



south ayrshire
health & social care
partnership

Integration Joint Board Annual Report and Accounts 2024-25



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Management Commentary

Introduction

This publication contains the financial statements of South Ayrshire Integration Joint Board ('the IJB') for the year ended 31st of March 2025. The Management Commentary outlines the key messages in relation to the IJB's financial planning and performance for the year 2024-25 and how this has supported delivery of the IJB's strategic priorities. This commentary also looks forward, outlining the IJB's future financial plans and the challenges and risks which we are facing from an economic and financial perspective alongside an increase in demand from an ageing population. We will continue to engage further with communities and families to build resilience, focussing on early intervention and a partnership approach to health and wellbeing.

South Ayrshire Health and Social Care Partnership ("SAHSCP/the Partnership") is the name given to the service delivery organisation for functions which have been delegated to the IJB as defined in the Integration Scheme. The IJB is a separate legal entity in its own right and is responsible for planning and overseeing the delivery of a full range of community health and social care services. The IJB is responsible for allocating the integrated revenue budget for health and social care in accordance with the Strategic Plan priorities and oversees the service delivery for functions delegated to both South Ayrshire Council and the Health Board.

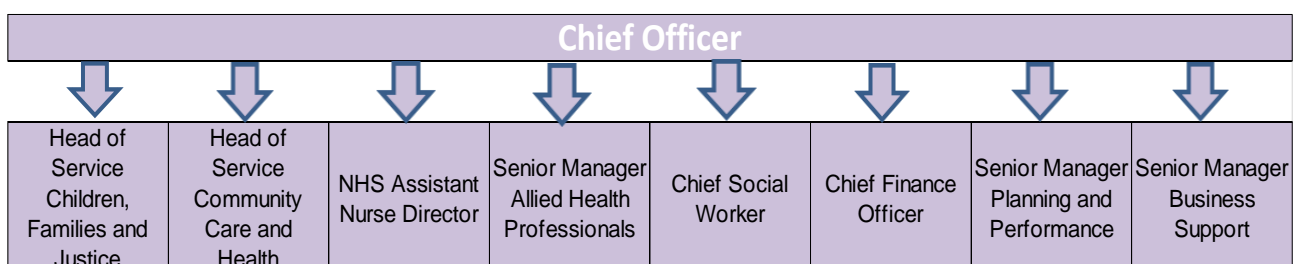
Our current Strategic Plan covers the period 2021-31, is a ten year vision for integrated health and social care services which sets out our objectives and how we will use our resources to integrate services in pursuit of national and local outcomes.

Our Partnership vision is:

"Empowering our communities to start well, live well and age well."

We have developed a 'South Ayrshire's Wellbeing Pledge' reflecting the notion of two parties (public services and the community) contributing to a common goal.

The IJB Strategic Plan is supported by service plans and transformation and improvement plans. These plans provide greater detail on how the services will deliver on the strategic priorities and the resources required to achieve this. The Chief Officer is responsible for the operational and strategic management of the integrated services. The Chief Officer is supported by Heads of Service in specific service areas and the directorate management team.



Strategic Plan 2021-2031

In line with our statutory responsibility to refresh our Strategic Plan every three years, the Strategic Plan 2021-31 (2025 refresh) was approved by the IJB in June 2025. The 2025 refresh covers the period from 2025-28 and aligns closely to our vision of “Empowering Communities to Start Well, Live Well and Age Well”.

The overarching aim of the Partnership is to work together with the citizens of South Ayrshire to improve health and wellbeing and support communities to be resourceful and supportive of family, friends and neighbours. To achieve this aim, we collaborate with our partner organisations (including the third and independent sectors) to enable citizens to take control and take responsibility of their own health and wellbeing, recognising that, most people do not want to have to reach our services.

To deliver on our objectives we will build further on the integrated working of our health and social care teams while strengthening our partnership working with South Ayrshire Council, NHS Ayrshire & Arran, wider Community Planning Partners and our vital Third and Independent Sector. We aim to make the best collective use of our resources for the wellbeing of our communities. The Plan sets out our vision for a new partnership with communities and individuals so we can work together to achieve the best possible outcomes for the people of South Ayrshire.

We have identified seven strategic objectives that lead us to improve outcomes over the next ten years. These strategic objectives will drive services provided and commissioned by the partnership and are based on the engagement conversations we have had with our partners and the community, as well as reflecting existing commitments across the Council, the NHS and the Community Planning Partnership.

- **We focus on early intervention and tackling inequality;**
- **We nurture and are part of communities that care for each other;**
- **We work together to give you the right care in the right place;**
- **We help to build communities where people are safe;**
- **We are an ambitious and effective partnership;**
- **We are transparent and listen to you; and**
- **We make a positive impact beyond the services we deliver.**

During the year we have continued to innovate and adapt, delivering the care and support that enables people to live well and independently in their communities. We launched the Connect South Ayrshire model, a joint initiative designed to provide easier access to information, advice, and support to South Ayrshire residents, strengthening our Teams around the Locality approach. This initiative is a direct response to the needs of our communities and reinforces our commitment to delivering integrated, accessible services that prioritise prevention and support individuals in living healthier lives.

Our work with children, young people, and families continues to be a key priority. Through the ongoing development of the Family First approach and our progress in delivering The Promise, we have seen the positive impact of early intervention and collaboration in improving outcomes.

South Ayrshire Demographics

LOCALITIES

To make informed decisions about our strategic planning and commissioning, we need to fully understand our community which can be done using a range of population data as well as our own local intelligence. From the data, it is clear that South Ayrshire faces particular challenges of inequality and community vulnerability, and we are determined to target our services at these challenges using the resources we have at our disposal.

South Ayrshire is split into six localities:

- Ayr North and Former Coalfield Communities
- Ayr South and Coylton
- Girvan and South Carrick Villages
- Maybole and North Carrick Villages
- Prestwick and Villages
- Troon and Villages

The purpose of planning by locality is to ensure services are delivered in local communities according to their specific need. Locality Planning Partnerships are established in each locality with their own priorities for the local area. To support the assessment of need and decision making on local services, profiles for each locality are produced.



INEQUALITIES



Around 1,700 people aged 16 and over in South Ayrshire were unemployed in the year ending December 2023. This is a rate of 3.7%.



This was a decrease compared with the year ending December 2022 when the unemployment rate was 4.2%.



The percentage of babies who are exclusively breast fed at 6-8 weeks has increased over the past year from 25.7% in 2022/23 to 29.5% in 2023/24.



This is higher than both Ayrshire and Arran (23.1%) and Scotland (28.3%) for the same period.

Each locality has its own unique strengths and assets, as well as its own challenges.

Severe deprivation continues to be concentrated around the Wallacetown, Ayr North, Lochside, Whitlets, Dalmilling areas with Girvan, Barassie, Craigie, Kincaidston, Ayr Town Centre and Maybole also suffering deprivation.

By reducing inequalities, deprivation, and the impact of poverty, we can make a long-term improvement to the health and wellbeing of local people.

AGEING POPULATION

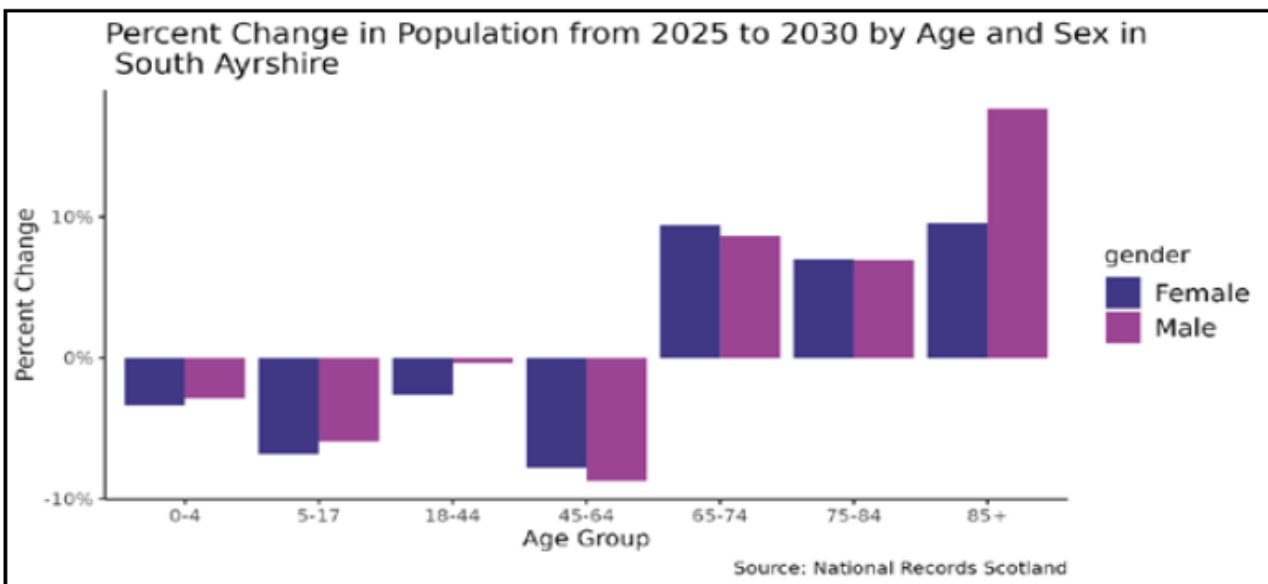
In South Ayrshire we have a significantly higher proportion of older people than across the rest of Scotland. National Records for Scotland mid-2023 population estimates published on 8th of October 2024, states South Ayrshire's population aged 65 and over is 27%, compared to Scotland's average of 20% and Dumfries and Galloway with the highest at 28%.

Older People are valued members of our community and contribute so much to our society through volunteering and childcare for example.

We know we need to ensure that we are supporting people to grow older and live as independently and purposeful as they can.

The HSCP worked alongside our Community Planning Partners to develop an [Ageing Well Strategy in South Ayrshire](#). This was launched in September 2024 and sets out how we will take steps to plan for our ageing population.

National Records for Scotland mid-2023 population estimates data shows the number of people who are aged over 65 and over is projected to increase over time within South Ayrshire. At the same time, the projected number of people aged under 65 is projected to decrease. Overall, the number of people who are aged 65 and over is projected to increase by 9% between 2025 and 2030.



As part of the Ageing Well strategy an Ageing Well Champions Board was created to bring the voices of the community into the discussion on how best to improve the health of our ageing population with a focus on prevention, early intervention, and self-help.

There has been great uptake in membership of this group since its establishment and we have now got multiple Champions Boards spread across different locality areas.

SHIFTING THE BALANCE OF CARE

‘Shifting the balance of care’ is an objective for all services and for everyone we support: from childhood to old age.

For older people’s services, a key priority that received concerted effort is bringing down delayed discharges.

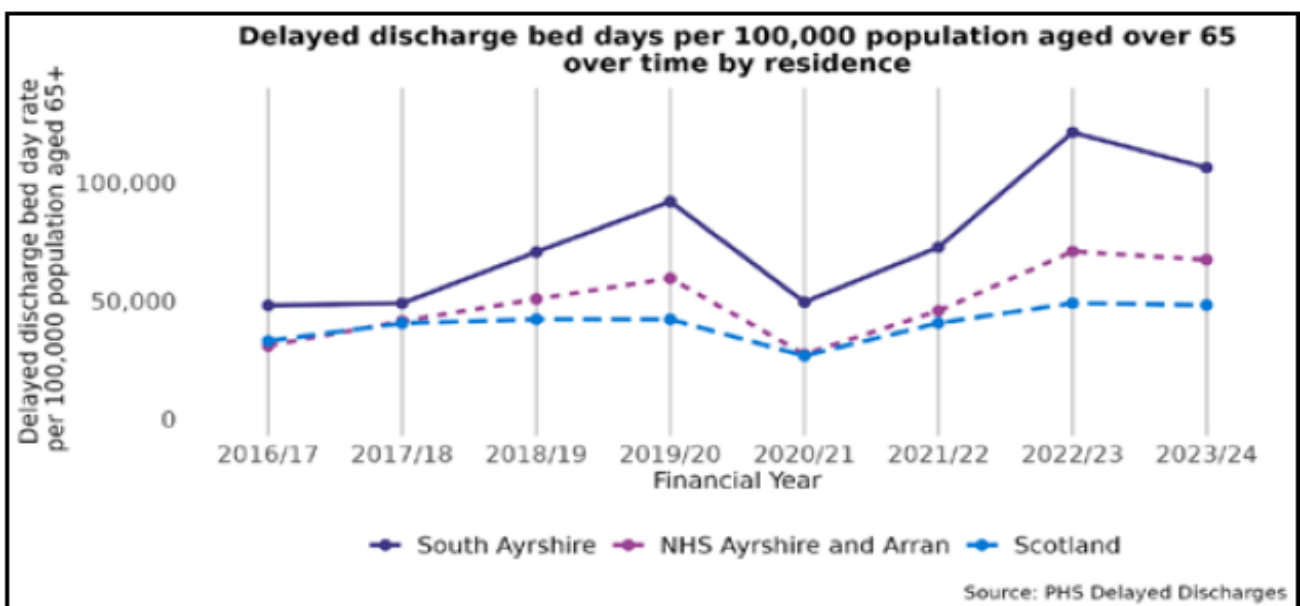
A delayed discharge is defined by NHS Services Scotland as “a hospital inpatient who is clinically ready for discharge from inpatient hospital care and who continues to occupy a hospital bed beyond the ready for discharge date.”

Reducing delays in discharge from hospital matters for many reasons, but most importantly it is never an appropriate place for someone to be if they no longer need hospital care. Time spent in hospital when medically fit is an unnecessary risk to health and welfare, involving risks such as hospital acquired infection and loss of mobility.

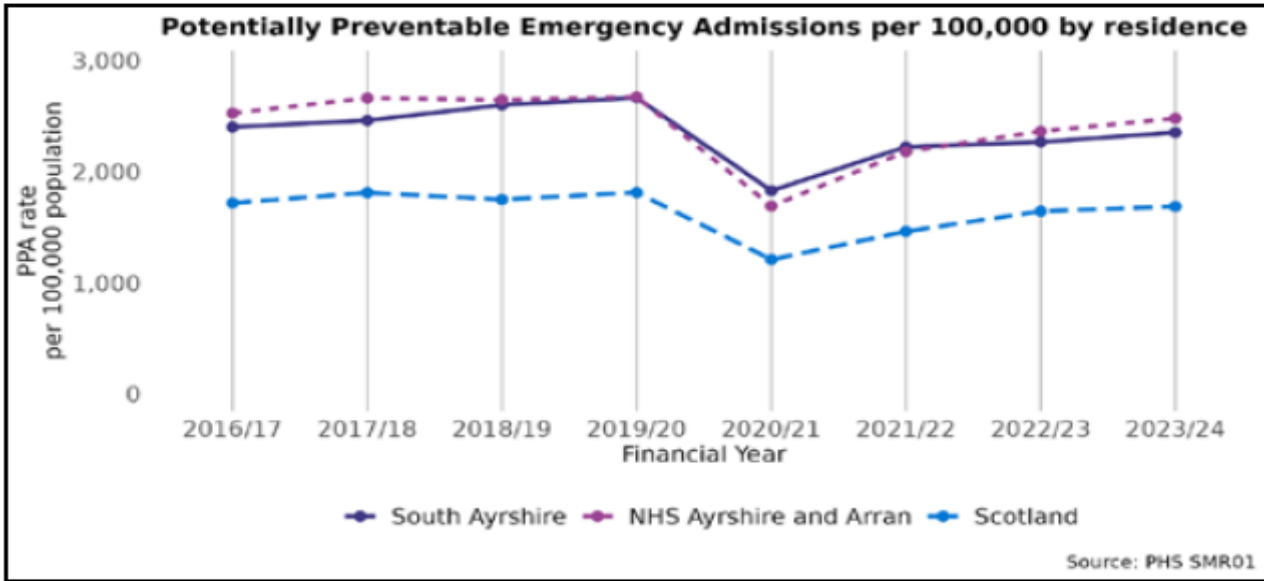
In children’s services “shifting the balance of care” is about our ambition to keep South Ayrshire’s children in South Ayrshire and within families wherever possible. This includes increasing the number of children and young people living within their own communities in South Ayrshire.

The number of delayed discharge bed days per 100,000 population aged over 65 has decreased between 2022-23 and 2023-24, however the rate for South Ayrshire is more than twice the rate for Scotland (106,635 and 48,494 respectively).

