
Report to: Audit and Scrutiny Committee

Date of Meeting: 5th February 2026

**Subject: HSCP – Clackmannanshire Locality Performance Report
2025/26 Q3 (1st October to 31st December 2025)**

Report by: Head of Strategic Planning and Health Improvement

1.0 Purpose

- 1.1. 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. Note this paper and the continuing work being undertaken across Clackmannanshire.
- 2.2. Note the performance of Clackmannanshire Locality within the Clackmannanshire and Stirling HSCP.

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 1st October to 31st December 2025.
- 3.4. This report has been 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. N/A

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

Clackmannanshire will be attractive to businesses & people and ensure fair opportunities for all

Our families; children and young people will have the best possible start in life

Women and girls will be confident and aspirational, and achieve their full potential

Our communities will be resilient and empowered so that they can thrive and flourish

(2) Council Policies

Complies with relevant Council Policies

8.0 Impact Assessments

8.1 Have you attached the combined equalities impact assessment to ensure compliance with the public sector equality duty and fairer Scotland duty? (All EFSIAs also require to be published on the Council's website)

Yes

8.2 If an impact assessment has not been undertaken you should explain why:

This paper is for noting only and does not require an Equality Impact Assessment as it does not propose any changes to policy, practice, or service delivery.

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 Please list any appendices attached to this report. If there are no appendices, please state "none".

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

10.2 Appendix 2 - Clackmannanshire locality data 2025/26 Q3 (October to December).

11.0 Background Papers

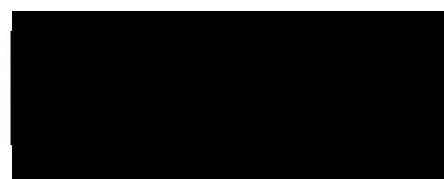
11.1 Have you used other documents to compile your report? (All documents must be kept available by the author for public inspection for four years from the date of meeting at which the report is considered)

Yes (please list the documents below) No

Author(s)

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Ann Farrell	Principal Information Analyst	07385429757

Approved by

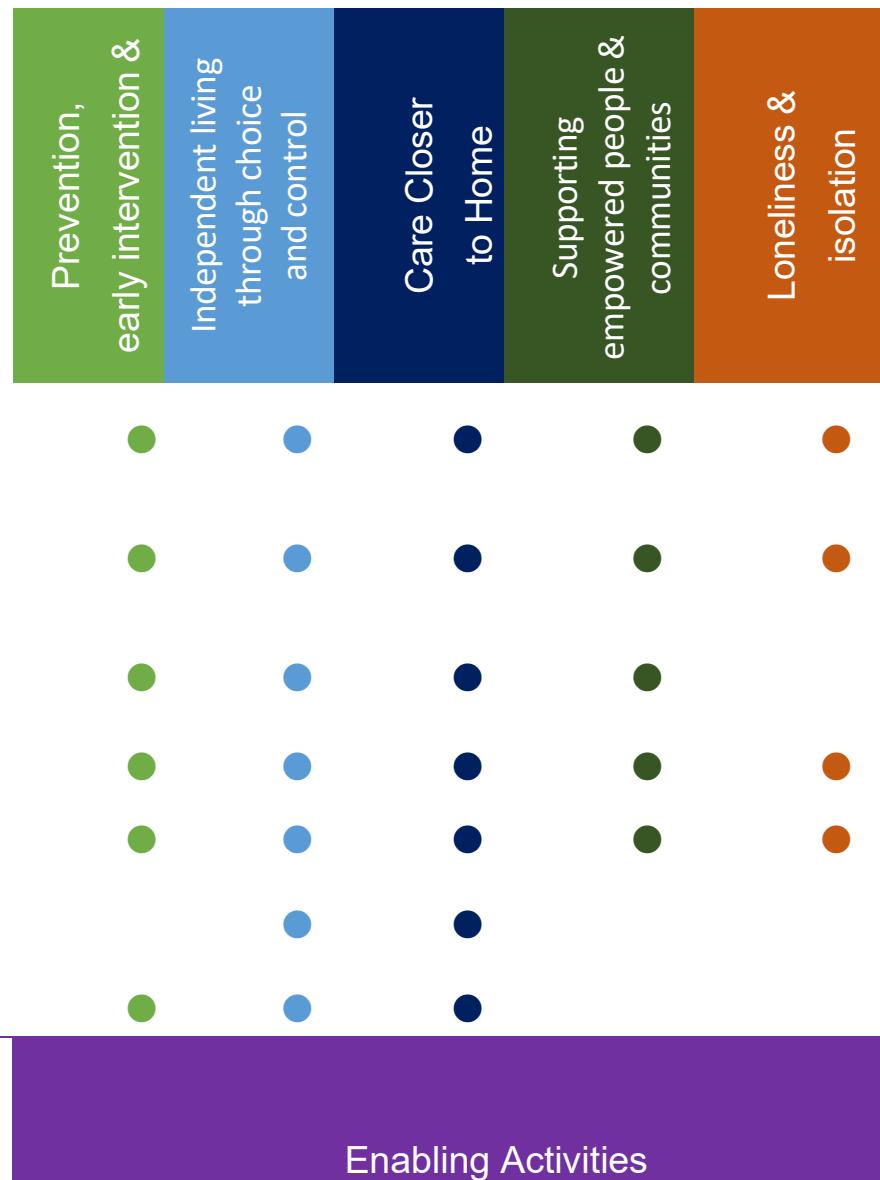
NAME	DESIGNATION	SIGNATURE
Wendy Forrest	Head of Strategic Planning & Health Improvement	

