

## **Foreword**

The South Ayrshire Health and Social Care Partnership (SAHSCP) published its 10 year strategic plan in 2021.

Within the plan there are 7 strategic objectives (SO);

- We focus on prevention and tackling inequality (SO1)
- We nurture and are part of communities that look out for each other (SO2)
- We work together to give you the right care in the right place (SO3)
- We help build communities where people are safe (SO4)
- We are an ambitious and effective partnership (SO5)
- We are transparent and listen to you (SO6)
- We make a positive impact beyond the services we deliver (SO7)

Crucial to delivery of the strategic plan are the values of empowerment, compassion, openness and respect, with a clear commitment to co-production and co-design reflected within the South Ayrshire Wellbeing Pledge.



Image 1 Wellbeing Pledge

Locality planning is a key vehicle for ensuring that the voice of local communities shape wellbeing, service and support across South Ayrshire, in line with population data, national and local policy context and professional advice. Adult and Older People's Services within SAHSCP committed to a Locality approach to working in 2023, building on the work of local teams responsible for Adult Social Work and Adult Community Nursing. Six Localities were identified, with a Senior Manager from the Partnership each overseeing two Localities. In terms of Ayr South and surrounding villages, this falls in to what SAHSCP refers to as the Central Locality, with the Ayr North Locality also part of this structure.

Locality Planning is a requirement of the Joint Bodies Act which underpins integration of health and social care, and an essential mechanism to this is the formation, maturation and delivery of the Locality Planning Partnership (LPP) within the Ayr South locality.

The Ayr South Locality covers the communities south of the town centre of Ayr, including Forehill, Masonhill, Belmont, Kincaidston, Alloway and Doonfoot. It also incorporates the

outlying villages of Annbank, Mossblown, Tarbolton and Coylton. The map below shows the boundary of this locality:

INSERT MAP OF AYR SOUTH LOCALITY

### **Ayr South Locality Profile**

Population data profiles are a key source that help to determine the focus of activity required to improve health and wellbeing outcomes within local areas. A full profile for Ayr South Locality is available, but for the purposes of this plan, some key areas of note are highlighted below.

**\*Areas highlighted in yellow below – awaiting data from Public Health Scotland**

- A total population of **35,442** people, where **47.5%** were male, and **27.3%** were aged over 65.
- **28.8%** of people lived in the least deprived SIMD quintile, and **3.1%** lived in the most deprived quintile.
- An average life expectancy of **XXX** years for males and **XXX** years for females, compared to the Scottish average of **XXX** and **XXX** years respectively.
- A death rate for ages 15 to 44 of **80.9 deaths per 100,000** age-sex standardised population (**117 deaths per 100,000** for Scotland).
- **27.5%** of the locality's population with at least one long-term physical health condition. This is higher than Scotland (**22%**).
- A cancer registration rate of **592 registrations per 100,000** age-sex standardised population (compared to **630** in Scotland).
- **XXX** of the population being prescribed medication for anxiety, depression, or psychosis. This is a larger proportion than Scotland (**XXX**).
- **12,107** emergency hospital admissions per 100,000 population, compared to **10,367** in Scotland.
- **106,100** unscheduled acute specialty bed days per 100,000 population, compared to **77,799** in Scotland.
- **XXX** delayed discharge bed days per 100,000 population aged over 65, compared to **XXX** in Scotland.
- **2,150** emergency hospital admissions from falls per 100,000 population aged over 65, compared to **2,283** in Scotland.
- **91.6** emergency readmissions (28 day) per 1,000 discharges, compared to **102** in Scotland.
- **1,944** potentially preventable hospital admissions per 100,000 population, compared to **1,638** in Scotland.

- **458** alcohol-related hospital admissions per 100,000 age-sex standardised population. This is lower than Scotland (**611** admissions per 100,000).
- **8.3** alcohol-specific deaths per 100,000 age-sex standardised population. This is lower than Scotland (**21.1** deaths per 100,000).
- **180** drug-related hospital admissions per 100,000 age-sex standardised population. This is higher than Scotland (**228** admissions per 100,000).