South Ayrshire IJB is committed to reducing delayed discharges and has invested in additional care at home capacity to enable timely discharge from hospital to care provided in the community. The frailty and staying ahead of the curve work continues to progress along with an increase in occupational therapists in GP practices providing services to people to enable them to stay healthier for longer and avoid care needs escalating reducing demand on services.



South Ayrshire has a higher rate of potentially preventable emergency admissions compared to Scotland as a whole. For 2023-24, the rate for South Ayrshire was 2,357 per 100,000 population, compared to 1,691 for Scotland.



MENTAL HEALTH AND WELLBEING

Mental wellbeing is intricately linked to the influence and impact that structural and relationship inequalities play in the early years across the life course.

We know that financial security, employment, and location are influences that often have a bearing on these choices. Issues can develop when alcohol, smoking or drug use shape lives.



In 2023/24, 24% of people were prescribed medication for anxiety, depression, or psychosis in South Ayrshire HSCP.



This is an increase from 18.9% ten years earlier.

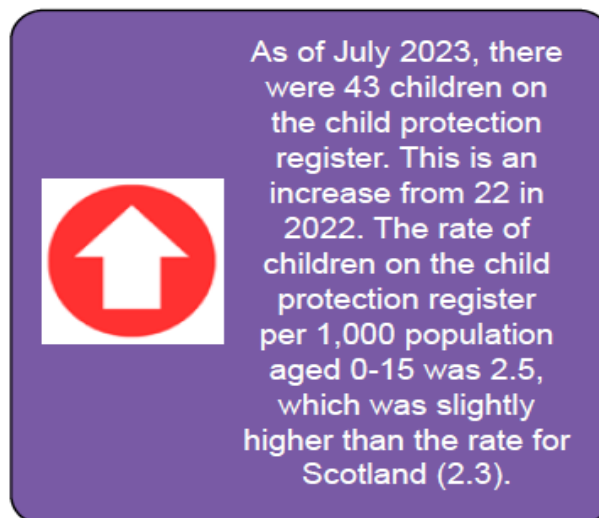


In 2022/23, the rate of alcohol-related admissions was 498 per 100,000 age-sex standardised population in South Ayrshire. This is a 51.9% decrease overall since 2002/03.

PUBLIC PROTECTION

The safety of South Ayrshire's citizens is fundamental to the work of the HSCP and its partners.

South Ayrshire Child Protection Committee and South Ayrshire Adult Protection Committee are the local strategic planning partnerships responsible for delivering continuous improvement in the protecting children and adults at risk in South Ayrshire.



Key Messages and Operational Highlights for 2024-25

This year has been another challenging year with continued demographic demand, however considerable progress has been achieved in recruiting staff, improving service delivery to provide care and support to enable people to live well and independently in their communities. The teams continue to innovate services and develop new ways of working through listening to communities and other stakeholders.

Following engagement with staff and communities last year, the health and social care partnership continued to embed the team around the locality model. Each of the six localities developed a locality action plan through ongoing engagement with the Locality Planning Partnerships (LLP's) and other key stakeholders. Data received from Public Health Scotland specific to each locality's population provided a clear evidence base along with lived experience and aspirations of each locality planning partnership to identify key priority areas for action.

Through whole system partnership working, co-production and co-design, the Locality Plans articulate actions relevant to locality priorities with a clear, authentic, and transformational approach aligned to quality planning, improvement, and assurance.

This year we launched Connect South Ayrshire a joint initiative designed to provide easier access to information, advice, and support for all residents. Through a combination of a user-friendly website, a free phonenumber, and a series of community hubs, Connect South Ayrshire has already made a tangible difference, empowering people to engage with services and make informed choices about their wellbeing. This initiative is a direct response to the needs of our communities and reinforces

our commitment to delivering integrated, accessible services that prioritise prevention and support individuals in living healthier lives.

One of the most significant developments of the year has been the continued success of our Ageing Well programme including the formal launch of the Ageing Well Strategy in September 2024. This programme, which focuses on preventative interventions and community-based support, has been instrumental in addressing the challenges we face in the years ahead with our ageing population. We were honoured to receive the Silver Award for Transformation in Health and Social Care at the national iESE Awards. This recognition at a national level reflects the outstanding work of our teams and partners in empowering older adults to maintain their quality of life and ensure they have access to the right support when needed.

We continued to strengthen our collaborative working with University West of Scotland and in December 2024, a formal agreement to work in partnership with UWS and SAHSCP was signed. This agreement had been developed during 2024 and formalises a joint appreciation and recognition in the development of a skilled and experienced workforce, along with setting out our commitment to ensure that SAHSCP is able to offer positive career choices. Particularly in professional roles with real learning and training opportunities on the job adding significant value when undertaken alongside formal qualifications. This agreement underpins strategic workforce development and investment in the future workforce of SAHSCP.

The IJB approved investment of £0.300m from the Improvement and Innovation fund to develop a neurodiversity service to create new pathways for support, guidance, and assessment for children with neurodevelopmental concerns. Good progress has been made in providing a support first model and access to a diagnostic service, this will help reduce the Child and Adolescent Mental Health Services (CAMHS) waiting list and enable children with complex neuro conditions to access services and support quicker.

South Ayrshire's Parenting Promise improvement action plan focused on whole system change to deliver on the Promise, through ten improvement areas. This year reporting on the Promise and The Plan 2021 – 2024, reflected on progress to date. Through this approach we have been able to measure authentic transformation through our benefits tracker on 47 measurable improvements benefits. Of the 31 actions identified for 2021-2024, 15 (48%) are now complete a further 16 (52%) are on target and will be carried onto plan 2024-2030. We are pleased at the evidence in South Ayrshire of work to deliver on the Promise at the halfway point of the ten-year plan, the need to challenge care in Scotland, requires persistent and tenacious attention and scrutiny from Community Planning Partners to ensure the change that the Promise told us are delivered on.

South Ayrshire Children Services Plan 2023 – 2026 continues to be sector leading on its delivery on Whole Family Wellbeing. This work draws together all our Community Planning Partners in Children Services Planning, to deliver on key priorities which were identified through the work that our partners in Horizons research gleaned from engaging with families in South Ayrshire.

This past year has seen the further embedding and development of a "Family First" approach in South Ayrshire across all eight Locality School clusters. Family first has continued to support and enable the embedding of partnership resources, such as Thriving Communities, Social Work, School Nursing, Police Scotland in locality School clusters, to deliver on GIRFEC principles. This work has led to significant improvement in outcomes for South Ayrshire, with a 50% reduction in the number of children removed from families and placed in expensive Out with Authority (OWA) residential placements over the past 5 year.

This year has been a year of growth, innovation, and development across all services. Engagement with communities and working in collaboration with Community Planning Partnership and wider Council and Health services has enabled the creation of services designed for the citizens of South Ayrshire to allow them to start well, live well and age well.

Over the course of the year, we have continued to move forwards in meeting our strategic priorities, as reflected in the sections below.

We focus on prevention and tackling inequality

A Spirometry Testing Pilot, designed to support the early diagnosis and management of respiratory conditions such as Chronic Obstructive Pulmonary Disease (COPD) was launched in January 2025 at Girvan Community Hospital. Funding of £0.012m from the Improvement and Innovation Fund has been accessed to provide 1,000 spirometry tests over an 18-month period. Clinics in Ayr and Troon are also in development, further expanding local access. By offering this service within the community, we are helping residents receive timely assessments and manage their conditions earlier without needing to attend hospital.

Spirometry is a vital tool in detecting lung conditions early, allowing individuals to take control of their health and avoid the progression of serious illness. Early diagnosis can lead to better long-term outcomes and reduced hospital admissions. This aligns closely with our strategic objective of enabling people to live in good health for longer and supports a shift towards preventative, community-based care, a key national and local priority.

Investment of £0.075m from the Improvement and Innovation fund was approved to create Vibrant Voices, a unique and inclusive singing group designed to support adults with communication difficulties. Vibrant Voices provides a safe and uplifting space for people affected by conditions such as Parkinson's Disease, stroke, dementia, learning disabilities, and other speech and voice challenges. Participants attend weekly sessions along with family members, friends and carers, promoting social connection, shared experience, and community belonging. Vibrant Voices is a strong example of preventative, community-based care enabling people to improve their own health and wellbeing in an enjoyable, meaningful way.

South Ayrshire Health and Social Care Partnership (HSCP), alongside NHS Ayrshire & Arran and the other Ayrshire HSCPs, has once again achieved national recognition for its commitment to high-quality infant feeding support, securing continued gold accreditation from the UNICEF Baby Friendly Initiative. The UNICEF Baby Friendly Initiative is a UK-wide programme that supports public services in promoting breastfeeding and building strong, loving relationships between families and their babies ensuring every child gets the best possible start in life.

We nurture and are part of communities that care for each other

The Bfriend service has continued to make a meaningful difference in the lives of young people across South Ayrshire throughout 2024–2025, by providing trusted relationships, opportunities for connection, and access to new experiences. With the support of resolute volunteers and partners, Bfriend has created safe spaces for young people to thrive socially and emotionally, helping to reduce isolation and build life skills that will serve them well into adulthood. The Team has delivered 455 one to one outings, supported 49 befriending matches, facilitated 14 group outings and trained 17 volunteer befrienders.

As part of the ambition to create a locality model of service planning and delivery, investment of £0.146m from the Improvement and Innovation Fund was approved to create a multi-disciplinary team that brings together existing posts and new posts to focussing on Ayr North called Getting it Right for Ayr North (GIRFAN). This area has poorer health outcomes compared to other areas across South Ayrshire a focussed team will seek to create better longer-term outcomes for people in Ayr North with a greater emphasis on engagement, co-production, prevention, and early intervention.

The Speech and Language Therapy team received £0.114m funding from the Improvement and Innovation fund. This investment has created South Ayrshire Communication Friendly Environments (SACFE) which promotes and supports communication for everyone within community settings such as parks, GP practices, restaurants, businesses, and voluntary groups. SACFE Communities team are supporting communities on how to achieve positive communications. This includes how to label areas using words or symbols and pictures to aid understanding through a 'total communication approach.' Visual menus, communication boards and Makaton are used.

We work together to give you the right care in the right place

Near Me video calling platform has been relaunched to transform how people access services, the secure user-friendly technology enables individuals to attend appointments from home or other remote locations, removing barriers such as travel, mobility issues and time constraints. Over three hundred staff including social work, occupational therapy and housing have been trained in using Near Me. Both staff and service users have positively received the platform, especially those living in rural areas, where access to services can often be more challenging.

South Ayrshire HSCP has joined the Near Me for Social Work in Prisons steering group, working in collaboration with Social Work Scotland and the Scottish Prison Service. This development supports regular and meaningful engagement between social workers and people in custody, strengthening relationships while reducing travel time and associated costs.

South Ayrshire HSCP's Reablement Unit continues to demonstrate the positive impact of timely, focused support in promoting recovery and independence. A key development during the year was the increase in the number of assessors within the Reablement Unit. This investment was review of the staffing structure and has contributed to a significant reduction in the average length of stay for individual from 5 weeks down to just 2.5 weeks, enabling faster transitions home and greater throughput of patients from hospital. As a result, more individuals have been able to access the service directly from hospital, supporting earlier discharge and relieving pressure across the wider health and social care system.

The IJB continue to invest in the Hospital at Home service, to provide an alternative to hospital admission, offering short term targeted acute care to individuals in their own home or homely setting. The service is for older frail adults presenting with increased confusion (delirium), lethargy, reduced oral intake or falls. Interventions from the team include intravenous antibiotics and fluids, blood monitoring, oxygen therapy and other types of acute care. During 2024-25 the team supported 584 patients and saved 5,097 bed days. The Team also supported 103 discharges from hospital and providing care to 105 care home residents allowing them to remain in the care home rather than be admitted to hospital.

We help to build communities where people are safe

During the year, the HSCP completed the analogue to digital telecare transition, with 100% of our dispersed alarm unit service users now connected to a fully digital service. Supporting more than 2,500 individuals across South Ayrshire. We received a Platinum Digital Telecare Implementation Award, a national recognition that reflects our commitment to supporting people, including those with disabilities, long-term conditions, and frailty to live as independently as possible at home and within their own communities.

This year saw the successful launch of the Connect South Ayrshire model, a joint initiative designed to provide easier access to information, advice, and support for all residents. The model includes a user-friendly website, a free phonenumber and a series of community hubs. This initiative is a direct response to the needs of our communities and reinforces our commitment to delivering integrated, accessible services that prioritise prevention and support individuals in living healthier lives.

The first physical hub opened in Ayr on the 4th of November 2024, as a joint initiative with VASA (Volunteer Action South Ayrshire). The hub provides advice, information, and signposting to a range of services including benefit enquiries, employment support, wellbeing information and more. The hub also has a calendar of wider partnership services utilising space and providing a drop in and appointment-based services daily. The purpose of the hub is to provide a physical space that individuals can walk in and access a wide range of information and advice around what is available in their local communities, with a range of local services working in partnership in the same space.

Work will be progressed in 2025-26 to develop physical hubs in a further four towns namely, Girvan, Maybole, Troon and Prestwick.

We are an ambitious and effective partnership

Innovation in practice has also been evident through the development of the CapTech (Care at Home Pharmacy Technician) service. In collaboration with pharmacy colleagues, CapTechs are now embedded within hospital discharge teams, providing specialist medication support to facilitate safe and effective transitions home. These developments reflect South Ayrshire's commitment to supporting people to live independently, with dignity and choice, in their own homes and communities for as long as possible.

The Learning Disability Strategy 2022-27 was launched in August 2022. This strategy, which aligns with The Keys to Life, aims to empower individuals with learning disabilities to lead healthy, independent lives, have control over their decisions, and actively participate in their communities. During the year 99% of the strategies objectives or 37 out of 38 actions were completed. This progress demonstrates the ongoing commitment to ensuring people with learning disabilities in South Ayrshire have the opportunity to reach their full potential. The strategy's success is also down to the continuous collaboration with service users, their families, and carers, as well as professionals from across various sectors. The League of Champions, a group of individuals with learning disabilities, their families, and staff, plays a key role in ensuring the principles of the strategy are put into action and that these principles continue to guide our work.

Significant progress has been made to create a Market Position Statement that addresses housing needs for individuals with learning disabilities. This includes exploring different housing models and support options, and it remains a work in progress, with a final report due in July 2025. This will close all the actions.

Our approach to engaging with communities, our CONNECT and Team Around The Locality model and our Ageing Well Strategy have all been recognised as sector leading, being shared at multiple National and International conferences and winning silver in the IESE UK Public Sector Transformation Awards 2025.

We are transparent and listen to you

During 2024-25, South Ayrshire Health and Social Care Partnership (HSCP) continued to place a strong emphasis on listening to the people who use our services. Feedback shared through Care Opinion remains an important part of how we understand people's experiences and identify opportunities to improve.

Over the course of the year, members of the public shared 38 stories about South Ayrshire HSCP. Of those, 87% were positive, while 13% included some form of constructive comment or concern. Our teams responded to 47 stories, achieving a response rate of 97%, reflecting our ongoing commitment to open dialogue and timely engagement. These stories have been read 4,257 times, showing how valuable shared experiences are in shaping public understanding and expectations of care.

There are various "Champion Groups", who represent those with lived experience across the HSCP. From the Learning Disability Champions, Ageing well Champions to the Care Experienced Champions for Change and Young Carers. These groups have directly impacted upon how the HSCP deliver services, an example being the Champions for Change group telling us that our Looked After Care Meetings (LAC) was stigmatising and labelling. Through our consultation and listening to the voice of those with lived experience we changed the name of these meetings to the "child's name" meetings. This has had a direct impact on how Children and Families feel about their meetings and improved service delivery as a result. Most recently we have established three Ageing Well Champions Boards, engaging with communities to develop our Mental Health and Dementia Strategies, and strengthened by our Locality Planning Partnerships

A new SAHSCP Communications Strategy for the period 2024-28 was approved on the 12th of June 2024. The content of the strategy and accompanying action plan was developed from feedback gathered from a communications survey distributed to staff and the public, the survey included questions specifically about internal communications, how we communicate, how often we communicate and areas for improvement. The action plan included services to review web pages, increase followers on social media and host annual Wellbeing Pledge Showcase event as an opportunity for staff, partners, community groups and the public to come together to network and share good practice.

