire locality HSCP | 88 | | | 38 | | | 44 | | | TBC | | | TBC | 364 |
| ADC ADA 011C | Number of Adult Support Plans for carers accepted in Clackmannanshire locality. | 32 | | | 12 | | | 16 | | | TBC | | | TBC | 111 |
| ADC ADA 011D | Number of eligible Adult Support plans for carers completed. | 6 | | | <5 | | | <5 | | | TBC | | | TBC | 19 |
| ADC ADA 011 | % of Adult Support Plans for carers completed in Adult Social Care | 18.8% | 39% | | 33.3% | 39% | | 18.8% | 39% | | TBC | 39% | | TBC | 17.1% |

Inspection of Services

Registered services owned by the Partnership are inspected annually by the Care Inspectorate. There were 3 registered service inspections during October to April 2024/2025.

| | | | |
|--|----------------------------------|---|---|
| Ludgate House Resource Centre Care Home Service, | unannounced inspection | Completed on 8 th January 2025 | Findings: How well do we support people's wellbeing? 3 - Adequate How good is our staff team? 4 - Good Requirement 1. By 14 March 2025, the provider must ensure that people are supported with all aspects of their care. This should include, (but is not limited to) skin integrity and nutrition. Areas for improvement 1. The service should ensure that staffing is arranged, so that the right people with the right skills are in place at the right time, to have the greatest impact on providing safe and high-quality services that result in the best outcomes for people. |
| Ludgate House Resource Centre Care Home Service, | unannounced follow up inspection | Completed on 18 th March 2025 | Requirement 1. By 14 March 2025, the provider must ensure that people are supported with all aspects of their care. This should include, (but is not limited to) skin integrity and nutrition. - Not met - extension agreed to 16th May 2025. Areas for improvement 1. The service should ensure that staffing is arranged, so that the right people with the right skills are in place at the right time, to have the greatest impact on providing safe and high-quality services that result in the best outcomes for people. The dependency tool had been updated to reflect care hours and better calculate staffing needs. The service had a cohort of relief staff who had been refreshed in training and were now utilised to support the service when needed. The service had completed their actions to meet this area for improvement |
| Menstrie House Care Home Service, | unannounced inspection | Completed on 2 nd October 2024 | Findings: How well do we support people's wellbeing? 5 - Very Good & How good is our staff team? 5 - Very Good |

Additional information and full details on any inspections can be found at the [Care Inspectorate](#) website. Since 1 April 2018, the new [Health and Social Care Standards](#) have been used across Scotland. In response to these new standards, the Care Inspectorate introduced a [new framework for inspections](#) of care homes for older people. Where we have areas for improvement we are required to publish our action plans.