## Locality Priorities

In support of the newly created Locality working approach of the HSCP, developing a Team Around the Locality model, a communication and engagement plan was developed, in a bid to work with our local communities to identify local priorities. This has been progressed within Ayr South and villages.

Using a variety of platforms, including social media, distribution points and the substantial circulation list of the LPP, information seeking views from the community were sought. Engagement at the LPP allowed the data profile of the local community to be shared, with support from colleagues locally within NHS Ayrshire and Arran's Public Health Department, and also national support from analysts from within Public Health Scotland. This was further enhanced by local data sources from service providers.

Workshops within the LPP setting allowed members to consider the data profiles and whether they felt they reflected the locality or neighbourhood they lived in, whether there were gaps in data that would help inform the process, and consideration to emerging priorities.

Engagement with local community groups explored how community members felt about current services within the HSCP, and how services might be delivered differently in future, and gave the opportunity to further consider priorities.

Through this approach to communication and engagement with stakeholders, consideration to the evidence base and extensive analysis of population data, Ayr South identified 3 priority areas;

- **Promoting Good Mental Health and Wellbeing**
- **Community Connectedness**
- **Supporting our aging communities**

Ayr South Locality Planning Partnership has been active for a number of years, and enjoyed support from community members and professional colleagues. Since the review of Localities which was finalised in the summer of 2023, there has not been the same level of support to the LPP. A host of engagement opportunities have been undertaken, with valuable feedback from our community members regarding how they would like to see health and social care services delivered in their local area. Despite this, there has been very little interest from the local community to participate in the LPP. This has limited the amount of support to the development of this Locality Plan. By adopting a 1 year bridging locality plan, that reflects the key priority areas agreed above, an ambition of the LPP will be to encourage our community members to join the group,

alongside the professional staff we hope will become part of the Partnership in line with the newly agreed Terms of Reference. The plan represents a clear evidence base, aligned to population data, national and local drivers, professional advice and lived experience, and articulates the aspirations of the Ayr South Locality.

The plan adopts a strength based and compassionate approach, recognising the importance of partnership working, the dedication and professionalism of the workforce, and the resilience and civility across the locality.

### **Community Planning**

On setting key strategic themes, South Ayrshire Community Planning Partnership's Local Outcome Improvement Plan affirms the interdependency on place and wellbeing. By adopting a truly whole system and whole family approach beyond the services directly delivered by the SAHSCP, the locality plan will ensure priorities and actions identified are intrinsically linked to the following priority areas;

- Children's Services Planning
- Community Safety
- Financial Inclusion and Growth
- Population Health
- Sustainability

Essential to this will be the membership and delivery of the LPP, ensuring that there is representation linked to key priority areas.

The ambition is that the Ayr South LPP will consist of a range of stakeholders working collaboratively across the locality; representation from local community services, community councils, HSCP, Community Planning Partners, Third sector and Independent sector.

Aligned to the LPP are clear terms of reference to ensure the communities voice is heard, and that all stakeholders are working together to plan for, resource and provide services, support and care in the local area, with a focus on tackling inequalities.

It is envisaged through whole system partnership working, co-production and co-design, this locality plan will articulate actions relevant to locality priorities with a clear, authentic and transformational approach aligned to quality planning, improvement and assurance.

Clear governance and reporting arrangements with regards to locality planning, health and care and community planning will enable recognition of progress to date, and a focus on the learning and improvements required.

For 2023-2024 the locality plan will move towards a place based approach thus ensuring clear synergy and alignment to place and wellbeing.

In addition, there will be synergy with the Community Learning and Develop (CLD) Plan. In South Ayrshire, Community Learning and Development (CLD) provision is coordinated by the CLD Partnership. The CLD Partnership has the strategic responsibility for developing a CLD Plan every three years, this plan sets out the

strategic priorities and at a local level this is coordinated by the CLD Learning Community Partnerships.