We make a positive impact beyond the services we deliver

Developing, upskilling the local workforce, and sharing and evaluation of best practice is at the heart of a new partnership between University of Scotland (UWS) and South Ayrshire Health and Social Care Partnership (SA HSCP) as both organisations have signed a strategic partnership agreement. Included in the partnership agreement is a commitment to work together to grow the local workforce in Ayrshire by developing entry level opportunities that align to the needs of the workforce across Ayrshire. This will be supported by work to upskill the existing workforce with new roles supported by learning opportunities.

The two institutions will also work together on course content and delivery for UWS students studying health and social care, ensuring SA HSCP's expertise is integrated so graduates are ready for their roles. The strategic alliance builds upon both organisation's experience and expertise in working with a variety of distinct groups and communities across Ayrshire with a commitment to share both best practice and relevant research that can improve the health and wellbeing of people in Ayrshire.

A refresh of the Digital Strategy was approved on the 12th of June 2024, this is for the period 2024-29. The refreshed strategy is committed to improving efficiency and enhancing the user experience for those interacting with the Health and Social Care Partnership. Over the next five years we will embrace innovation, improve service integration, and invest in new and effective ways of working to meet the evolving needs of our community.







The IJB approved £0.500m investment from the Improvement and Innovation fund to the Digital Strategy to date £0.200m has been allocated to various projects, this includes a Care Technologist role promoting the use of digital technology to maintain and increase independence as well as providing reassurance to families. Demonstration hubs have been created in community locations to display the range of technology solutions available to improve independence, security and health management for individuals. Tech solutions available include blood pressure monitors, glucose meters, pulse oximeters, personal alarms, fall detectors, motion sensors, smart speakers, and tablets with health apps.

2024-25 Performance Achievements

Performance reports are presented to the Performance and Audit Committee (PAC) twice a year and an Annual Performance report presented to the IJB. The Annual Performance report for 2024-25 will be submitted to Scottish Government on the 31st of July 2025 following agreement from the IJB.

The most recent six-monthly performance report for [Children's Health Care and Justice Service](#) was presented to the PAC on the 3rd of December 2024. The latest six-monthly performance reports for [Community Health and Care Services](#) and Allied Health Professional Services were presented to the PAC on the 1st of April 2025.

Performance from local and national indicators are measured as a RAG (Red, Amber, Green Status) and Trend Status as defined in the tables below.

RAG Status			Trend Status	
	No concerns			Improving
	Some concerns			Declining
	Major concerns			No change

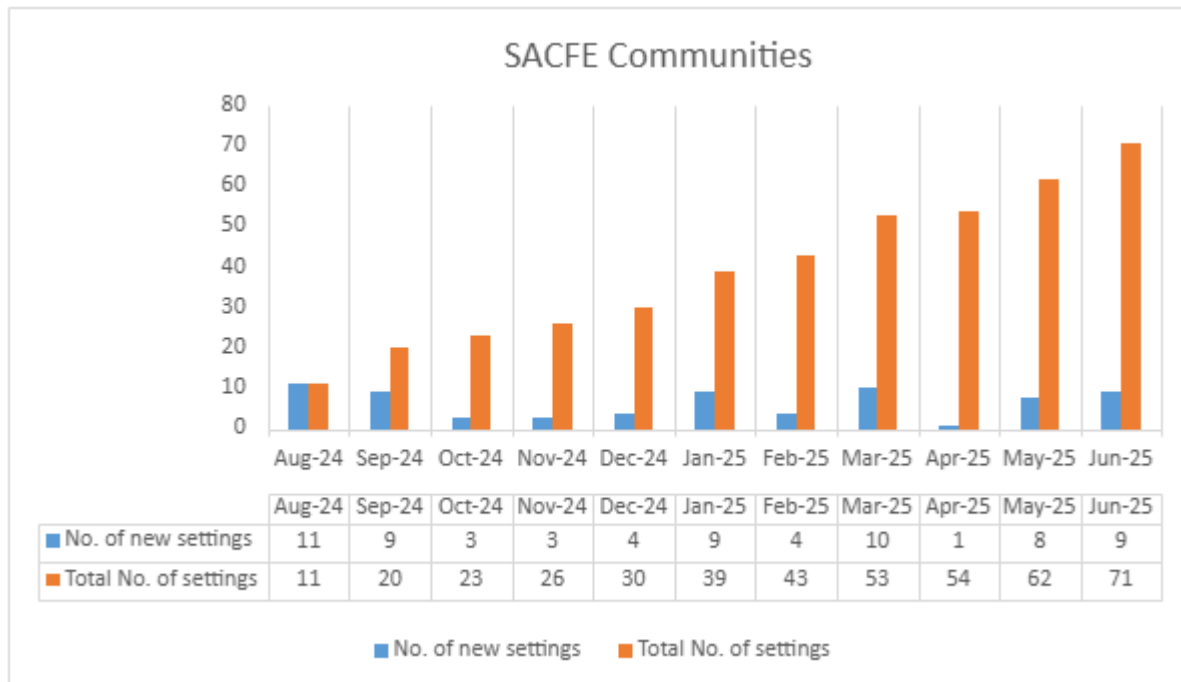
Allied Health Professionals Service Performance Report

The presentation to the Performance and Audit Committee on the 1st of April 2025 looked at performance in relation to the strategic plan actions for the AHP service as noted below: -

- Improve system-wide tiered approach to accessing specialist clinical assistance across AHP services.
- Improve access to information and opportunities for earlier assistance to improve health and wellbeing for individuals, families, and communities.
- Promote strengths-based reablement and self-management approaches across the entire system.

Performance is measured by the number of people seen, waiting times and number of people on waiting lists. Considerable progress has been achieved measuring AHP performance which will be built on in the coming months.

Investment of £0.114m from the improvement and innovation fund was provided to the Speech and Language Team to implement South Ayrshire Communication Friendly Environments (SACFE). This project aimed to create communication friendly environments to support individuals with language and communication needs in settings such as GP practices, public parks, restaurants, businesses, and voluntary groups. The aim of the project was to have twenty communication settings in South Ayrshire on the journey to achieving SACFE by June 2026. The graph below shows the number of new settings that come on board each month and the cumulative total of settings with communication friendly environments, the target of twenty was achieved in September 24, well ahead of schedule.



Investment of £0.312m in Occupation Therapy capacity within GP surgeries to support ageing well titled “Staying ahead of the Curve” aimed at reducing falls and fractures, increase number of individuals with wellness plans, improve quality of life and functional ability, also to promote self-management to sustain people at work, or earlier return to employment. Performance on number of referrals has been collated with further work progressed in collating outcome of the referrals ie. number of wellness plans created improvement on functional fitness, earlier return to work data. This data will be used in evaluating the investment.

Actions being progressed to improve the performance within Allied Health Professional Service: -

- Recruitment of a project manager to review the Occupational Health Therapist service including review of referral and triage processes.
- Service capacity has increased temporarily from Improvement and Innovation Fund to reduce the number of people waiting and reduce the length of waiting time.
- A review of the work of the Front Door AHP service is underway with the work evidencing positive impact on hospital admissions and length of stay in hospital.
- Significant progress has been made in the development of a data dashboard; the next stage of this work will be to include the key performance indicators for AHP's.

Summary of Children’s Health Care and Justice Services Performance Report


Performance for the 6 months to 31st of October 2024, highlighted no performance measures were showing major concerns, 2 had some concerns and 20 had no concerns.

Action is being progressed to address the performance measures with some concerns, this includes:

-

- Health visitors contact as part of the universal pathway enables earlier identification of development concern and identifies where additional support is required.
- Promotion of nursery uptake for eligible 2-year-olds to early year's education.
- New process to improve follow up of absences from Unpaid Work to improve compliance.
- Guidance developed for Justice Services staff regarding expectations to attend unpaid work within 7 days including enforcement action for those who fail to attend.

CHILDREN'S HEALTH CARE AND JUSTICE PERFORMANCE SUMMARY

Performance Indicator	Indicator Status	Trend
WE NURTURE AND ARE PART OF COMMUNITIES THAT CARE FOR EACH OTHER		
Percentage of Children reaching developmental milestones at the time of their 27-30 month health review		
Percentage of new born babies exclusively breastfed at 6-8 weeks		
Percentage of Children with a healthy weight at P1		
Teenage Pregnancy		
Number of Children Looked After as at 1st of Aug 2024		
Number of Children Looked After by accommodation type		
WE BUILD COMMUNITIES WHERE PEOPLE ARE SAFE		
No. of Children on the Child Protection Register as at end of quarter		
Percentage of CP1's received within target timescale of 10 working days from point of child protection alert		
Number of children who are re-registered on the child protection register within 12 months		
Percentage of core groups convened within 15 days		
Percentage of Planning Meetings convened within 28 working days from child protection alert		
WE FOCUS ON PREVENTION AND TACKLING INEQUALITY		
No. of children referred on offence or non-offence grounds		N/A
Percentage of individuals subject to Throughcare Licence conditions seen by a Supervising Officer within 24 working hours		
Percentage of Criminal Justice Social Work Reports submitted to court by 12noon on due date		
Percentage of Home Background/Home Leave Reports submitted within timescales		
Percentage of individuals placed on Community Payback Orders with Offender Supervision seen within 5 days of court appearance		
Percentage of individuals placed on Community Payback Orders (unpaid work/other activity) undertaking Health & Safety induction within 5 working days of court appearance		
Percentage of individuals placed on Community Payback Order (unpaid work/other activity) who attend 1st work appointment within 7 working days of court appearance		
Percentage of first case reviews held within 12 weeks		
Percentage of Unpaid Work Level 1 Community Payback Orders completed within 3- month timescale (Target End Date)		
Percentage of Unpaid Work Level 2 Community Payback Orders completed within 6-month timescale (Target end Date)		

Summary from Community Health and Care Services Performance Report

The report presented was the third version of the revised previous six-monthly reports, following a review of existing measures and realignment of the measures against the Strategic Plan Objectives. The report no longer includes Public Health Measures, ADP Measures and Adult Support and Protection Measures as these are already reported to other governance panels and committees as part of existing reporting mechanisms.

Performance for Community Health and care services as at 31st of December 2024, highlighted 11 performance measure with some concerns and 20 had no concerns.

The main priority with Community Health and Care continues to be the Rate of Delayed Discharges age 18+, actions taken include: -

- Daily reporting of Delayed Transfers of Care (DTC) reviewed by the Integrated Discharge Team and any issues escalated to Senior Managers.
- Weekly Delayed Transfers of Care meeting includes all community teams and Senior Managers to review all delays longer than 4 weeks.
- Racecourse Road Intermediate Care Unit providing reablement support on discharge from hospital prior to care at home services. The current average reablement period in the unit is 2.5 weeks, with 69% of people discharged home with no care required, 28% with a reduced package of care and 3% with same care package assessed at time of hospital discharge.
- Increase in care at home capacity, with recruitment ongoing during the year, with a net increase of 58 care at home assistants this is equivalent to a 15% increase in the team.
- Work to reduce the number of double handed care packages to ensure more care capacity is available.

Action is being taken to address the performance measures with some concerns, this includes: -

- Work collaboratively to review the Dementia Diagnosis Pathway and explore possibilities to expand the role to Mental Health Practitioners and ensure pathways are in the public domain and easily accessible.
- The Adult Carers Strategic Group will act as a scrutiny group reviewing with local analysis to be undertaken to identify issues and enable remedial action to support carers in their caring role.

COMMUNITY HEALTH AND CARE SERVICES PERFORMANCE SUMMARY

Performance Indicator	Indicator Status	Trend
WE FOCUS ON PREVENTION AND TACKLING INEQUALITY		
Premature Mortality Rate		
Falls rate per 1,000 age 65+		
Healthy Life Expectancy by Locality		
Improving - Females / Declining - Males		
WE NURTURE AND ARE PART OF COMMUNITIES THAT CARE FOR EACH OTHER		
% of people referred for Post Diagnostic Dementia support who receive a minimum of one year		
% of Carers who are supported to continue in their caring role		
% of Carers who agree with statements in Carer Support Plan Statements (NEW)		
% of Service Users who agree with statements in their My Life My Outcome Support Plan (NEW)		
WE WORK TOGETHER TO GIVE YOU THE RIGHT CARE IN THE RIGHT PLACE		
Rate of ED Attendances aged 18+		
ED Conversion Rate		
ED Admissions		
Rate of Acute Bed Days for 18+		
Readmissions to Acute Hospitals with 28 days of discharge		
Rate of Delayed Discharges aged 18+		
Delayed Discharges of more than 2 weeks		
Rate of Mental Health Bed Days aged 18+		
Adults with Intensive Care Needs Receiving Care at Home		
Proportion of people who are able to spend the last 6 months of life at home or in a community setting		
% of adults supported to live as independently as possible		
WE BUILD COMMUNITIES WHERE PEOPLE ARE SAFE		
% of adults supported at home who agree they feel safe		
WE ARE AN AMBITIOUS AND EFFECTIVE PARTNERSHIP		
Joint Inspection Report Gradings (Care Inspectorate)		
No. of staff who has undertaken Quality Improvement Modules		
Proportion of care services graded "good" (4) or better in Care Inspectorate Inspections		
% of staff with completed Annual PDR's		
Absence Rates across Service Area		
WE ARE TRANSPARENT AND LISTEN TO YOU		
SDS Payments (Proportion funding allocated to DP or PMB).		
No. of People in receipt of SDS options 1 and 2		
No. of Carers Assessments/Support Plans completed		
Care opinion Results		N/A
i-Matter Results		N/A
% of adults who agree that they had a say in how their help, care or support was provided		
Increase in the number of services users with Future Care Plans	Under Development	
WE MAKE A POSITIVE IMPACT BEYOND THE SERVICES WE DELIVER		
Increase in referrals from the HSCP to the Information and Advice hub for Income Generation		

Improvement and Innovation Progress

Transformation is key to shaping health and care services for the future, shifting the balance of care to more early intervention and prevention approaches and community-based services with less reliance on institutional based services.

On the 14th of June 2023, the IJB approved a £4m Improvement and Innovation Fund created to allocate funds to specific services on a non-recurring basis with the aim to improve services to ensure future financial sustainability. The IJB approved further investment of £2m into the fund on the 12th of June 2024. The £6m investment into the Improvement and Innovation fund represents 2.4% of the total IJB Budget for 2025-26 £248.422m.

Guidance and a funding request template was produced and distributed to staff and added to the website. Templates include how the investment will meet the strategic priorities of the partnership and what Key Performance Indicators (KPI's) apply to enable measurement of improvement.

A progress report was presented to the IJB on the 11th of June 2025, the IJB noted the outcomes of specific projects and closed off projects that were now completed with various outcomes, where included in business-as-usual performance will continue to be monitored at various levels within existing team and service performance reports. Projects completed in the report are listed below:

- CAP Tech Care at Home – additional capacity not created from investment; service is now delivered from existing resource.
- VASA Attendance Allowance including Blue Badge Support – investment was successful with 130 people now in receipt of attendance allowance and 26 people less socially isolated due to the issue of a blue badge. This service is now incorporated within the VASA contract.
- VASA Delayed Transfer of Care Support – provided information and advice to people in hospital who required social care support, this project is now complete.
- Health Walks Co-ordinator – the funding for one year supported the development of healthy walks with 15 active walks taking place every week and forty-nine new walk leaders trained.
- Free Stagecoach Travel for Care Experienced Young People – funding for one year supported 16 young people aged 23 – 20 years old, with a free bus travel pass.

At the end of the budget year £4.730m (78%) had been approved on fifty-five projects. The progress report included a highlight report presented to the IJB on the 11th of June 2025. The purpose of the highlight report is to provide high level information on the numbers of projects approved the amount committed from the fund and the projected expenditure in the year. Along with the current RAG Status of projects, R – At Risk, A – Some Concerns, G – Project on Track. The report provides any specific highlights over the period and looks activity to expect in the upcoming period. Issues and mitigations are also detailed in the report and assist in decision making and where appropriate action is required to be taken.

Three projects were highlighted as amber – some concerns, two of which were delayed due to recruitment issues and one a procurement issue that has now been resolved.

During 2024-25 £1.164m was spent on approved projects combined with prior year spend of £0.189m, total spend to date £1.353m, leaving a balance of £4.647m in Improvement and Innovation Fund reserve, see Note 8. Of this balance £3.377m is committed to be used in future years on approved projects and the balance of £1.270m available for investment. The table below is the RAG status extract from the Improvement and Innovation Fund Highlight report.