National Health & Wellbeing Outcomes

All themes and priorities of the Strategic Commissioning Plan are linked to the National 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.



Appendix 2 Clackmannanshire locality data 2025/26 Q3

ST1 Prevention, early intervention and harm reduction - Clackmannanshire - QUARTER 3 2025-26

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.

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PI Code	Description	Q1 2025/26			Q2 2025/26			Q3 2025/26			2025/26	2024/25	Latest Note
		Value	Target	Status	Value	Target	Status	Value	Target	Status	Value	Value	
ADC MHO 001	Number of Emergency Detention Certificates (Mental Health) Section 36 (Clackmannanshire)	19			5			8				34	Data may not be up to date for latest quarter due to reporting timescales
ADC MHO 002	Number of Short Term Detention Certificates (Mental Health) Section 44 (Clackmannanshire)	25			18			18				60	Data may not be up to date for latest quarter due to reporting timescales
ADC MHO 007	Number of Existing Private and local authority Guardianships (Clackmannanshire)	199			219			233				190	Data may not be up to date for latest quarter due to reporting timescales
ADC MHO 008	Number of existing Local Authority Guardianships (Clackmannanshire)	45			52			60				44	Data may not be up to date for latest quarter due to reporting timescales
ADC MHO 025	Total number of new Private & Local Authority Guardianship Orders (Clackmannanshire)	16			21			10				53	Data may not be up to date for latest quarter due to reporting timescales
IJB.02.c lac_AS P1	Number of Adult Support and Protection referrals to Clackmannanshire Adult Social Care	231			267			222				849	
ADP.C GL.CLA CK.01	No of residents attending Face to Face group sessions with Forth Valley Recovery Community (Clackmannanshire)	566			523			Data not yet available for this quarter			1,089	2,883	
ADP.C GL.CLA CK.02	Number of Clackmannanshire residents attending individual sessions with Forth Valley Recovery Community	0			3			Data not yet available for this quarter			3	16	

Appendix 2 Clackmannanshire locality data 2025/26 Q3

ADP.CLACK	Referral to Treatment Waiting Times for Clackmannanshire Substance Misuse Services (excl 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%		100%	90%		100%			100%	98.7%	
DD.09.CLACK	All Forth Valley Delayed Discharges (Code 9) for Clackmannanshire residents at census point.	9			13			13				10.25	8.75
DD.100.CLACK	All Forth Valley Delayed Discharges (Code 100) for Clackmannanshire residents at census point.	0			0			0				0	0
DD.2W.K.CLACK	All Forth Valley Delayed Discharges Over 2 Weeks for Clackmannanshire residents at census point.	6			6			6				5.88	7.17
DD.OB.D.CLACK	Occupied Bed Days attributed to standard Delayed Discharges at census point, for Clackmannanshire residents.	193			247			284				293.25	432.08
DD.ST.CLACK	All Forth Valley Standard Delayed Discharges (excl Code 9 and Code 100) for Clackmannanshire residents at census point.	8			14			10				10	10.42
DD.TOT.CLACK	Clackmannanshire Delayed Discharges - Total number of delays (inc Code 9 and Code 100) Census Point	17			27			23				20.25	19.17

Appendix 2 Clackmannanshire locality data 2025/26 Q3

ST2 Independent living through choice and control - Clackmannanshire - QUARTERS 2025-26

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.