Although CLD is led by officers from Thriving Communities the partnership includes representation from Health and Social Care Partnership, Skills Development Scotland, DWP, Voluntary Action South Ayrshire, Ayrshire College and Community Planning Partnership. The current plan has five main priorities these include:

- Youth Work – Improving outcomes for young people.
- Mental Health and Wellbeing – Building healthier communities.
- Employability and Volunteering – Supporting communities to progress.
- Adult and Family Learning – Improving outcomes for adults and families.
- Community engagement and empowerment – supporting our communities to thrive.

This synergy will create opportunities to maximise resources, align local needs and priorities and co design services with communities. This is further enhanced by locality teams working together within communities.

The CLD Plan 2021 – 2024 will be refreshed in September 2024 following consultation with learners, communities, partners and the CLD workforce.

A copy of the Community Planning Partnership structure, which depicts where the Locality Planning Partnerships fit within the strategic landscape, is show below.

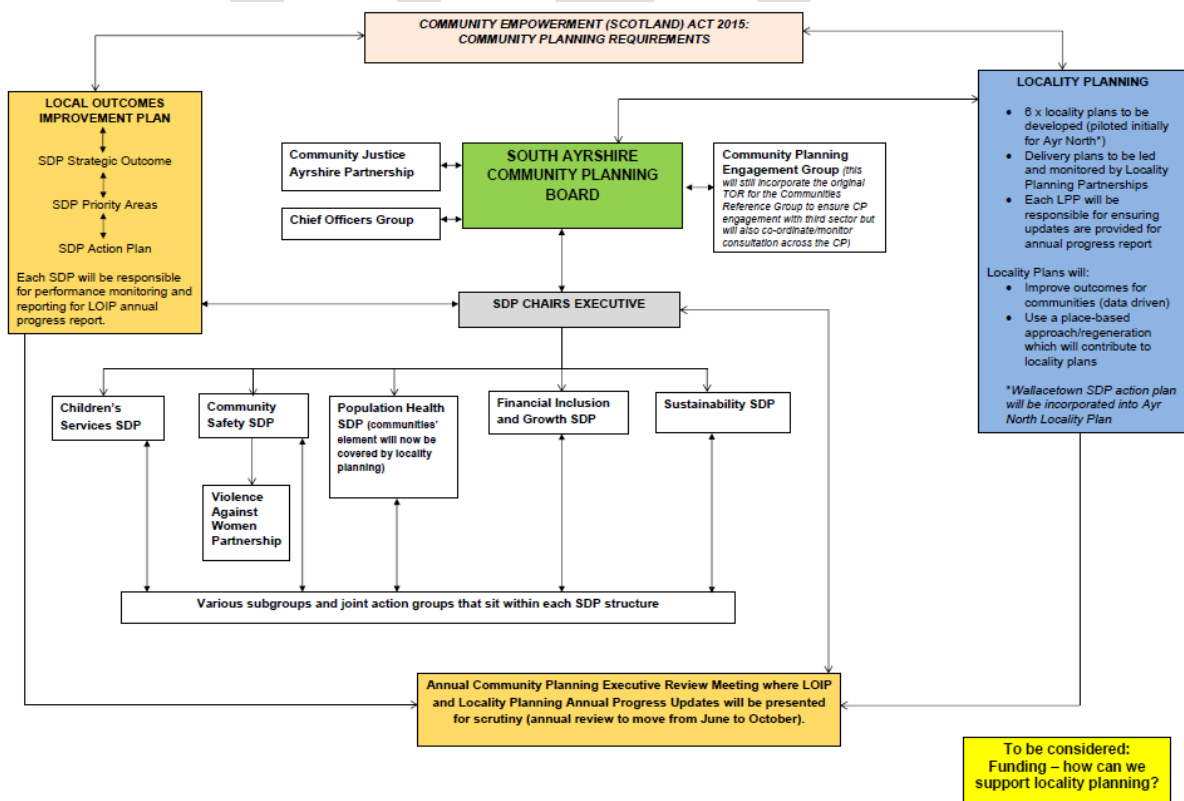


Image 2 – Community Planning Partnership Structure

### **Participatory Budgeting**

Over a number of years, Ayr South Locality communities have benefitted from successful bids to Participatory Budgeting (PB) – a process where local communities decide how to spend part of the public budget. In the year 2023-24, resource constraints within the HSCP led to a decision to not progress with previously held PB events to support this process, but instead for the PB sub group of the LPP to consider the applications to the fund on a small grants basis. This was possible due to the number of applications to Ayr South, and the overall cost of those bids being able to be met in their totality. Moving forward, the ambition of the Ayr South LPP, in a bid to promote community empowerment, will embrace PB events where appropriate, as an opportunity for locality citizens and groups to access funds. The expectation will be that participatory budgeting will be linked clearly to the locality priorities and there will be regular communication and networking events to raise awareness of local groups/initiatives and how these can be accessed.

This approach will foster an asset based community approach, build on the resilience already evident in the locality and sit alongside the principles of community led support.

### **Opportunities**

There are a number of opportunities where synergy with implementation and delivery of the locality plan is integral.

The following will align with the bridging plan and future iterations, and discussion and planning will be mirrored within the HSCP Driving Change Programme;

Caring for Ayrshire - enabling people to access high quality primary and community care closer to home

Ageing Well Strategy – recognising the older population within the locality, and the value they bring to communities and families, embedding actions that will support older adults to live as independently as possible