Improvement and Innovation Projects						
Services	No. of Projects	Investment £'000's	RED - PROJECT AT RISK	AMBER - SOME CONCERNS	GREEN - PROJECT ON TRACK	BLUE - COMPLETED
Community Care and Health	31	2,040	0	3	19	9
ADP	1	80	0	0	1	0
Children's Health Care and Justice	7	605	0	0	6	1
Policy and Performance	6	772	0	0	6	0
Allied Health Professionals	8	1,196	0	0	8	0
Public Health	2	37	0	0	2	0
Total Improvement and Innovation Fund	55	4,730	0	3	42	10

Financial Sustainability Progress

Prevention and early intervention projects are embedding a culture of approaches to promote quality of life and wellbeing in the community to prevent or delay the need for more intensive and higher cost care. Main outcomes for individuals include increased independence, use of community services and self-management of care needs, improved quality of life and wellbeing for people in receipt care including reduced social isolation and loneliness and delay or reduced need for care and support.

From a financial perspective, the benefits of prevention and early intervention will be realised through reduced demand and need for services in the medium to longer term. Investing in prevention and early intervention is essential to assisting financial sustainability when less financial resources are available at a time when the ageing population is increasing along with demand on services.

Racecourse Road Intermediate Care Unit is an example of early intervention through providing reablement support on discharge from hospital prior to care at home services. Current performance shows 69% of people discharged home with no care required, 28% with a reduced package of care and 3% with same care package assessed at time of hospital discharge. Previously the 69% of people discharged with no care required, would have been discharged from hospital with a care package, this service is avoiding additional costs within the care at home service.

Digital Strategy has funding of £0.500m allocated from the Improvement and Innovation fund, and a Tech Plan has been drafted for implementation in 2025-26, this will include use of technology enabled care aimed at testing and implementing where appropriate following an evaluation exercise.

This will improve care and wellbeing making the best use of technology in the design and delivery of services. Financial benefits will be assessed following evaluation of relevant technology.

During 2024-25 plans were put in place to reduce the beds at Biggart Hospital, the bed base had increased in 2020 as a response to the pandemic and had remained open to support delayed transfers of care from acute hospital to community settings. The additional 23 beds were funded from reserves on a temporary basis. Action has been taken to ensure the beds can be closed safely, with the throughput of patients remaining the same. This has been achieved by June 2025, through reduction in length of stay and improvements in discharge planning. The beds at Biggart are now in line with budgeted establishment of 60 beds, ensuring financial sustainability.

Community Nursing costs exceeded budget this financial year and this was recognised as an issue, action was taken at the end of the financial year reviewing staffing data provided to manage budgets. Visibility of this data has allowed management to plan staff cover safely and, in a cost-effective way, with positive results already reported in reducing historic overspends.

The budget for 2025-26 includes plans to review out with authority placements within adult services with a view to bringing people home to be supported in their local community where appropriate following a review process.

Significant progress has been made to create a Market Position Statement that addresses housing needs for individuals with learning disabilities. This includes exploring different housing models and support options, and it remains a work in progress, with a final report due in July 2025. This will include actions required to ensure future financial sustainability, previous models have achieved savings in reducing residential based care with move to supported core and cluster accommodation.

Annual Accounts

The Annual Accounts set out the financial statements of the IJB for the year ended 31st of March 2025. The main purpose is to demonstrate the stewardship of the public funds that have been entrusted to the IJB for the delivery of its vision and strategic priorities as outlined in the Strategic Plan. The requirements governing the format and content of the Annual Accounts are contained in The Code of Practice on Local Authority Accounting in the United Kingdom (the Code), the Annual Accounts for 2024-25 have been prepared in accordance with this Code.

Financial Performance

This year's financial performance reflects the challenges in health and social care with demand increasing reflecting demographic pressures from an ageing population including ageing carers.

Financial information is part of the performance management framework with regular reporting of financial performance to the IJB. This year's financial reporting included regular updates on the financial impact and use of reserves to fund overspends that emerged this financial year. During the year regular financial monitoring reports including progress on transformation and improvement activity, proposals to utilise reserves and financial risks and any changes to the delegated budget were presented to the IJB.

Within community care and health there were significant overspends in delivering care in the community this includes community care nursing, transport, community care equipment store, and residential care placements. Allied Health Professionals continued to be underspent due to slippage in filling vacancies. Recruitment challenges have been mitigated through work on a Pan Ayrshire basis with open evenings, school careers fayres, collaboration with the higher education institutes (HEI's) and events to engage new graduates into employment, along with other opportunities for support roles and international recruitment options.

South Ayrshire has a high dependency ratio meaning there is less of a working age population available to support the ageing population. This year the HSCP continued to progress recruitment in care at home to provide additional capacity in the community to meet the demand from delayed transfers of care.

As well as increasing capacity, services to reduce the level of demand continued in year including the frailty team, reablement unmet need assessment team and Racecourse Road Intermediate Care Unit. These teams focus on supporting people to reduce their level of care needs and maintain their independence for longer, ultimately reducing the level of mainstream care required.

There continues to be an underspend in looked after children's placements, an anticipated demand in need for foster and kinship carers has not materialised, and we have continued to provide support for children in our neighbouring authorities. This can be attributed to the Whole Family, Whole System approach including the Signs of Safety training and Functional Family Therapy.

During the year young adults transitioned from children's services to adult services within community care and health resulting in a further underspend within children and justice services budget.

The overall financial performance against budget for the financial year 2024-25 (prior to earmarking) was an underspend of £1.203m, (£0.097m underspend in social care services and £1.106m in health services).

The IJB approved earmarking of £3.543m relating to specific funding allocations and improvement and innovation fund underspends to be carried forward to 2025-26. This was funded from the in-year underspend of £1.203m and £2.340m draw on uncommitted general reserves.

In the year 2024-25 there was a deficit on the provision of services of £6.406m as show in the Comprehensive Income and Expenditure Statement on page 48. This was a result of planned use of reserves to fund specific earmarked commitments in year. The IJB approved a transfer of the in year underspend and a change of use of general reserves to earmarked reserves for use in 2025-26.

The table below shows the use of each of the reserves balances in year, with £6.406m used in year to provide for services. The Budget for 2025-26 was approved on the 12th of March, this included £1.3m use of general reserves to be earmarked to bridge the budget gap in 2025-26, as noted in table below. The reserves statement is included in Note 8.

	Earmarked Reserves	General Reserves	Total Reserves
Opening Balance 1st April 24	13,231	4,237	17,468
Planned Use of Reserves	(7,609)	0	(7,609)
In Year underspend	1,203	0	1,203
Transfer to Earmark Reserves 24-25	2,340	(2,340)	0
Deficit on Provision of Services	(4,066)	(2,340)	(6,406)
Transfer to Earmark Reserves Budget 25-26	1,300	(1,300)	0
Closing Balance 31st March 25	10,465	597	11,062

It is essential that the IJB operates within the delegated budget and commissions services from the Council and Health Board on that basis. Significant pressures have emerged during this budget year which have been reflected in the Budget for 2025-26. Services continue to progress improvement activities to ensure best value. This work will continue and be built on moving into 2025-26.

Key successes for 2024-25 include:

- Improvement and Innovation Fund approval of £4.730m of projects to date, supporting development of new ways of working, and investing in early intervention approaches as well as supporting current demand and backlogs.

- Continued progress with reducing the number of children placed in family placements in 2024-25 has been achieved through transformation in Children Services.
- Investment in our internal care at home services increasing internal capacity to meet community care needs has progressed this year.
- Investment in new ways of working to provide care in the right place at the right time, such as AHP Front Doors and Occupational Therapists included in GP practices.
- Use of uncommitted reserves to fund in year emergent demand for residential care within adults and older people.

Strong financial leadership will continue to be required to ensure that future spend is contained within the budget resources available, and the IJB moved into 2025-26 with an approved balanced budget, recognising that the savings targets are challenging and the level of reserves available have significantly reduced to meet any unexpected financial pressures.

2023-24 Budget £000	2023-24 Actual £000	Variance (Adv) /Fav £000	Service	2024-25 Budget £000	2024-25 Actual £000	Variance (Adv) /Fav £000
82,358	81,184	1,174	Community Care and Health	89,410	90,522	(1,112)
46,083	46,082	1	Primary Care	46,560	46,632	(72)
38,363	36,558	1,805	Mental Health Services	39,690	40,735	(1,045)
26,720	24,497	2,223	Children and Justice	27,156	25,281	1,875
3,855	4,337	(482)	Hosted Services	3,967	4,565	(598)
781	675	106	Integrated Care Fund/Delayed Discharges	812	870	(58)
12,037	10,751	1,286	Support Services	11,502	10,428	1,074
210,197	204,084	6,113	TOTAL EXPENDITURE MANAGED BASIS	219,097	219,033	64
28,372	28,372	0	Acute Hospitals	34,488	34,488	0
55,243	54,064	1,179	Lead Partnership Allocations	61,272	60,133	1,139
293,812	286,520	7,292	TOTAL EXPENDITURE IJB	314,857	313,654	1,203
0	7,292	(7,292)	Total Earmarking	0	3,543	(3,543)
0	0	0	Draw on Reserves	0	(2,340)	2,340
293,812	293,812	0	OUTTURN ON AN IJB BASIS	314,857	314,857	0

The table above outlines the financial performance for 2023-24 and 2024-25. This highlights the actual financial outturn on a managed basis and IJB as a total including the acute hospitals, set aside budget. Adjustments have been made for the net impact of the lead partnership allocations across North, South and East Ayrshire and the Earmarked balances to be carried forward into 2025-26.

The main variances during 2024-25 are noted below:

Community Care and Health – overspend of £1.112m due to demographic demand resulting in overspends within residential care, community care nursing, care at home, community hospitals, and under recovery in income from charges offset with underspends in allied health professionals and purchased care at home both due to recruitment challenges.

Mental Health Services – overspend of £1.045m due to overspends in adult residential and community care packages, due to an increase in demand offset with funding allocations received for Alcohol and Drugs Partnership.

Children and Justice Services – underspend of £1.875m due to less than budgeted family placements and transition of young adults with additional support needs to adult services.

Hosted Services – overspend of £0.598m because of an increase in volume and costs to meet demand and supply issues of specific items of equipment.

Support Services – underspend of £1.074m due to delay in admin restructure and underspend in improvement and innovation projects to be earmarked into 2025-26.

Lead Partnership – underspend of £1.139m due to funding for Primary Care services and Mental Health Services to be earmarked into 2025-26.

Lead Partnership Services

The final outturn is adjusted to reflect the impact of Lead Partnership Services. During 2024-25 agreement was reached with the other Ayrshire partnerships that in the absence of detailed service activity information and alternative risk sharing arrangements that the outturn for all Lead Partnership services, with the exception of Primary Care Improvement Fund and Action 15, would be shared across the 3 partnerships on an NRAC (NHS Resources Allocation Committee) basis most suitable for the services they lead on. For North, lead partner for Mental Health Services, allocation based on Mental Health NRAC, East lead partner for Primary Care services, allocation based on Prescribing NRAC and for South lead partner for community store, family nurse partnership and continence team allocation based on Community NRAC.

The allocation for Primary Care Improvement Fund (PCIF) and Action 15 was based on actual activity information. The outturn of the lead partnership services for each IJB, prior to recharging other partnerships is provided below, this includes funds to be earmarked for Action 15 and Primary Care Improvement Fund (PCIF).

IJB	£'000	Lead Partnership Year End Position
South	(598)	Overspend
North	(658)	Overspend
East	2,119	Underspend

The following table is a summary of the Lead Partnership/ hosted services recharges for 2024-25. The recharges out are NRAC allocations of budget and actuals charged to East Ayrshire and North Ayrshire for services lead by South Ayrshire. The variance represents their share of the £0.598m hosted services overspend. The recharges in are NRAC allocations of budget and actuals charged to South Ayrshire for services lead by East Ayrshire and North Ayrshire. The variance is represented in the Lead Partnership underspend.

IJB	Annual Budget 2024/25 £'000	Actual Expenditure 2024/25 £'000	Variance 2024/25 £'000
South Ayrshire Hosted - income North Ayrshire	(1,466)	(1,687)	221
South Ayrshire Hosted - income East Ayrshire	(1,265)	(1,456)	191
Recharges out	(2,731)	(3,143)	412
East Ayrshire Lead - Contribution South Ayrshire	43,600	42,644	956
North Ayrshire Lead - Contribution South Ayrshire	20,405	20,634	(229)
Recharges in	64,005	63,278	727
Lead Partnership/hosted services	61,274	60,135	1,139

Set Aside

The Integration Scheme establishes that pressures in respect of large hospital set aside budgets will be managed in-year by NHS Ayrshire and Arran. The set aside allocation for this financial year is based on baseline of activity of average bed days in the four years 2016-17 to 2019-20 (pre-pandemic activity). The baseline bed days are costed based on actual 2024-25 actual costs. The table below highlights South Ayrshire's use of resources in Set Aside 2024-24 allocation was above the baseline budget share by £3.242m.

IJB	Baseline Bed Days %	Baseline Budget Share 2024-25 £m	Set Aside 2024-25 £m	Over / (Under) Baseline Share £m
East Ayrshire	28.9%	28.183	31.870	3.687
North Ayrshire	38.6%	37.807	39.966	2.159
South Ayrshire	32.5%	31.247	34.488	3.242
Total	100%	97.237	106.324	9.087

Financial Outlook, risks and plans for the future

The financial outlook remains uncertain due to the following financial and operational risks and pressures:

- Scottish Government settlement is on an annual basis;
- High levels of non-recurring funding for specific priorities;
- Pay pressures including NHS Pay Reform;
- Contract inflation pressures for commissioned providers and additional employers' national insurance contributions not funded;
- Workforce capacity issues impacting on delivery increased demand and complexity of care; and

The Scottish Government published their [Programme for Government 2024-25: Serving Scotland](#) in September 2024. This committed to focusing resources on four key priorities:

- Eradicating child poverty
- Growing the economy
- Tackling the climate emergency
- Ensuring high quality and sustainable public services

The programme committed to prioritise funding to increase the pay of workers in adult social care who are delivering direct care in commissioned services, early learning and childcare workers delivering funded hours, and children's social care workers, so they are at paid at least the Real Living Wage from April 2025.

Over the coming year, the Scottish Government are committed to work with partners to strengthen the performance of the National Health Service this includes tackling the waiting times and backlogs by delivering on Centre for Sustainability programmes, increasing Board's baseline funding and target additional funding to reduce the longest waits, improving timely access to cancer services. Provision of £120 million of additional funding to support continued improvements across a range of mental health services and treatments, including meeting the Child and Adolescent Mental Health Services.

The programme included commitments to continue to shift the balance of care to preventative and community support by increasing capacity and access to Primary Care, substantially reduce delayed discharges working with local health and social care partnerships through various initiatives including Hospital at Home. Progress the 36-hour working week for Agenda for Change staff, building on the initial 30-minute reduction in working hours implemented in 2024-25.

Prioritising prevention and tackling health inequalities by reducing deaths and level of harm caused by alcohol and drug deaths, through implementation of medication assisted treatment (MAT) standards, widening access to residential rehabilitation. Support families affected by drug and alcohol use.

The creation of an Improvement and Innovation fund approved by the IJB on the 14th of June 2023, is being used to investment in specific areas of need to alleviate financial pressures in future years, focussing on early intervention and prevention and tackling the recruitment challenges.

It is imperative that to manage the risks effective planning and managing of resources is prioritised. During 2024-25 the uncommitted reserves balance has reduced significantly to meet in year pressures, and to meet the budget gap in 2025-26.

The IJB does not have direct responsibility for assets including buildings and vehicles. South Ayrshire Council's net zero policy is aligned to the Scottish Government, aiming to achieve a 75% decrease in emissions by 2030. In the development of the new supported accommodation and enhancement of Cunninghame Place Children's house sustainable energy was used. This will feature in future planning of buildings and in the procurement of greener vehicles for use in the health and social care partnership.

Following on from engagement with communities and locality-based teams now well established, and using the valuable insight of local needs, work has already been progressed to identify what services are required to meet local needs. The implementation of the Connects hubs will further strengthen the locality-based working.

The Ageing Well Strategy and action plan is collaborating with communities to tackle issues in relation to South Ayrshire's ageing population, this includes helping people age better by planning activities to support social isolation, reduce frailty and promote use of technology. Over time these activities will reduce demand on mainstream social care services.