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PI Code	Description	Q1 2025/26			Q2 2025/26			Q3 2025/26			2025/26	2024/25	Latest Note
		Value	Target	Status	Value	Target	Status	Value	Target	Status	Value	Value	
ADC ADA 011B	Number of Adult Support Plans for carers offered in Clackmannanshire locality HSCP	80			70			63				210	
ADC ADA 011C	Number of Adult Support Plans for carers accepted in Clackmannanshire locality.	30			31			25				81	
ADC ADA 011D	Number of eligible Adult Support plans for carers completed.	2			3			3				13	
ADC ADA 011	% of Adult Support Plans for carers completed in Adult Social Care	6.7%	39.0%		9.7%	39.0%		12.0%	39.0%			16.0%	
ADC ADA 025	Quarterly snapshot number of SDS Option 1 clients in Adult Social Work in Clackmannanshire	20			18			18			56	70	
ADC ADA 026	Quarterly snapshot number of SDS Option 2 clients in Adult Social Work in Clackmannanshire	7			6			5			18	35	
ADC ADA 027	Quarterly snapshot number of SDS Option 3 clients in Adult Social Work in Clackmannanshire	2,331			2,488			2,587			7,406	9,913	
ADC ADA 029	Quarterly snapshot number of SDS Option 4 clients in Adult Social Work in Clackmannanshire	52			51			47			150	222	

Appendix 2 Clackmannanshire locality data 2025/26 Q3

ST3 Achieving care closer to home - Clackmannanshire - QUARTER 3 2025-26

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.

Generated on: 08 January 2026



PI Code	Description	Q1 2025/26			Q2 2025/26			Q3 2025/26			2025/26	2024/25	Latest Note
		Value	Target	Status	Value	Target	Status	Value	Target	Status	Value	Value	
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	12			34			40				116	
ADC ADA 01sc	Average length of wait (days) from community referral date to start of local authority reablement service. Clackmannanshire	12	11		16	11		9	11			14.5	
ADC ADA 01p	% of clients with reduced care hours at the end of local authority reablement period in Clackmannanshire	31%	2%		30%	2%		30%	2%		30%	31%	
ADC ADA 01mc	% of local authority reablement double up staff clients who completed the service. Requires 2 members of staff to help client - impacts on capacity to pick up new cases. Clackmannanshire	17.27%	10%		15.83%	10%		10.53%	10%			15.51%	
ADC ADA 01pb	% of clients with increased care hours at end of local authority reablement services. Clackmannanshire	9.8%	10.0%		10.0%	10.0%		18.0%	10.0%		12.6%	15.2%	Dec 25: 1 client for support with laundry 3 x weekly; 1 client due to fluctuating of blood sugars
ADC ADA 01q	% of clients receiving no care after local authority reablement in Clackmannanshire	36%	30%		28%	30%		18%	30%		27%	25%	
ADC ADA 01sd	Length of wait (days) from hospital referral date to start of local authority reablement services. Clackmannanshire	5	6		7	6		4	6			4.75	

Appendix 2 Clackmannshire locality data 2025/26 Q3

PI Code	Description	Q1 2025/26			Q2 2025/26			Q3 2025/26			2025/26	2024/25	Latest Note
		Value	Target	Status	Value	Target	Status	Value	Target	Status	Value	Value	
ADC ADA 002q	Average wait in weeks for assessment to be completed in local authority reablement care. Clackmannshire	5	4		7	4		5	4			5	
ADC ADA 01me	Number of new local authority reablement clients in the month who have stepped down into the service from CCHC or FVRH. Clackmannshire	10			35			34				99	
ADC ADA 01mf	Number of new reablement clients in the month who entered service from bed based intermediate care. Clackmannshire	3			6			8				39	
ADC ADA 01mg	Total number of new clients in the month for local authority reablement service in Clackmannshire.	25			75			82				254	
ADC ADA 01m	Number of hours care at start of local authority reablement for all clients receiving a service in Clackmannshire - shows demand on service.	796.75			782.75			858.75				2,832.25	
ADC ADA 01n	Number of hours care post local authority reablement (after 6 weeks) in Clackmannshire	546.0			645.0			695.8				2153.5	Dec 25: 135.25 hours completed, 98 hours not completed
ADC ADA 01s	% clients enabled through reablement service (completed outcomes 1-4) Clackmannshire	43.88%			43.17%			40.13%				42.33%	42.77%
ADC ADA 002c	Number of clients who went home from bed based intermediate care with a package of care. Clackmannshire	0			1			0				6	
ADC ADA 002d	Number of clients who went home from bed based intermediate care with no package of care. Clackmannshire	0			0			0				2	
ADC ADA 002a	Total number of intermediate beds occupied by clients in period. Clackmannshire	0			2			5				28	Dec 25:- Admissions: admitted and discharged in Q3. Discharges: 2 admitted in Q2 and discharged in Q3. Ongoing: 0 admitted in Q2 and still ongoing; 2