Mental Health and Dementia Strategies – refreshing local strategy in line with national strategic direction, and ensuring linkage with locality plans and priorities

Digital Strategy – linking locality planning and care delivery towards a future where technology and data are seamlessly integrated into operations, service delivery, and decision-making processes, and empowering individuals to feel more empowered to ownership and control of their care, wellbeing and independence.

Alcohol and Drug Partnership (ADP) – building on the strong partnership working across the ADP and working together to ensure citizens affected by alcohol and/or drugs receive the support which meets their needs, when they need it.

Focus on Frailty Programme – partnership working to improve the experience of and access to person centred coordinated care for adults living with frailty or at risk of frailty

Care at Home Strategy – linking existing and new models of care to commissioning arrangements, recognising the relevance of locality demographics across Ayr South and Villages.

Adult and Young Carer Strategies – ensuring that carers are recognised, valued and supported.

As part of driving change and locality planning, and to ensure a quality management approach, there will be an emphasis on quality improvement and management with respect to planning, improvement and assurance. To support this approach the workforce have access to electronic and participatory training to aid learning and utilisation.

### **Building on the strengths**

It is vital to recognise, celebrate and build on the strengths across the locality, whilst maintaining humility around learning and continuous improvements.

Below is a summary of strengths across the locality that will aid progress and realisation of the locality plan;

- A wellbeing pledge with emphasis on co-production and co-design
- A continued focus on delivery of services in line with statutory requirements
- Training and development of staff in line with the principles of Community Led Support
- Provision of Community Health Workers and Link Practitioners across GP practices
- Collaboration with key services supporting communities in Ayr South, including Thriving Communities with good examples of work progressing in, for example, the Kincaidston area
- Learning from the Shaping Places for Wellbeing work that has been focussed across all of Ayr as a town, but has highlighted activity and opportunities for Whole System working that will benefit the Ayr South Locality
- Community assets placed throughout the locality
- Resilient communities evidenced through appetite to engage in participatory budgeting and community development opportunities
- Positive third sector interface
- In the past year many health and care services such as Day Care, Care at Home, Reablement and Adult Services have received positive inspections and grades
- Commitment from LPP members, with the potential to see a broad mix of community and service representation

### **Team around the Locality**

A key focus for the locality, and the golden thread throughout delivery of the locality plan, will be the design and implementation of the Team around the Locality model.