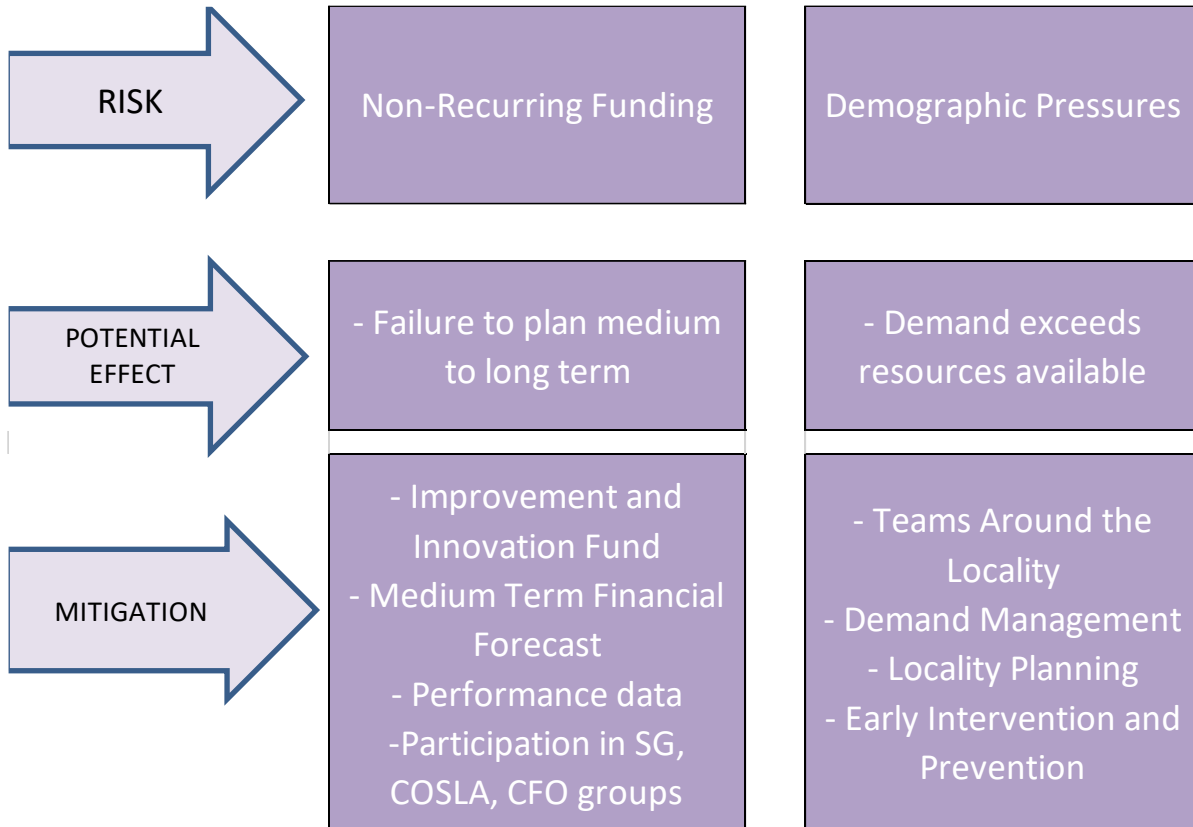
Workforce retention and recruitment continues to be a significant risk, ongoing recruitment for care at home during the year has resulted in an increase in capacity, this is funded on a temporary basis from reserves. To maintain capacity within the community will become financially challenging, with savings required from other service areas.

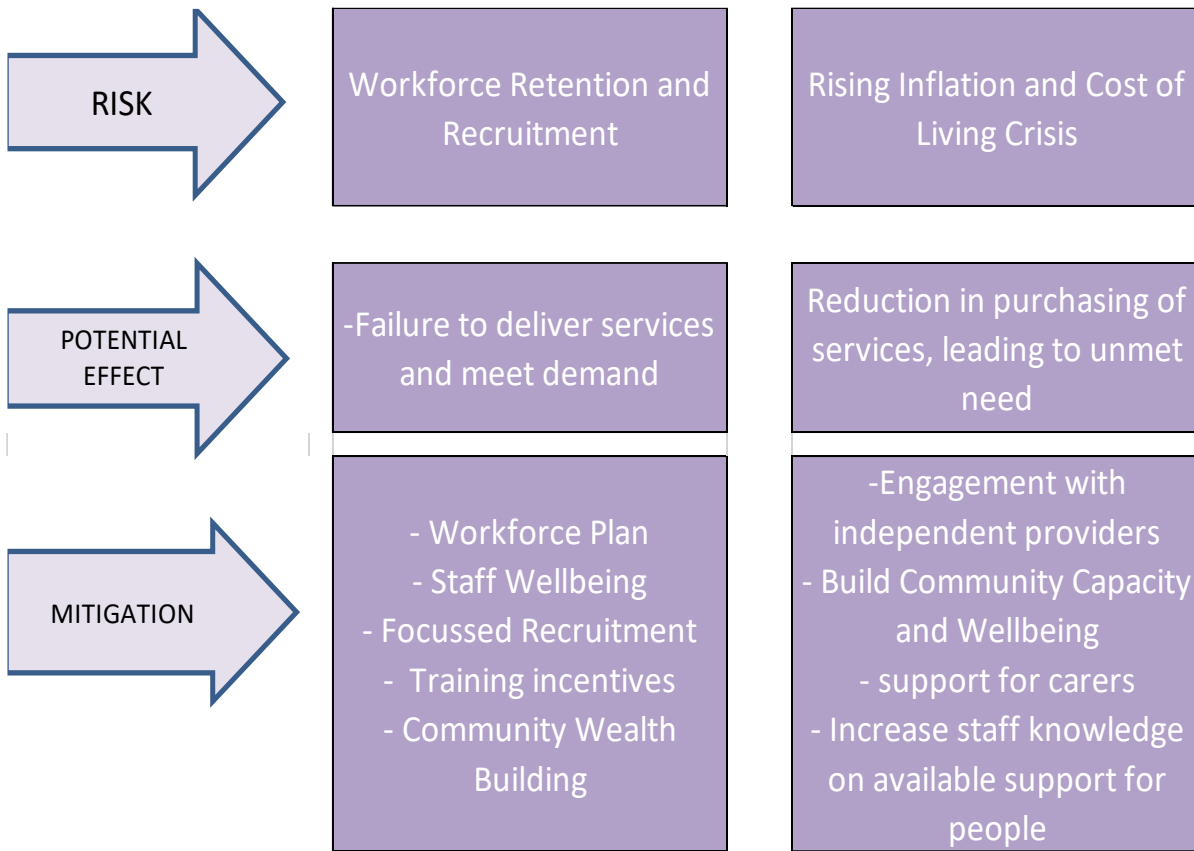
We plan to continue to build on our partnerships with Community Planning, VASA, Pan-Ayrshire HSCP's, Ayrshire College as well as Housing and Education to shape health and social care services specific to local needs.

Caring for Ayrshire is a programme of transformation led by NHS Ayrshire and Arran and the three Ayrshire IJB's to meet the vision of providing care as close to home as possible provides opportunities in development of new ways of working and delivering services that meet the needs in the localities within South Ayrshire.

The Ayrshire Growth Deal and benefits in Community Wealth Building are critical to supporting the local economy. The focus on community strength and resilience can deliver improved outcomes in our localities.

The tables below summaries the risk and effect of the risks along with how we plan to mitigate these risks.





2025-26 Budget

The approved budget included funding increases delegated from the local authority partner based on specific commitments set out in the Scottish Government finance settlement. The outcome of the settlement is shown below, with pressures to be funded in adult social care wage uplifts to commissioned services and free personal care and 40% of employers NIC funded for NHS and Social Care staff. The Scottish Government allocations announced in the budget for NHS were to provide 3% of uplift on baseline recurring budgets, the Scottish Government have committed to passing on any funding for NHS Pay Award above the 3% based on the finalised pay deal for 2025-26.

Additional budget pressures include additional costs of employers' national insurance increase, demand increase within residential care and increase in substitute prescribing costs.

	SAC	NHS A & A	Total
	£m	£m	£m
Funding Increase Delegated from Partners	(5.960)	(2.175)	(8.135)
Pressures to be Funded	9.548	5.000	14.548
Use of Reserves	(0.190)	(0.810)	(1.000)
Savings to be achieved	(3.398)	(2.015)	(5.413)
Budget Transfer	0.000	0.000	0.000

The budget balanced this year with use of reserves. Savings of £5.413m were also approved to achieve a balanced budget, these will be monitored throughout the year as part of the budget monitoring process, there is recognition that the savings target is challenging.

Included in the budget was an updated forecast of the budget gap to 2030-31, as noted in the table below. This is based on updated assumptions that future funding allocations will be for specific commitments, and any increase in demand and demographic pressures will require to be funded from savings.

BUDGET GAP					
FORECAST					
2026-27	2027-28	2028-29	2029-30	2030-31	TOTAL
£'000's	£'000's	£'000's	£'000's	£'000's	£'000's
(8,384)	(6,414)	(6,006)	(6,184)	(6,222)	(33,209)

Climate Change

The IJB has no direct responsibility for buildings or vehicles, these remain under the remit of the partner bodies', NHS Ayrshire and Arran and South Ayrshire Council. In line with the Climate Change (Scotland) Act 2009, partners complete an Annual Climate Change report and submit to the Sustainable Scotland Network (SSN) online portal. The report covers a variety of information on climate change activity, governance arrangements and emissions data for buildings and vehicles managed and maintained by each partner body.

The IJB as a public body also has a duty to submit an Annual Climate Change report, the latest 2023-24 report was submitted in November 2024. This report refers to each partner bodies' responsibilities and decisions with respect to the climate change agenda.

Although the IJB do not have direct responsibility for buildings or vehicles, consideration is given to climate change implications when redesigning and developing services.

Conclusion

The IJB has successfully overseen the delivery of all core services whilst managing demand and demographic challenges. The implementation of new services continues to shift the balance of care to the community, however maintaining this is becoming more financial challenging. Whilst workforce challenges remain our main risk area, all efforts are being taken to address and mitigating actions taken.

The financial position this year, reflects the increase in demand from an ageing population, whilst reflecting underspends in some areas from continued improvement and transformation in services focussing on early intervention and prevention and delivering models of care within the community has also resulted in underspends.

Moving into 2025-26, financial planning and continued effort in improving services through redesign and early intervention and prevention will progress. However financial contributions from partners will need to increase to ensure financially sustainability over the medium to long term.

The Medium-Term Financial Forecast for 2024-2028 outlines current improvement projects aligned to the Strategic Plan. The Improvement and Innovation Fund has invested in areas to continue to drive forward improvements and meet the needs of local communities.

Where to find more information

If you would like more information on IJB strategies, plans and policies and our performance and spending, please refer to <https://www.south-ayrshire.gov.uk/health-social-care-partnership>



Julie Dettbarn
Chair of the IJB
10 September 2025



Tim Eltringham
Chief Officer
11 September 2025



Lisa Duncan
Chief Finance Officer
10 September 2025

Statement of Responsibilities

Responsibilities of the Integration Joint Board

The Integration Joint Board is required to:

- Make arrangements for the proper administration of its financial affairs and to secure that the proper officer of the board has responsibility for the administration of those affairs of (section 95 of the Local Government (Scotland) Act 1973). In this IJB, that officer is the Chief Finance Officer.
- Manage its affairs to secure economic, efficient and effective user of resources and safeguard its assets.
- Ensure the Annual Accounts are prepared in accordance with legislation (The Local Authority Accounts (Scotland) Regulations 2014), and so far, as is compatible with that legislation, in accordance with proper accounting practices (section 12 of the Local Government in Scotland Act 2003).
- Approve the Annual Accounts.

I confirm that these Annual Accounts were approved at a meeting of South Ayrshire Integration Joint Board on 10th September 2025.

Signed on behalf of the South Ayrshire Integration Joint Board.



Julie Dettbarn

Chair of the IJB

10 September 2025

Statement of Responsibilities

Responsibilities of the Chief Finance Officer

The Chief Finance Officer is responsible for the preparation of the IJB's Annual Accounts in accordance with proper practices as required by legislation and as set out in the CIPFA/LASAAC Code of Practice on Local Authority Accounting in the United Kingdom (The Code).

In preparing the Annual Accounts, the Chief Finance Officer has:

- Selected suitable accounting policies that were reasonable and prudent;
- Made judgements and estimates that were reasonable and prudent;
- Complied with legislation; and
- Complied with the local authority code (in so far it is compatible with legislation).

The Chief Finance Officer has also:

- Kept proper accounting records which were up to date; and
- Taken reasonable steps for the prevention and detection of fraud and other irregularities.

I certify that the financial statements give a true and fair view of the financial position of the South Ayrshire Integration Joint Board as at 31st March 2025 and the transactions for the period covering 1st April 2024 to 31st March 2025.

Lisa Duncan

Lisa Duncan

Chief Finance Officer

10 September 2025

Annual Governance Statement

Introduction

The Annual Governance Statement explains the IJB's governance arrangements and reports on the effectiveness of the IJB's system of internal control. This is in line with the Code of Corporate Governance and meets the requirements of the 'Code of Practice for Local Authority Accounting in the UK: A Statement of Recommended Practice', in relation to the Statement on the System of Internal Financial Control.

The IJB has adopted governance arrangements consistent with the requirements of the Delivering Good Governance in Local Government Framework 2016 CIPFA and Solace (the Framework).

Scope of Responsibility

South Ayrshire IJB is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for and used economically, efficiently, and effectively.

The IJB is also responsible for putting in place proper arrangements for the governance of its affairs and facilitating the effective exercise of its functions, which includes arrangements for the management of risk.

In discharging this responsibility, the Chief Officer has put in place arrangements for governance which includes the system of internal control. Reliance is also placed on NHS Ayrshire and Arran Health Board and South Ayrshire systems of internal control that support compliance with both organisations' policies and practices as well those of the IJB. Such systems are designed to manage risk to a reasonable level but cannot eliminate the risk of failure to achieve policies, aims and objectives. It can therefore only provide reasonable but not absolute assurance of effectiveness.

Purpose of the Governance Framework

The governance framework comprises the systems and processes, and culture and values by which the IJB is directed and controlled and the activities through which it accounts to, and engages with, the community. It enables the IJB to monitor the achievement of its strategic priorities and to consider whether those priorities have led to the delivery of appropriate, cost-effective services.

The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of South Ayrshire IJB's policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively, and economically.

The Governance Framework

The Board of the IJB comprises voting members, nominated by either South Ayrshire Council or NHS Ayrshire and Arran Health Board, as well as non-voting members including a Chief Officer appointed by the Board.

The main features of the governance framework in place during 2024-25 are summarised below:

- **The IJB**, comprising all IJB Board members, is the key decision-making body. The IJB have met in person this year, with members of the public invited via social media with contact information provided and then a link to the online meeting sent to enable attendance. The IJB has two sub-committees – The Performance and Audit Committee (PAC) and the Strategic Planning Group (SPAG).
- During the year the IJB Chairperson Linda Semple (NHS Voting Member) transferred to the NHS Board temporarily from August to December, during this time Jean Ford (NHS Voting Member) was the IJB Chairperson and Councillor Hunter (SAC Voting Member) was Vice Chair during the year.
- During the year the IJB approved the Strategic Plan Refresh for 2025-28, this followed a period of consultation and engagement with people who use health and social care services, staff, carers the third sector, stakeholder organisations and the wider public, across all ages and localities.
- At the IJB on the 11th of June, Councillor Julie Dettbarn (SAC Voting Member) was nominated as Chair of the IJB and Jean Ford (NHS Voting Member) was nominated as Vice Chair of the IJB, it was agreed that the term of office for each of these positions would be two years.
- **The Performance and Audit Committee (PAC)** considered all matters in relation to Internal and External Audit, Risk Management and Performance and operates in accordance with “Audit Committees: Practical Guidance for Local Authorities and Police (CIPFA 2022 edition). The Chairperson for the PAC is nominated and agreed by the IJB and will be one of the IJB voting members from the alternative host organisation to that of the Current Chair of the IJB.
- This year Councillor Ramsay continued as the Chairperson of the Performance and Audit Committee.
- The PAC reviewed progress on actions against strategies and services including the Young Carers Strategy, Self-Directed Support improvement activities, Learning Disability Strategy, Adult Carers Strategy, and performance in services linked to the Strategic Objectives of the IJB.
- **The Strategic Planning and Advisory Group (SPAG)** has a role in linking locality planning partnerships to the strategic planning cycle of the IJB. The group advise on content of Strategic Plan and review and comment on the development of policies across the full range of delegated functions. In line with the Terms of Reference of SPAG the Chairperson will be the Vice Chairperson of the IJB.
- During the year Councillor Hunter remained as Chairperson of SPAG.
- This year progress reports on Locality Planning Partnerships (LLP) included information on the Team Around the Locality talks with LPP members aimed at increasing local understanding of health and social care activity. Participatory Budgeting events were held in partnership with Thriving Communities distributing funding to meet local priorities.