Appendix 2 Clackmannanshire locality data 2025/26 Q3

PI Code	Description	Q1 2025/26			Q2 2025/26			Q3 2025/26			2025/26	2024/25	Latest Note
		Value	Target	Status	Value	Target	Status	Value	Target	Status	Value	Value	
													admitted in Q3 and still ongoing
ADC ADA 002b	Number of Clackmannanshire clients who moved from bed based intermediate to care home long term care	2			1			2				8	
ADC ADA 002L	Number of Clackmannanshire clients entering bed based intermediate care from community (home) preventing admission to hospital	1			0			1				7	
ADC ADA 002M	Number of Clackmannanshire clients entering bed based intermediate care from hospital. Reducing delayed discharges.	0			1			0				7	
ADC ADA 021	% annual reviews completed within timescale in Adult Care Clacks Social Services	39.2%	100.0%		25.9%	100.0%		27.9%	100.0%			29.2%	
ADC ADA 035	Number of completed social care assessments in period.	712	672		719	672		686	672			2,391	
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 Clackmannshire.	7	8		6	8		9	8			5.29	
ADC ADA 002r	Average length of wait at end of local authority reablement care in Clackmannanshire for a Framework Provider (weeks).	1	3		2	3		3	3			3	
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	6	9		8	9		5	9			8	
ADC ADA 002N	Number of clients who moved from intermediate care to hospital. Clackmannanshire	1			0			0				3	

Appendix 2 Clackmannanshire locality data 2025/26 Q3

ST4 Supporting empowered people and communities - Clackmannanshire - QUARTER 3 2025-26

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 2025/26		Q2 2025/26		Q3 2025/26		2025/26			2024/25	2024/25	Latest Note
		Value	Status	Value	Status	Value	Status	Value	Target	Status	Value	Value	
ADC ADA 011B	Number of Adult Support Plans for carers offered in Clackmannanshire locality HSCP	80		70		63					210	210	
ADC ADA 011C	Number of Adult Support Plans for carers accepted in Clackmannanshire locality.	30		31		25					81	81	
ADC ADA 011D	Number of eligible Adult Support plans for carers completed.	2		3		3					13	13	
ADC ADA 011	% of Adult Support Plans for carers completed in Adult Social Care	6.7%		9.7%		12.0%					16.0%	16.0%	

Inspection of Services

Registered services owned by the Partnership are inspected annually by the Care Inspectorate. There was 1 registered service inspection during October to December 2025. 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](#).

Whins/Centre Space Support Service, Unannounced inspection, Completed on 3rd October 2025

Key messages:

The service had developed quality assurance processes and had begun to audit many aspects of the service which had led improved outcomes for some people. People could be confident in the staff supporting them because staff had received formal training, improving their skills and knowledge and had increased support in their day to day work to embed their training in practice. Peoples' support plans and daily activities had been identified and now needed further development to better reflect how the service might support people to meet their aspirations and wishes.

There were two requirements made on 6th June 2025. These were met within the timescales set by the inspection.

There was one Area for Improvement made on 30th January 2025.

To ensure that people get the most out of their support, the service should make arrangements to link peoples activities and planners to their identified outcomes so that people have an opportunity to fulfil any wishes and aspirations. This ensures care and support is consistent with the Health and Social Care Standards, which state: "I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors." (HSCS 1.25)

Action taken since then

We reviewed this area for improvement during our inspection. We could see some progress had been made and everyone had an individualised plan. The plans were personalised and gave a good sense of each person. However we saw limited links between peoples desired outcomes and how they spent their day at Whins. Some risk assessments were not specific or required and therefore not personalised to individual risk. When staff were recording information about peoples days, there was often a focus on what people can't do rather than strengths and a positive approach. Most people were due a review of their support and the service is planning to further develop personal plans at each individual review. We will follow up on this area for improvement at our next inspection.