The HSCP Locality Team, working in partnership with the locality and stakeholders, will shape and deliver services to empower individuals and communities to start well, live well and age well.

The objective of the model will be to connect practitioners and people from health, social care, independent sector, the voluntary sector, and the community with a focus on the needs of individuals and their local community.

Within the model is a vision that includes integrated hubs serving as a convenient point of access for individuals seeking support. These hubs will provide information, advice, assessment, treatment and various support services all in one local location.

The model will be based on the following principles;

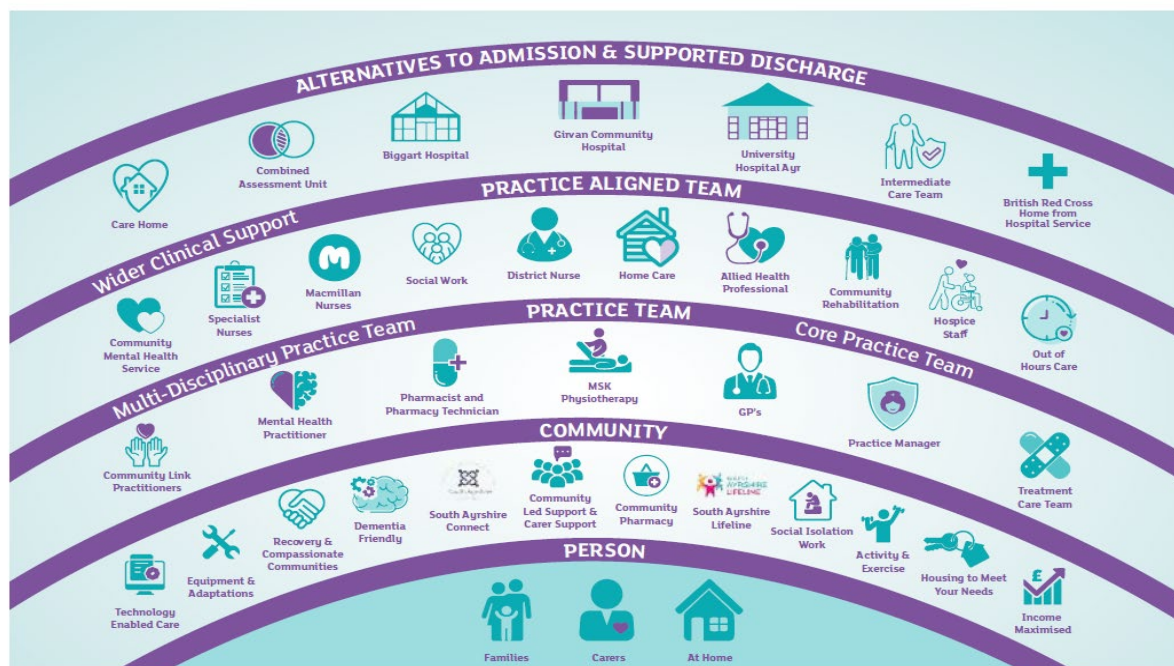
- **Person centred**; Engage individuals in thoughtful dialogue and joint decision making. Providing the information, advice, and support needed to protect their independence.
- **Building local capacity**; strengthening local community capacity, promoting local responses, including volunteering and developing micro-enterprises.
- **Partnership working**; fostering strong partnerships with the local community as well as with teams, partners and independent organisations.
- **Integrated care**; striving for coordinated, collaborative services that cater to specific needs and promote the wellbeing of local communities.
- **Community engagement**; active engagement with local residents to collectively shape services and support to address the needs of the local community.
- **Quality improvement**; integrating quality improvement approaches into our work, ensuring we provide the best outcomes for our communities.
- **Prevention/early intervention**; ensuring timely access to information, advice, and support, promoting independence and ageing well.
- **Strength/asset based assessment**: building upon the strengths of individuals, their families, and the communities that support them to live well.