- Strategic decision-making is governed by the IJB's key constitutional documents including the Integration Scheme, standing orders, scheme of delegation to officers and financial regulations.
- The IJB Financial Regulations are available on the HSCP website, and all budget holders are required to adhere to the financial and procurement regulations and policies of both the NHS Ayrshire and Arran and South Ayrshire Council.
- The Integration Scheme established between South Ayrshire Council and NHS Ayrshire and Arran Health Board to integrate Health and Social Care services is the constitutional basis of the South Ayrshire IJB. The scheme sets out the process to determine financial contributions by partners to the IJB. This has been supplemented by directives from the Scottish Government for Health and Social Care Integration.
- During 2023-24 work a Programme Board was set up to provide strategic direction and ensure a consistent Pan-Ayrshire approach was taken to the review and refresh of the Schemes of Integration which are currently in place between the 3 Ayrshire Councils and NHS Ayrshire and Arran. Membership of the programme board consisted of the Chief Executives, IJB Chief Officers (in an advisory capacity) and the Health Board's Director of Transformation and Sustainability as well as the Chairs of each of the sub-groups.
- Five sub-groups were set up relating to specific workstreams – scope of services delegated, resources, governance and legal, care governance, communication, and engagement.
- Output from the sub-groups and any subsequent change to the Integrations Schemes was expected to be considered by the NHS Board and South Ayrshire Council during 2024-25, this has not been actioned during 2024-25 and will carry forward into 2025-26.
- **Locality Planning Partnerships** have been established in six localities within South Ayrshire, and allow for more direct, locality-focused liaison with the community in relation to the planning of health and care services and feed into the work of the Strategic Planning Advisory Group. The structural changes that have been implemented and the creation of Teams around the Locality are now firmly established. This builds on our aim towards changing the balance of care by growing capacity in local communities and developing local assets to help deliver the National Outcomes for Health and Social Care.
- **The Health and Care Governance Group** chaired by the Director of Health and Social Care, continued to meet online during the year. The group is supported by a Social Work Governance Group and NHS sub-structures. This year the group has been working on infection prevention control in response to new governance arrangements within the NHS.
- **The Social Work Governance Group (SWGB)** chaired by the Chief Social Work Officer and contributes to the overall Health and Care Governance Framework. The group specifically maintains oversight of key workstreams to provide oversight and accountability for the quality of health and care services. The SWGB comprises Social Work Professional Leads and supports the discharge of the function of the Chief Social Work Officer by fulfilling a governance function for all social work and social care services.

- **The South Ayrshire Chief Officers Group (COG)** offers the primary governance for public protection matters in South Ayrshire. The group consists of the Chief Executives of SAC and NHS Ayrshire & Arran as well as the Divisional Commander from Police Scotland. The COG is supported by a range of officers including the Chief Officer, Chief Social Work Officer and the Nurse Director as well as independent chairs from APC and CPC. The COG meets four times annually.
- **South Ayrshire Health and Social Care Directorate Management Team (DMT)** meets on a regular basis and has continued as three times a week to discuss operational and strategic matters.
- The IJB has adopted a “Code of Conduct for Members of Devolved Public Bodies” for all its board members and a register of members’ interests has been established. There have been regular briefing sessions this year keeping members up to date and informed of specific pieces of work. This year this included presentations on frailty work “staying ahead of the curve,” the ageing well strategy development and action plan, projects approved with the improvement and innovation fund, implementation of the Connects service, progress on The Promise and the work of the Alcohol and Drug Partnership.

The System of Internal Control

The governance framework described operates on the foundation of internal controls. The system of internal financial control is based on a framework of regular management information, financial regulations, administrative procedures (including segregation of duties), management supervision, and a system of delegation and accountability. Development and maintenance of these systems is supported by NHS Ayrshire & Arran and South Ayrshire Council in relation to the operational delivery of health and social care services. In particular, these systems include:

- Financial regulations and codes of financial practice;
- Comprehensive budgeting systems;
- Regular reviews of periodic and annual financial reports that indicate financial performance against the forecasts;
- Setting targets to measure financial and other performance;
- Formal project management disciplines; and
- An effective Internal Audit function.

The IJB’s financial management arrangements conform to the governance requirements of the CIPFA statement: ‘The Role of the Chief Finance Officer in Local Government (CIPFA 2016) and the CIPFA Code of Practice on Managing the Risk of Fraud and Corruption.

Review of Adequacy and effectiveness

The Chief Internal Auditor of the IJB is also the Chief Internal Auditor of South Ayrshire Council and reports directly to the IJB Performance and Audit Committee on all audit matters, with the right of access to the Chief Officer, Chief Finance Officer and Chair of the Performance and Audit Committee on any matter.

During 2024-25 Internal Audit operated in accordance with the Public Sector Internal Auditor Standards (PSIAS) requirements and is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

PSIAS requires that a Quality Assurance and Improvement Programme (QAIP) is developed and maintained to provide assurance that internal activity is conducted in accordance with an Internal Audit Charter, that it operates in an efficient and effective manner and that it is perceived to be adding value and improving operations. In 2024-25 Internal Audit operates within the Internal Audit Charter, approved by South Ayrshire Council's Audit and Governance Panel on the 20th of March 2024.

The Quality Assurance and Improvement Programme (QAIP) covers all aspects of Audit Services, including periodic internal self-assessments and five-yearly External Quality Assessments (EQA). Since the PSIAS came into effect in April 2013, annual self-assessments have been performed by the Chief Internal Auditor. The latest EQA (2018), has been completed and reported to the Council's Audit and Governance Panel on the 29th of May 2024. The results of the EQA were broadly in line with the 2024-25 self-assessment. The overall conclusion was that Internal Audit fully conforms with 10 areas and generally conforms with 4 areas. There were no areas assessed as partially or not conforming. An action plan containing seven improvement actions in relation to low priority areas was prepared and fully implemented by the due date of 31 March 2025.

New Global Internal Audit Standards (GIAS) which became effective from January 2025 have been developed and the existing PSIAS updated to reflect the new standards within a UK public sector context. The new standards will be referred to the GIAS in the UK Public Sector and all future QAIPs will assess compliance with the new standards.

It is the responsibility of the Chief Internal Auditor to provide an annual internal audit opinion on the overall adequacy and effectiveness of the framework of governance, risk management and control. The Chief Internal Auditor presented her opinion to the IJB's Performance and Audit Committee on the 25th of June 2025.

The IJB uses the systems of the Council and NHS Ayrshire & Arran to manage its financial records. The main objectives of the IJB's framework of internal control systems are:

- to ensure adherence to management policies and directives in order to achieve the organisation's objectives;
- to safeguard assets;
- to ensure the relevance, reliability, and integrity of information, so ensuring as far as possible the completeness and accuracy of records; and
- to ensure compliance with statutory requirements.

Any system of control can only ever provide reasonable and not absolute assurance that control weaknesses or irregularities do not exist or that there is no risk of material errors, losses, fraud, or breaches of laws or regulations. Accordingly, the partners of the IJB are continually seeking to improve the effectiveness of its governance arrangements and systems of risk management and internal control.

The Chief Auditor's Opinion on the overall adequacy and effectiveness of South Ayrshire Integration Joint Boards framework of governance, risk management and control were informed from the following sources:

- The audit work undertaken by South Ayrshire Council's Internal Audit and Corporate Fraud team in previous years, during the year to 31st March 2025 and in the period after the year-end to date;
- The NHS Ayrshire & Arran Health Board's assurance taken from audit work undertaken to date by the appointed internal auditors, Azets during the year to 2024-25. Azets internal audit methodology is aligned to PSIAS;
- Work undertaken by the partners' external auditors; and
- Chief Internal Auditor's knowledge of the Board's activities for the year 2024-25.

Based on the above, reasonable assurance can be placed on the adequacy and effectiveness of the IJB's framework of governance, risk management and control arrangements for the year ending 31st March 2025.

Achievement of Annual Internal Audit Plan 2024-25

The internal audit function activity during the year was undertaken in accordance with the approved annual internal audit plan. The plan included a review of Business Continuity and Resilience.

The objective of this review was to ensure there are adequate arrangements in place within the South Ayrshire Health and Social Care Partnership (HSCP) to adequately respond to unexpected events or emergencies and continue to provide critical services. Testing was concluded and the audit opinion of reasonable assurance was provided regarding the business continuity process and oversight within HSCP, the final report and action plan was issued in August 2025.

Assurance over the South Ayrshire IJB's internal control arrangements are also reliant on the core systems within the Council operating effectively. The core systems work carried out in 2024-25 for the Council included reviews around controls within the new Fusion System in relation to Main Accounts, Human Resources and Payroll, Procurement, and continuous auditing of customer payments. The three Fusion system audit reviews resulted in reasonable assurance and continuous auditing in substantial assurance. A review of the CM2000 system was also completed for South Ayrshire's HSCP in 2024-25. The objective of this assignment was to obtain assurance that the system objectives included within the CM2000 project's business case were achieved. The final report and action plan was issued in July 2025, with an audit opinion of reasonable assurance provided regarding delivery of the key objectives recorded within the business case in relation to internal and external provider scheduling and monitoring and some operational improvements to service delivery have been achieved.

The Council also participated in the latest National Fraud Initiative which included investigations in relation Creditors and Payroll.

Progress on Actions

This year has resulted in steady progression to some of the actions identified in last year's annual accounts.

- A training session was held on internal control systems prior to the 2024-25 annual self-assessment. In attendance were managers and business support staff, this year there was an improvement on completion of the self-assessment and a greater understanding of the annual self-assessment exercise;
- During the year focus remained on Delayed Transfer of Care performance with operational meetings daily and strategic meetings on a fortnightly basis;

- The IJB were kept up to date on actions being taken to mitigate DTOC, with regular updates in the Chief Officers report, IJB Briefings and reports to Performance and Audit Committee;
- Development of Performance reporting has continued during the year, with AHP's data dashboard now being used to collect and analyse trends in performance; and
- South Ayrshire IJB Governance Handbook was published in February 2025, and consolidates the governance arrangements in South Ayrshire into a single resource. The handbook was developed as a form of good practice to consolidate already agreed arrangements into a single document. The handbook will act as a practical reference guide for the South Ayrshire IJB covering a range of governance themes designed in short sections, which can be used for continual board development and for new officers.

Further Actions

The IJB has identified the following actions for 2025-26 that will assist with the further strengthening of corporate governance arrangements:

- Progress further the Commissioning Plan for the set aside budget, this action remains outstanding and will be developed further when outcomes of various improvement work are validated;
- Continue to monitor actions to improve performance with particular attention to areas highlighted as concerning in the 2024-25 Performance Achievements section of this report;
- Update the Medium-Term Financial Forecast following publication of the Scottish Governments Health and Social Care Medium Term Financial Strategy this financial year; and
- Develop financial training and refine financial reporting at budget holder level to ensure financial challenges are clearly understood and governance arrangements are in place to manage budgets effectively.

Conclusion and Opinion on Assurance

Subject to the above actions, and based on the assurances provided, we consider the governance and internal control environment operating during 2024–25 to provide reasonable and objective assurance that any significant risks impacting on the achievement of our actions will be identified and actions taken to avoid or mitigate their impact.

Systems are in place to continually review and improve the governance and internal control environment and action plans are in place to address identified areas for improvement.

The Annual Governance Statement explains how South Ayrshire IJB complies with the Code of Corporate Governance and meets the requirements of the CIPFA / SOLACE Framework 'Delivering Good Governance in Local Government 2016' and the 'Code of Practice for Local Authority Accounting in the UK: A Statement of Recommended Practice', in relation to the Statement on the System of Internal Financial Control.

South Ayrshire IJB is required to conduct, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review is informed by the work

of the HSCP's Senior Management Team (who have responsibility for the development and maintenance of the internal control framework environment), the work of the internal auditors and the Chief Internal Auditor's annual report and reports from external auditors and other review agencies and inspectorates.

In preparing the Annual Governance Statement, the Integration Joint Board considered both NHS A&A and South Ayrshire Council's Annual Governance Statements. There were no issues arising which require any further disclosure in the Integration Joint Board's Governance Statement.

The draft Annual Governance Statement was approved by the Integrated Joint Board on the 11th of June 2025 and finalised version approved by Performance and Audit Committee on the 25th of June 2025.

Tim Eltringham

Tim Eltringham

Chief Officer

11 September 2025

Julie Dettbarn

Julie Dettbarn

Chair of the IJB

10 September 2025

Remuneration Report

Introduction

This remuneration report is provided in accordance with the Local Authority Accounts (Scotland) Regulations 2014. It discloses information relating to the remuneration and pension benefits of specified IJB members and staff.

The information in the tables below is subject to external audit. The explanatory text in the Remuneration Report is reviewed by the external auditor to ensure it is consistent with the financial statements.

Remuneration: IJB Chair and Vice Chair

The IJB comprises voting members appointed through nomination in equal numbers by NHS Ayrshire & Arran and South Ayrshire Council. A Chair and Vice Chair are appointed in accordance with the Integration Scheme and the Public Bodies (Joint Working) (Integration Joint Boards) (Scotland) Order 2014. As required in Article 4 of the Order the nomination of the IJB Chair and Vice Chair post holders' alternates between a Council and Health Board representative, with the Vice Chair appointment by the constituent authority who did not appoint the Chair. Under the terms of the scheme the posts were required to rotate between Council and NHS Board this year.

The integration scheme Section 2.4.2. states "The appointment to Chairperson and Vice Chairperson is time limited to a period not exceeding three years and carried out on a rotational basis. The term of office of the first Chairperson and Vice Chairperson will be for the period to the local government elections in 2017, thereafter the term of office of the Chairperson and Vice Chairperson will be for a period of two years."

The most recent Chairperson, Linda Semple was nominated by NHS Ayrshire and Arran on the 15th of June 2022, and the Vice Chairperson was drawn from the SAC nominees to the IJB. Cllr Lyons was the new IJB Vice Chairperson nominated at that time, he was replaced by Cllr Hunter on the 29th of October 2023 following nomination by South Ayrshire Council. It was agreed the term of office for the Chairperson and Vice Chairperson be 3 years.

As the most recent Chair of the IJB was nominated by NHS Ayrshire and Arran and has now served the maximum 3-year term, a new chair must be nominated from South Ayrshire Council. A proposal was brought forward to the IJB meeting on the 11th of June 2025, Cllr Julie Dettbarn was nominated as IJB Chairperson from South Ayrshire Council nominees and Jean Ford was nominated as Vice Chairperson from NHS nominees. It was also proposed the term of office for Chairperson and Vice-Chairperson be 2 years as per the integration scheme. Both proposals were approved by the IJB at the meeting.

The IJB does not provide any additional remuneration to the Chair, Vice Chair or any other board members relating to their role on the IJB. The IJB does not reimburse the relevant partner organisations for any voting board member costs borne by the partner. There were no taxable expenses paid by the IJB. Therefore, no remuneration disclosures are provided for the Chair or Vice Chair.

The IJB does not have responsibilities, either in the current year or in future years, for funding any pension entitlements of voting IJB members. Therefore, no pension rights disclosures are provided for the Chair or Vice Chair.

Remuneration: Senior Officers of the IJB

The IJB does not directly employ any staff in its own right, however specific post-holding officers are non-voting members of the Integration Joint Board.

Chief Officer

The appointment of an Integration Joint Board Chief Officer is required by section 10 of the Public Bodies (Joint Working) (Scotland) Act 2014 which includes the statement “an Integration Joint Board is to appoint, as a member of staff, a chief officer”. The Chief Officer for the IJB has to be appointed and the employing partner has to formally second the officer to the IJB. The employment contract for the Chief Officer adheres to the legislative and regulatory framework of the employing partner organisation. The remuneration terms of the Chief Officer’s employment are approved by the IJB.

Other Officers

No other staff are appointed by the IJB under a similar legal regime. Other non-voting board members who meet the criteria for disclosure are included in the disclosures below. Both the Chief Officer and the Chief Finance Officer are employed by South Ayrshire Council.

Total remuneration 2023–24 £	Name and post title	Salary, fees and allowances * £	Taxable expenses £	Total remuneration 2024–25 £
133,376	Tim Eltringham Chief Officer	138,177	0	138,177
69,132	Lisa Duncan Chief Finance Officer	71,614	0	71,614
202,509	Total	209,790	0	209,790

In respect of officers’ pension benefits the statutory liability for any future contributions to be made rests with the relevant employing partner organisation. On this basis there is no pensions liability reflected on the IJB balance sheet for the Chief Officer or any other officers.

The IJB however has responsibility for funding the employer contributions for the current year in respect of the officer time spent on fulfilling the responsibilities of their role on the IJB. The following table shows the IJB’s funding during the year to support officers’ pension benefits. The table also shows the total value of accrued pension benefits which may include benefits earned in other employment positions and from each officer’s own contributions.

	In Year pension contributions			Accrued pension benefits		
	Year to 31/03/2024 £	Year to 31/03/2025 £		As at 31/03/2024	As at 31/03/2025	Difference from 31/03/2024
Tim Eltringham	25,742	9,664	Pension	78,680	85,095	6,415
Chief Officer			Lump Sum	121,695	126,075	4,381
Lisa Duncan	13,343	5,009	Pension	5,871	20,007	14,135
Chief Finance Officer			Lump Sum	0	0	0
Total	39,084	14,673	Pension	84,551	105,102	20,551
			Lump Sum	121,695	126,075	4,381

Disclosure by pay bands

As required by the regulations, the following table shows the number of persons whose remuneration for the year was £50,000 or above, in bands of £5,000.

Number of employees in 2023–24	Remuneration band	Number of employees in 2024–25
0	£135,000 - £139,999	1
1	£130,000 - £134,999	0
0	£70,000 - £74,999	1
1	£65,000 - £69,999	0

Exit Packages

There have been no exit packages in 2023-24 or 2024-25.

Tim Eltringham

Tim Eltringham
Chief Officer
11 September 2025

Julie Dettbarn

Julie Dettbarn
Chair of the IJB
10 September 2025

Financial Statements

The **Comprehensive Income and Expenditure Statement** shows the cost of providing services for the year according to accepted accounting practices.

2023-24			Service	2024-25		
Gross Expenditure	Gross Income	Net Expenditure		Gross Expenditure	Gross Income	Net Expenditure
£000	£000	£000		£000	£000	£000
84,723	-	84,723	Community Care and Health	94,779	-	94,779
83,237	-	83,237	Primary Care	86,234	-	86,234
54,528	-	54,528	Mental Health Services	61,580	-	61,580
25,414	-	25,414	Children and Justice Services	26,280	-	26,280
675	-	675	Integrated Care Fund/Delayed Discharges	870	-	870
10,718	-	10,718	Support Services	10,394	-	10,394
28,372	-	28,372	Acute Hospitals	34,488	-	34,488
33	-	33	IJB Operational Costs	34	-	34
287,700	0	287,700	Cost of Services	314,659	0	314,659
-	(94,280)	(94,280)	South Ayrshire Council Funding	-	(102,743)	(102,743)
-	(191,059)	(191,059)	NHS Ayrshire & Arran Funding	-	(205,511)	(205,511)
0	(285,339)	(285,339)	Total Taxation And Non-Specific Grant Income (note 5)	-	(308,254)	(308,254)
287,700	(285,339)	2,361	(Surplus) or Deficit on Provision of Services	314,659	(308,254)	6,406

The Financial Performance section of the Management Commentary highlights the outturn is £1.203m less than the budget delegated to the IJB. The Comprehensive Income and Expenditure Statement has taken account of £7.609m use of reserves allocated in 2024-25 netted off with £1.203m in year underspend against budget to produce a deficit on provision of services of £6.406m.

There are no statutory or presentation adjustments which affect the IJB's application of the funding received from partners. The movement in the General Fund balance is therefore solely due to the transactions shown in the Comprehensive Income and Expenditure Statement. Consequently, an Expenditure and Funding Analysis is not provided in these annual financial statements.

The **Movement in Reserves Statement** shows the movement in the year on the IJB's reserves. The movements which arise due to statutory adjustments which affect the General Fund balance are separately identified from the movements due to accounting practices. Note 8 Useable Reserve – General Fund provides detail of specific movements in reserves during the year.

Movement in Reserves	General Fund Balance 2024–25	Earmarked Reserves 2024–25	Total Reserves 2024–25
	£000	£000	£000
Opening balance as at 1 April 2024	4,237	13,231	17,468
Total Comprehensive Income and Expenditure	(3,640)	(2,766)	(6,406)
Adjustments between accounting basis and funding basis under regulations	0	0	0
Increase or (decrease) in year	(3,640)	(2,766)	(6,406)
Closing Balance as at 31 March 2025	597	10,465	11,062

The closing balance in the General Fund on the 31st of March 2025, represents an in year decrease of £3.640m this includes £2.340m transferred to earmarked reserves and a further £1.3m earmarked to meet budget gap in 2025-26.

Movement in Reserves	General Fund Balance 2023–24	Earmarked Reserves 2023–24	Total Reserves 2023–24
	£000	£000	£000
Opening balance as at 1 April 2023	7,297	12,532	19,829
Total Comprehensive Income and Expenditure	(3,060)	699	(2,361)
Adjustments between accounting basis and funding basis under regulations	0	0	0
Increase or (decrease) in year	(3,060)	699	(2,361)
Closing Balance as at 31 March 2024	4,237	13,231	17,468

The **Balance Sheet** shows the value of the IJB's asset and liabilities as at the balance sheet date. The net assets of the IJB (assets less liabilities) are matched by the reserves held by the IJB.

31 March 2024 £000		Notes	31 March 2025 £000
17,468	Short Term Debtors	6	11,062
0	Short Term Creditors	7	0
17,468	Net Assets		11,062
17,468	Usable Reserve: General Fund	8	11,062
17,468	Total Reserves		11,062

The Statement of Accounts present a true and fair view of the financial position of the Integration Joint Boards as at 31st March 2025 and its income and expenditure for the year then ended.

The unaudited accounts were issued on the 30th of June 2025 and the audited accounts were authorised for issue on the 10th of September 2025.

Lisa Duncan

Lisa Duncan

Chief Finance Officer

10 September 2025

Notes to the Financial Statements

Note 1 – Significant Accounting Policies

General principles

The Financial Statements summarise the authority's transactions for the 2024-25 financial year and its position at the year-end as at 31st March 2025.

The South Ayrshire IJB was established under the requirements of the Public Bodies (Joint Working) (Scotland) Act 2014 and is a Section 106 body as defined in the Local Government (Scotland) Act 1973.

The Financial Statements are therefore prepared in compliance with the Code of Practice on Local Authority Accounting in the United Kingdom 2024–25, supported by International Financial Reporting Standards (IFRS), unless legislation or statutory guidance requires different treatment.

The annual accounts are prepared on a going concern basis, which assumes that the IJB will continue in operational existence for the foreseeable future. The historical cost convention has been adopted.

Accruals of expenditure and income

Activity is accounted for in the year that it takes place, not simply when cash payments are made or received. In particular:

- Expenditure is recognised when goods or services are received, and their benefits are used by the IJB.
- Income is recognised when the IJB has a right to the income, for instance by meeting any terms and conditions required to earn the income, and receipt of the income is probable.
- Where income and expenditure have been recognised but settlement in cash has not taken place, a debtor or creditor is recorded in the Balance Sheet.
- Where debts may not be received, the balance of debtors is written down.

For the Integration Joint Board financial statements, a debtor and/or creditor will be recorded where the partner contributions differ from the actual net expenditure in year, this allows any surplus or deficit on the provision of services to be transferred to the reserves held by the Integration Joint Board.

Funding

The IJB is primarily funded through contributions from the statutory funding partners, South Ayrshire Council and NHS Ayrshire & Arran. Expenditure is incurred as the IJB commissions specified health and social care services from the funding partners for the benefit of service recipients in South Ayrshire.

Cash and cash equivalents

The IJB does not operate a bank account or hold cash. Transactions are settled on behalf of the IJB by the funding partners. Consequently, the IJB does not present a 'Cash and Cash Equivalent' figure

on the balance sheet. The funding balance due to or from each funding partner as at 31st March is represented as a debtor or creditor on the IJB's Balance Sheet.

Employee benefits

The IJB does not directly employ staff. Staff are employed by the funding partners who retain the liability for pension benefits payable in the future. The IJB therefore does not present a Pensions Liability on its Balance Sheet.

The IJB has a legal responsibility to appoint a Chief Officer. More details on the arrangements are provided in the Remuneration Report. The charges from the employing partner are treated as employee costs. Where material the Chief Officer's absence entitlement at 31st March is accrued, for example in relation to annual leave earned but not yet taken.

Reserves

The Integration Joint Board's reserves are classified as either Usable or Unusable Reserves. The IJB's only Usable Reserve is the General Fund. The balance of the General Fund as at 31st March shows the extent of resources which the IJB can use in later years to support service provision.

Indemnity insurance

The IJB has indemnity insurance for costs relating primarily to potential claim liabilities regarding Board member and officer responsibilities. NHS Ayrshire & Arran and South Ayrshire Council have responsibility for claims in respect of the services that they are statutorily responsible for and that they provide.

Unlike NHS Ayrshire & Arran, the IJB does not have any 'shared risk' exposure from participation in CNORIS (Clinical Negligence and Other Risks Indemnity Scheme). The IJB participation in the CNORIS scheme is therefore equivalent to normal insurance arrangements.

Known claims are assessed as to the value and probability of settlement. Where it is material the overall expected value of known claims taking probability of settlement into consideration, is provided for in the IJB's Balance Sheet.

The likelihood of receipt of an insurance settlement to cover any claims is separately assessed and, where material, presented as either a debtor or disclosed as a contingent asset.

VAT Status

The IJB is a non-taxable body and does not charge or recover VAT on its functions.

NOTE 2 – Critical Judgements and Estimation Uncertainty

The critical judgements made in the Financial Statements relating to complex transactions are:

- In applying the accounting policies, the IJB has had to make a critical judgement relating to the values included for Set Aside services. The Set Aside figure included in the IJB Financial Statements in 2024-25 is based upon work undertaken by the Ayrshire Finance Leads group to establish the baseline resource for each Partnership and how this compares to the NRAC 'fair share' of resources. A model has been created to update Set Aside activity and values on a quarterly basis, to map activity data (bed days, admissions, discharges) against costs across the six specialties at the various Acute services locations. The Set Aside values included in the 2024-25 Annual Accounts are

based on baseline activity levels of average bed days in the four years 2016-17 to 2019-20 (pre-pandemic years) at actual costs 2024-25, the Set Aside figure included in the accounts does not reflect the true cost of actual activity for 2024-25.

- On behalf of all IJBs within the NHS Ayrshire and Arran area, the IJB acts as the lead partner for the Community Equipment Services, Continence Services and Family Nurse Partnership. It commissions services on behalf of the three Ayrshire IJBs and reclaims the costs involved. This arrangement is treated as an agency arrangement. In the absence of an alternative agreement or approach being outlined in the Integration Scheme, the recharges across the partnerships for lead services are based on an NRAC share of costs, this may not reflect the actual cost of delivering services to the population in the three areas.

There are no material estimation uncertainties included within the Financial Statements.

NOTE 3 – Events After The Reporting Period

The audited annual financial statements will be authorised for issue by the Chief Finance Officer on 10th September 2025. Events taking place after this date are not reflected in the financial statements or notes.

Events after the Balance Sheet date are those events, both favourable and unfavourable, that occur between the end of the reporting period and the date when the Annual Accounts are authorised for issue. Two types of events can be identified:

- Those that provide evidence of conditions that existed at the end of the reporting period the financial statements are adjusted to reflect such events; and
- Those that are indicative of conditions that arose after the reporting period – the financial statements are not adjusted to reflect for such events, but where a category of events would have a material impact disclosure is made in the notes of the nature of the events and their estimated financial effect.
- The Chief Financial Officer is not aware of any such events that require disclosing.

NOTE 4 – Expenditure and Income Analysis by Nature

2023–24		2024–25
£000's		£000's
117,327	Services commissioned from South Ayrshire Council	128,309
170,164	Services commissioned from NHS Ayrshire & Arran	186,153
176	Other IJB Operating Expenditure	163
33	Auditor Fee: External Audit Work	34
(285,339)	Partners Funding Contributions and Non-Specific Grant Income	(308,254)
2,361	(Surplus)/Deficit on the Provision of Services	6,406

NOTE 5 – Taxation and Non-Specific Grant Income

2023–24		2024–25
£000's		£000's
(94,280)	Funding Contribution from South Ayrshire Council	(102,743)
(191,059)	Funding Contribution from NHS Ayrshire & Arran	(205,511)
(285,339)	Taxation and Non-specific Grant Income	(308,254)

The funding contributions from the partners shown above include funding which is ring-fenced for the provision of specific services. Such ring-fenced funding is presented as income in the Cost of Services in the Comprehensive Income and Expenditure Statement.

The funding contribution from NHS Ayrshire & Arran shown above includes £34.488m (2023–24 £28.372m) in respect of 'set aside' resources relating to acute hospital and other resources. These are provided by the NHS which retains responsibility for managing the costs of providing the services. The IJB however has responsibility for the consumption of, and level of demand placed on, these resources.

NOTE 6 – Debtors

31 March 2024 £000's		31 March 2025 £000's
15,449	South Ayrshire Council	9,618
2,019	NHS Ayrshire & Arran	1,445
17,468	Total Debtors	11,062

Amounts owed from the funding partners are stated on a net basis. Debtor and Creditor balances recognised by the funding partners but not yet settled in cash terms are offset against the funds they are holding on behalf of the Integration Joint Board.

NOTE 7 – Creditors

31 March 2024 £000's		31 March 2025 £000's
0	South Ayrshire Council	0
0	NHS Ayrshire & Arran	0
0	Total Creditors	0

NOTE 8 – Usable Reserve: General Fund

The IJB holds a balance on the General Fund which will normally comprise one of three elements:

- As a working balance to help cushion the impact of uneven cash flows.
- As a contingency to manage the impact of unexpected events or emergencies.
- As a means of building up funds, often referred to as earmarked reserve, to meet known or predicted liabilities.

The table below shows the movements on the General Fund balance, analysed between those elements earmarked for specific planned expenditure and the amount held in unallocated reserves.

The IJB held £11.062m in reserves as at 31st March 2025, earmarked for specific planned expenditure as detailed, this includes the Improvement and Innovation Fund of £4.647m committed to be used over three-year period to invest in specific projects aimed to support future financial sustainability. At the end of the year there was balance of £0.597m remaining unallocated in the General Fund.

2023-24				2024-25			
Balance at 31 March 2023	Transfers Out 2023-24	Transfers In 2023-24	Balance at 31 March 2024		Transfers Out 2024-25	Transfers In 2024-25	Balance at 31 March 2025
£000's	£000's	£000's	£000's		£000's	£000's	£000's
Earmarked Funds							
423	(423)	193	193	ADP	(193)	119	119
0	0	203	203	PCIF	(203)	636	636
370	(370)	231	231	Primary Care Other	(231)	283	283
0	0	110	110	Action 15	(110)	100	100
809	(809)	461	461	Mental Health Recovery and Renewal	(461)	426	426
291	(291)	0	0	Covid 19	0		0
371	(371)	132	132	Community Living Fund	(132)	0	0
5,722	(6,897)	7,265	6,090	Approved Earmarked	(4,313)	2,477	4,254
4,546	(1,039)	2,304	5,811	Improvement and Innovation Fund Committed	(1,966)	802	4,647
12,532	(10,200)	10,899	13,231	Total Earmarked	(7,609)	4,843	10,465
7,297	(5,180)	2,120	4,237	Unallocated General Fund	(3,640)	0	597
7,297	(5,180)	2,120	4,237	Total General Fund Reserves	(3,640)	0	597
19,829	(15,380)	13,019	17,468	Total Reserves	(11,249)	4,843	11,062

NOTE 9 – Agency Income and Expenditure

On behalf of all IJBs within the NHS Ayrshire & Arran area, the IJB acts as the lead manager for Community Equipment Services, Continence Services and Family Nurse Partnership. It commissions services on behalf of the other IJBs and reclaims the costs involved. The payments that are made on behalf of the other IJBs, and the consequential reimbursement, are not included in the Comprehensive Income and Expenditure Statement (CIES) since the IJB is not acting as principal in these transactions.