The Team around the Locality model will bring into line clear alignment of support and care for individuals in the locality ranging from community led focus on prevention, early intervention and supported self-management to coordinated and integrated supports for adults with complex care needs.

The model will be aligned to clinical standards, evidence based practice, professional development and staff governance to ensure that the workforce are prepared, competent and confident. This will mirror recognition within the NHS Staff Governance Framework that the workforce must be well informed, involved in decision making, appropriately trained and developed, treated fairly and with respect, and working within a safe environment.

Fundamental to this approach across the locality and plan will be psychological safety and a culture where all key stakeholders are encouraged to be curious with a focus on learning and continuous improvements.





Model of Care for: Older People & Adults With Complex Care Needs



Image 3 – Model of Care for complex care needs

## **Workforce**

Our workforce are our greatest asset.

To inform pending and effective implementation and delivery of the Team around the Locality model and other relative actions within the locality plan, a workforce engagement event took place in Ayr in March 2024. At the event there was representation from the HSCP, Community Planning partners, third sector and independent sector partners.

The objective of the event was to bring key stakeholders together to inform and be part of future planning across the locality cognisant of the importance of workforce engagement, and creating the culture and conditions for collaboration, learning and improvements.

Key items covered within the event included:

- Celebrating success and strengths across South Ayrshire, and the Ayr Localities
- Networking of key stakeholders
- Awareness and discussion with regards to locality population profile data
- Awareness of the Team Around the Locality Model
- Identification of short term wins to enhance partnership working across the locality
- Discussion and planning for future implementation of the Team around the Locality Model

Following this engagement event, key themes emerged that have helped inform the current plan, and consideration given to themes for longer term ambitions.

- Development of open door community hubs to provide information and support to local people within their community
- Create opportunities for care homes to have more community based links promoting intergenerational opportunities
- Promote links with local food pantries and fuel banks to help destigmatise cost of living difficulties.
- Continue to work with Staying Ahead of the Curve to help promote general wellbeing and falls prevention.
- Consider development of more Active Travel routes

Ongoing workforce development, as aforementioned, is pivotal to the ongoing delivery of safe and effective care in line with the Healthcare Quality Strategy and National Health and Care Standards. This in turn will ensure effective implementation of this plan in line with professional standards and best practice. Key to this will be clear development plans and supervision arrangements for HCSP locality staff, aligned to professional registration requirements.

Workforce planning and development is a key pillar for delivery of the locality plan. To ensure effective implementation of the plan there will be ongoing delivery with regards to the key components of the SAHSCP Workforce Plan 2022-2025; plan, attract, train, employ and nurture. Crucial to this will be the vision and values across the locality, and asking all stakeholders to be mindful of and model compassion, respect and openness. Fundamental to the plan is a workforce that is informed and engaged, skilled and digitally confident, valued, ambitious and proud, and collaborative.



Image 4 – Values of the workforce

The HSCP has an ambition to support quality management approaches to transformational change, and this is achieved using Quality Improvement methodology. All staff are encouraged to have an awareness and understanding of Quality Improvement methodology, utilising e-learning and attendance at training opportunities,

both in house within South Ayrshire via the Ayrshire and Arran Improvement Foundation Skills course, or by nationally delivered training.



**Action Plan**








The following action plan identifies key priorities linked to strategic objectives, actions, measures and the Wellbeing Pledge. The action plan is presented in draft format, with further engagement across the LPP to agree inclusion.



It is envisaged that the plan will be driven by the LPP and reported on a frequent basis to the relevant committees and fora.