The amount of expenditure and income relating to the agency arrangements is shown below.

2023-24 £000's		2024-25 £000's
3,855	Expenditure on Agency Service - Lead Partnership	3,967
(3,855)	Reimbursement for Agency Services - Lead Partnership	(3,967)
0	Net Agency Expenditure Excluded from the CIES	0

NOTE 10 – Related Party Transactions

The IJB has related party relationships with NHS Ayrshire and Arran and South Ayrshire Council. In particular the nature of the partnership means that the IJB may influence, and be influenced by, its partners. The following transactions and balances included in the IJB's financial statements are presented to provide additional information on the relationships.

There are key management personnel employed by NHS Ayrshire & Arran and South Ayrshire Council; these costs are included in the expenditure on services provided. The non-voting Board members employed by the Council and Health Board include the Chief Officer, Chief Finance Officer, Chief Social Work Officer, representatives of primary care, nursing and non-primary care services, and a staff representative. Details of the remuneration for some specific post-holders is provided in the Remuneration Report.

Support services were not delegated to the Integration Joint Board through the Integration Scheme and are instead provided by NHS Ayrshire & Arran and South Ayrshire Council free of charge as 'services in kind'. These include services such as financial management, human resources, legal services, committee services, ICT, payroll, internal audit and accommodation.

2023-24 £000's	Transactions with NHS Ayrshire & Arran	2024-25 £000's
(191,059)	Funding Contributions received from NHS Board	(205,511)
170,164	Expenditure on Services Provided by NHS Board	186,153
17	Auditor Fee: External Work	17
88	Key Management Personnel: Non-Voting Board Members	82
(20,790)	Net Transactions with NHS Board	(19,259)

31-Mar-24 £000's	Balances with NHS Ayrshire & Arran	31-Mar-25 £000's
2,019	Debtor Balances: Amounts due from NHS Board	1,445
0	Creditor Balances: Amounts due to NHS Board	0
2,019	Net Balances with NHS Board	1,445

2023-24 £000's	Transactions with South Ayrshire Council	2024-25 £000's
(94,280)	Funding Contributions received from South Ayrshire Council	(102,743)
117,327	Expenditure on Services Provided by South Ayrshire Council	128,309
16	Auditor Fee: External Work	17
88	Key Management Personnel: Non-Voting Board Members	82
23,151	Net Transactions with South Ayrshire Council	25,665

31-Mar-24 £000's	Balances with South Ayrshire Council	31-Mar-25 £000's
15,449	Debtor Balances: Amounts due from South Ayrshire Council	9,618
0	Creditor Balances: Amounts due to South Ayrshire Council	0
15,449	Net Balances with South Ayrshire Council	9,618

NOTE 11 – VAT

VAT payable is included as an expense only to the extent that it is not recoverable from Her Majesty's Revenue and Customs. VAT receivable is excluded from income.

The VAT treatment of expenditure in the IJB's financial statements depends on which of the partner agencies is providing the service as these agencies are treated differently for VAT purposes.

Where the Council is the provider, income and expenditure exclude any amounts related to VAT, as all VAT collected is payable to H.M. Revenue and Customs and all VAT paid is recoverable from it. The Council is not entitled to fully recover VAT paid on a very limited number of items of expenditure and for these items the cost of VAT paid is included within service expenditure to the extent that it is irrecoverable from H.M. Revenue and Customs.

Where the NHS is the provider, expenditure incurred will include irrecoverable VAT as generally the NHS cannot recover VAT paid as input tax and will seek to recover its full cost as income from the Commissioning IJB.

NOTE 12 – Accounting Standards Issued Not Yet Adopted

The Code requires the disclosure of information about accounting changes that will be required by new accounting standards that has been issued but not yet adopted.

At the date of authorisation of these financial statements, the IJB has not applied the following new and revised IFRS Standards that have been issued but are not yet effective:

- Amendments to IAS 1: Classification of Liabilities as Current or Non-current and non-current liabilities with Covenants.
- Amendments to IFRS16: Lease Liability in a Sale and Leaseback.
- Amendments to IAS 12: International Tax Reform: Pillar two model rules.
- Amendments to IAS 7 and IFRS 7: Supplier Finance Arrangements
- Amendments to IAS 21: The effects of changes in Foreign Exchange Rate (Lack of Exchangeability).
- Amendments to IFRS 17: Changes to recognition, measurement, presentation, and disclosure of insurance contracts.
- Amendments to IAS 16 and IAS 38: Changes to adaptations and interpretations of Property, Plant and Equipment and Intangible Assets.

The IJB does not expect that the adoption of the Standards listed above will have a material impact on the financial statements in future periods.

In relation to IFRS16: Leases Liability in a Sale and Leaseback applicable on or after 1 January 2025. These arrangements are held in either NHS Ayrshire and Arran or South Ayrshire Council and will be included in their financial statements in future periods.

Glossary of Terms

Although the terminology used in the Annual Accounts is intended to be self-explanatory, it may be helpful to readers to provide additional definition and interpretation of the terms used.

Accounting Period

The period of time covered by the Accounts normally a period of twelve months commencing on 1 April each year. The end of the accounting period is the Balance Sheet date.

Accruals

The concept that income and expenditure are recognised as they are earned or incurred not as money is received or paid.

Balance Sheet

A statement of the recorded assets, liabilities and other balances at the end of the accounting period.

CIPFA

The Chartered Institute of Public Finance and Accountancy.

Consistency

The concept that the accounting treatment of like terms within an accounting period and from one period to the next is the same.

CNORIS

The Clinical Negligence and Other Risks Indemnity Scheme

COSLA

Convention of Scottish Local Authorities

Creditor

Amounts owed by the IJB for work done, goods received, or services rendered within the accounting period, but for which payment has not been made by the end of that accounting period.

Debtor

Amount owed to the IJB for works done, goods received, or services rendered within the accounting period, but for which payment has not been received by the end of that accounting period.

Entity

A body corporate, partnership, trust, unincorporated association or statutory body that is delivering a service or carrying on a trade or business with or without a view to profit. It should have a separate legal personality and is legally required to prepare its own single entity accounts.

IAS

International Accounting Standards

IFRS

International Financial Reporting Standards

ISA

International Standard on Auditing

ISD

Information Services Division Scotland

LASAAC

Local Authority (Scotland) Accounts Advisory Committee

Liability

A liability is where the IJB owes payment to an individual or another organisation. A current liability is an amount which will become payable or could be called in within the next accounting period e.g. creditors or cash overdrawn. A non-current liability is an amount which by arrangement is payable beyond the next year at some point in the future or will be paid off by an annual sum over a period of time.

NRAC

NHS Scotland Resource Allocation Committee (Scottish NHS resource allocation formula)

Post Balance Sheet Events

Post Balance Sheet events are those events, favourable or unfavourable, that occur between the Balance Sheet date and the date when the Annual Accounts are authorised for issue.

Provisions

An amount put aside in the accounts for future liabilities or losses which are certain or very likely to occur but the amounts or dates of when they will arise are uncertain.

PSIAS

Public Sector Internal Audit Standards.

Related Parties

Bodies or individuals that have the potential to control or influence the IJB or to be controlled or influenced by the IJB. For the IJB's purposes, related parties are deemed to include voting members, the Chief Officer and their close family and household members.

Remuneration

All sums paid to or receivable by an employee and sums due by way of expenses allowances (as far as these sums are chargeable to UK income tax) and the monetary value of any other benefits received other than in cash.

Reserves

The accumulation of surpluses, deficits and appropriation over past years. Reserves of a revenue nature are available and can be spent or earmarked at the discretion of the IJB.

Revenue Expenditure

The day-to-day expenses of providing services.

Significant Interest

The reporting authority is actively involved and is influential in the direction of an entity through its participation in policy decisions.

SOLACE

Society of Local Authority Chief Executives.

The Code

The Code of Practice on Local Authority Accounting in the United Kingdom

Independent auditor's report to the members of South Ayrshire Integration Joint Board and the Accounts Commission

Reporting on the audit of the financial statements

Opinion on financial statements

I certify that I have audited the financial statements in the annual accounts of South Ayrshire Integration Joint Board for the year ended 31 March 2025 under Part VII of the Local Government (Scotland) Act 1973. The financial statements comprise the Comprehensive Income and Expenditure Statement, Movement in Reserves Statement, Balance Sheet, and notes to the financial statements, including material accounting policy information. The financial reporting framework that has been applied in their preparation is applicable law and UK adopted international accounting standards, as interpreted and adapted by the Code of Practice on Local Authority Accounting in the United Kingdom 2024/25 (the 2024/25 Code).

In my opinion the accompanying financial statements:

- give a true and fair view of the state of affairs of the body as at 31 March 2025 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with UK adopted international accounting standards, as interpreted and adapted by the 2024/25 Code; and
- have been prepared in accordance with the requirements of the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the Local Government in Scotland Act 2003.

Basis for opinion

I conducted my audit in accordance with applicable law and International Standards on Auditing (UK) (ISAs (UK)), as required by the [Code of Audit Practice](#) approved by the Accounts Commission for Scotland. My responsibilities under those standards are further described in the auditor's responsibilities for the audit of the financial statements section of my report. I was appointed by the Accounts Commission on 3 April 2023. My period of appointment is five years, covering 2022/23 to 2026/27. I am independent of the body in accordance with the ethical requirements that are relevant to my audit of the financial statements in the UK including the Financial Reporting Council's Ethical Standard, and I have fulfilled my other ethical responsibilities in accordance with these requirements. Non-audit services prohibited by the Ethical Standard were not provided to the body. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Conclusions relating to going concern basis of accounting

I have concluded that the use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work I have performed, I have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the body's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from when the financial statements are authorised for issue.

These conclusions are not intended to, nor do they, provide assurance on the body's current or future financial sustainability. However, I report on the body's arrangements for financial sustainability in a separate Annual Audit Report available from the [Audit Scotland website](#).

Risks of material misstatement

I report in my Annual Audit Report the most significant assessed risks of material misstatement that I identified and my judgements thereon.

Responsibilities of the Chief Financial Officer and South Ayrshire Integration Joint Board for the financial statements

As explained more fully in the Statement of Responsibilities, the Chief Financial Officer is responsible for the preparation of financial statements that give a true and fair view in accordance with the financial reporting framework, and for such internal control as the Chief Financial Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Financial Officer is responsible for assessing the body's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless there is an intention to discontinue the body's operations.

The South Ayrshire Integration Joint Board is responsible for overseeing the financial reporting process.

Auditor's responsibilities for the audit of the financial statements

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. I design procedures in line with my responsibilities outlined above to detect material misstatements in respect of irregularities, including fraud. Procedures include:

- using my understanding of the local government sector to identify that the Local Government (Scotland) Act 1973, The Local Authority Accounts (Scotland) Regulations 2014, and the

Local Government in Scotland Act 2003 are significant in the context of the body;

- inquiring of the Chief Financial Officer as to other laws or regulations that may be expected to have a fundamental effect on the operations of the body;
- inquiring of the Chief Financial Officer concerning the body's policies and procedures regarding compliance with the applicable legal and regulatory framework;
- discussions among my audit team on the susceptibility of the financial statements to material misstatement, including how fraud might occur; and
- considering whether the audit team collectively has the appropriate competence and capabilities to identify or recognise non-compliance with laws and regulations.

The extent to which my procedures are capable of detecting irregularities, including fraud, is affected by the inherent difficulty in detecting irregularities, the effectiveness of the body's controls, and the nature, timing and extent of the audit procedures performed.

Irregularities that result from fraud are inherently more difficult to detect than irregularities that result from error as fraud may involve collusion, intentional omissions, misrepresentations, or the override of internal control. The capability of the audit to detect fraud and other irregularities depends on factors such as the skilfulness of the perpetrator, the frequency and extent of manipulation, the degree of collusion involved, the relative size of individual amounts manipulated, and the seniority of those individuals involved.

A further description of the auditor's responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website www.frc.org.uk/auditorsresponsibilities. This description forms part of my auditor's report.

Reporting on other requirements

Opinion prescribed by the Accounts Commission on the audited parts of the Remuneration Report

I have audited the parts of the Remuneration Report described as audited. In my opinion, the audited parts of the Remuneration Report have been properly prepared in accordance with The Local Authority Accounts (Scotland) Regulations 2014.

Other information

The Chief Financial Officer is responsible for the other information in the annual accounts. The other information comprises the Management Commentary, Annual Governance Statement, Statement of Responsibilities and the unaudited part of the Remuneration Report.

My responsibility is to read all the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or my knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If I identify such material inconsistencies or apparent material misstatements, I am required to

determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact. I have nothing to report in this regard.

My opinion on the financial statements does not cover the other information and I do not express any form of assurance conclusion thereon except on the Management Commentary and Annual Governance Statement to the extent explicitly stated in the following opinions prescribed by the Accounts Commission.

Opinions prescribed by the Accounts Commission on the Management Commentary and Annual Governance Statement

In my opinion, based on the work undertaken in the course of the audit:

- the information given in the Management Commentary for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with statutory guidance issued under the Local Government in Scotland Act 2003; and
- the information given in the Annual Governance Statement for the financial year for which the financial statements are prepared is consistent with the financial statements and that report has been prepared in accordance with the Delivering Good Governance in Local Government: Framework (2016).

Matters on which I am required to report by exception

I am required by the Accounts Commission to report to you if, in my opinion:

- adequate accounting records have not been kept; or
- the financial statements and the audited part of the Remuneration Report are not in agreement with the accounting records; or
- I have not received all the information and explanations I require for my audit.

I have nothing to report in respect of these matters.

Conclusions on wider scope responsibilities

In addition to my responsibilities for the annual accounts, my conclusions on the wider scope responsibilities specified in the Code of Audit Practice, including those in respect of Best Value, are set out in my Annual Audit Report.

Use of my report

This report is made solely to the parties to whom it is addressed in accordance with Part VII of the Local Government (Scotland) Act 1973 and for no other purpose. In accordance

with paragraph 108 of the Code of Audit Practice, I do not undertake to have responsibilities to members or officers, in their individual capacities, or to third parties.

Fiona Mitchell-Knight

Fiona Mitchell-Knight FCA
Audit Director
Audit Scotland
4th Floor, The Athenaeum Building
8 Nelson Mandela Place
Glasgow, G2 1BT
11 September 2025

This information can be made available, on request, in braille, large print or audio formats and can be translated into a range of languages. Contact details are provided below.

درخواست کرنے پر یہ معلومات ناپینا افراد کے لئے ابھرے حروف، بڑے حروف یا آڈیو میں مہیا کی جاسکتی ہے اور اس کا مختلف زبانوں میں ترجمہ بھی کیا جاسکتا ہے۔ رابطہ کی تفصیلات نیچے فراہم کی گئی ہیں۔

本信息可应要求提供盲文，大字印刷或音频格式，以及可翻译成多种语言。以下是详细联系方式。

本信息可慮應要求提供盲文，大字印刷或音频格式，以及可翻譯成多种語言。以下是詳細聯系方式。

ਇਹ ਜਾਣਕਾਰੀ ਮੰਗ ਕੇ ਬੋਲ, ਵੱਡੇ ਅੱਖਰਾਂ ਅਤੇ ਸਣਨ ਵਾਲੇ ਰਪ ਵਿਚ ਵੀ ਲਈ ਜਾ ਸਕਦੀ ਹੈ, ਅਤੇ ਇਹਦਾ ਤਰਜਮਾ ਹੋਰ ਬੋਲੀਆਂ ਵਿਚ ਵੀ ਕਰਵਾਇਆ ਜਾ ਸਕਦਾ ਹੈ। ਸੰਪਰਕ ਕਰਨ ਲਈ ਜਾਣਕਾਰੀ ਹੇਠਾਂ ਦਿੱਤੀ ਗਈ ਹੈ।

Niniejsze informacje mogą zostać udostępnione na życzenie, w alfabecie Braille'a, w druku powiększonym lub w formacie audio oraz mogą zostać przetłumaczone na wiele języków obcych. Dane kontaktowe znajdują się poniżej.

Faodar am fiosrachadh seo fhaighinn, le iarrtas, ann am braille, clò mòr no clàr fuaim agus tha e comasach eadar-theangachadh gu grunn chànanan. Tha fiosrachadh gu h-ìosal mu bhith a' cur fios a-steach.

South Ayrshire Health and Social Care Partnership

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