**Key (Wellbeing Pledge links)**

 <p>Support families to ensure their children have the best start in life.</p>	 <p>Provide services around you and your family.</p>	 <p>Help communities to connect and care for each other.</p>	 <p>Ensure people have the information they need to support their health and wellbeing.</p>
 <p>Listen to you and support you to take control of your own care.</p>	 <p>Support people to age well by keeping them healthy and in their home for as long as possible.</p>	 <p>Give you information on how you can keep active and well.</p>	 <p>Be open, honest and friendly.</p>

Priority	Actions (linked to strategic objectives)	Measures	Pledge
Promoting good mental health and wellbeing	Establish a Response Team Social Work service incorporating a preventative/early intervention approach (SO1)	Reduction in unallocated Social Work waits	
	Embed a Community Led Support approach across community health and care (SO2)	Number of staff trained  Learning from NDTi/Impact sessions	

	Support to projects successful with Communities Mental Health and Wellbeing Funding (SO1)	Evaluation of successful initiatives	
	Develop closer links between community health and care, and mental health services through induction, shadowing, role modelling and enhanced multi-disciplinary working (SO5)	Number of emergency admissions related to psychiatry Number of unscheduled bed days	
	Ensure that every HSCP staff member has a personal development plan in place (SO5)	Number of personal development plans I Matters	
Improving community connectedness	6 monthly locality engagement and networking events, inclusive of community planning and community groups, to foster greater awareness and links to supports in the locality (SO2)	Mapping of assets and supports across the locality	
	Development of Integrated Hubs across Locality area working closely with third sector (SO1)	Awareness of Connect model	
	Establish a Response Team Social Work service incorporating a preventative/early intervention approach (SO1)	Reduction in unallocated Social Work waits Awareness of Connect model	
Ageing Well	Use of participatory budgeting to support activity related to ageing well	Evaluation of PB project activity	

	Ongoing multi disciplinary work with Voluntary Sector colleagues to identify risks and develop support for ageing population		
	Create opportunities for care homes to have more community based links promoting intergenerational opportunities	Number of care homes developing and delivering intergenerational activity	
Overarching all priorities	Active engagement and relationship building across the locality to create the environment where communities are co-producing action in future plans.		ALL

## **Governance**

Governance of the work of the Locality Planning Partnership, and implementation of this Locality Plan, is essential, and will follow the governance principles set out in the NHS Scotland Blueprint for Good Governance. It is vital there is a clear mechanism for evidence, assurance and improvements.

The Locality Plan will align with HSCP, NHS Ayrshire and Arran Health Board and South Ayrshire Council governance arrangements

With regards to the Locality Plan there will regular interface and updates via the Community Planning structures.

### **HSCP governance**

As set out in the Strategic Plan transparency, listening and integrity are vital to the success of care and support across the locality. This approach is enshrined throughout the wellbeing pledge.

As such, integral to the actions and measures outlined above, will be constant feedback from citizens, the locality and the workforce through mechanisms such as Care Opinion and I Matter.

In addition, the progress of the plan and actions within, will align to Partnership governance arrangements and areas such as complaints handling, adverse events, inspection visits, reports and themes.

It is envisaged that key HSCP work around Delayed Transfers of Care and Community Services Oversight will line with actions relevant to the Locality Plan and LPP thus ensuring the communities voice is heard at all times.

To ensure locality plans and the Local Outcome Improvement Plan are integrated, the Senior Manager for Localities Senior Managers will attend the SDP Chairs Executive Group – a key executive group reporting to the Community Planning Board.

This approach will develop future locality models and plans to complement the LOIP and encourage:

- A simpler, more joined up local system that offers the right support at the right time that manages the growth in demand and to reduce duplication in the system;
- Integrated, multi-disciplinary teams from across the public sector working together on the same geography and tackling issues holistically, focused on relationship-building and getting to the root causes;
- A workforce who feel connected to each other and able to work flexibly, better able to meet people's needs; and
- A new system partnership with the voluntary sector to co-ordinate local activity, networks and opportunities – so that we make the best use of the strengths and assets of our communities