

Meeting of South Ayrshire Health and Social Care Partnership	Integration Joint Board	
Held on:	13th May 2026	
Agenda Item:	10	
Title:	Improvement and Innovation Projects Update	
Summary:		
To provide a progress update on the Improvement and Innovation Projects approved to date, including spend against each project.		
Author:	Lisa Duncan, Chief Finance Officer	
Recommendations:		
It is recommended that the Integration Joint Board		
<ul style="list-style-type: none"> i. Note the investment made to date with the Improvement and Innovation Fund, for ease of reference abbreviated highlights included in Appendix one ii. Note the investment in line with the IJB Strategic Priorities iii. Note the progress updates to projects included within the report. 		
Directions:		
1. No Directions Required	<input type="checkbox"/>	
2. Directions to NHS Ayrshire & Arran	<input type="checkbox"/>	
3. Directions to South Ayrshire Council	<input type="checkbox"/>	
4. Directions to both SAC & NHS	<input type="checkbox"/>	
Implications:		
	Financial	<input type="checkbox"/>
	HR	<input type="checkbox"/>
	Legal	<input type="checkbox"/>
	Equalities	<input type="checkbox"/>
	Sustainability	<input type="checkbox"/>
	Policy	<input type="checkbox"/>
	ICT	<input type="checkbox"/>

IMPROVEMENT AND INNOVATION PROJECTS UPDATE

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to provide a progress update on the Improvement and Innovation Projects approved to date including the spend against each project.

2. RECOMMENDATION

2.1 It is recommended that the Integration Joint Board

- i. Note the investment made to date with the Improvement and Innovation Fund, for ease of reference abbreviated highlights included in Appendix one.**
- ii. Note the investment in line with the IJB Strategic Priorities.**
- iii. Note the progress updates to projects included within the report.**

3. BACKGROUND INFORMATION

- 3.1 On the 14th of June 2023, the IJB approved investment of £4m from reserves to create an Improvement and Innovation Fund for services to invest in specific projects aimed at improving services to meet current demand pressures and / or reduce future demand pressure through innovation and changes to ways of working. From a financial perspective improvement in services should ensure future financial sustainability.
- 3.2 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.
- 3.3 Guidance was distributed to staff on the purpose and governance arrangements for the fund, including how to measure quality improvement from the Ayrshire and Arran Improvement Foundation Skills training.
- 3.4 To date there is £4.598m (77%) of the fund committed to various projects.
- 3.5 [The Audit Scotland Finance Bulletin 2023-24](#) presented to Performance and Audit Committee on the 1st of April 2025, noted in their key messages that investment in prevention and early intervention is needed to help slow the ever-increasing demand for services, the cost of more complex care and improve the experience and outcomes for people.
- 3.6 The improvement and innovation fund provides an opportunity to invest in early intervention to improve outcomes for people in South Ayrshire.

4. REPORT

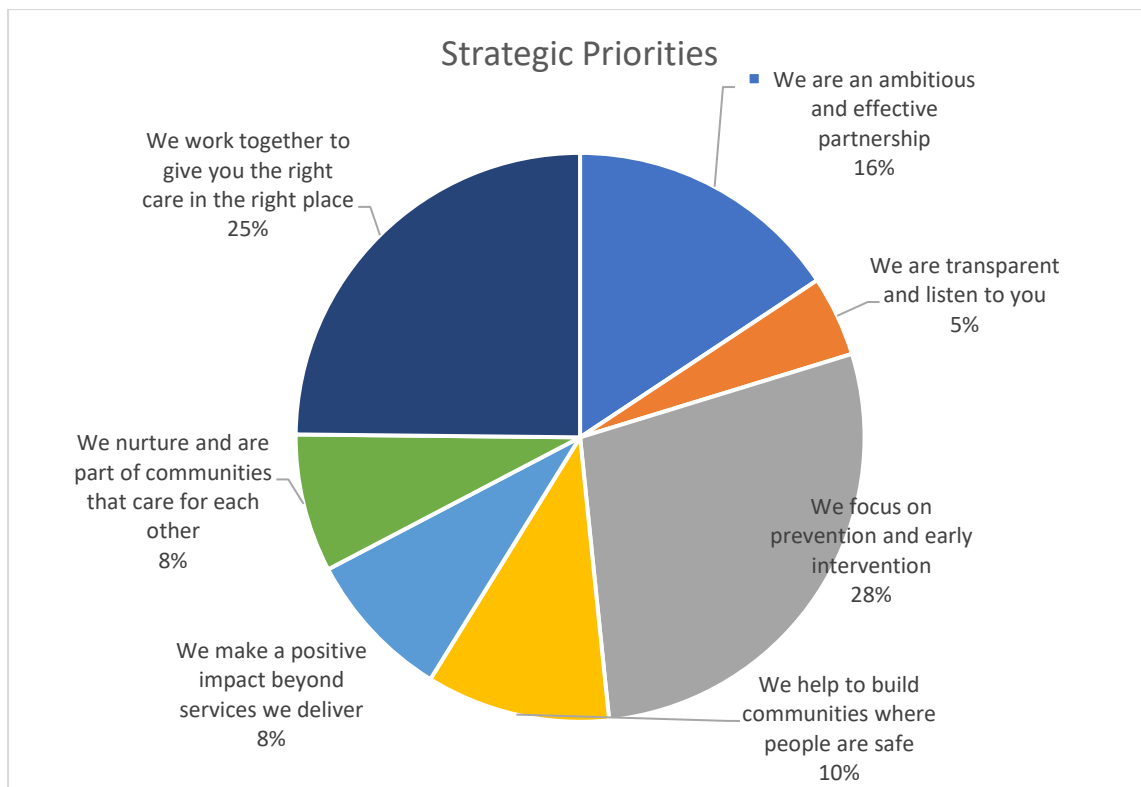
4.1 The report will provide an overview of projects and how they fit with IJB Strategic Priorities with progress updates provided at service level.

4.2 Prior to scrutiny and approval an improvement and innovation fund template is completed by the relevant service manager, this includes detail on what strategic objectives the investment aligns to and captures information on the expected outcome and key performance indicators to be achieved with the investment.

4.3 SAHSCP Strategic Plan 2021-31 sets out seven strategic priorities. These priorities will drive the services commissioned by the HSCP and are based on the engagement and conversations with partners and the community. Strategic Priorities are: -

- We make a positive impact beyond the services we deliver.
- We focus on prevention and early intervention.
- 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 are transparent and listen to you.
- We help build communities where people are safe.
- We are an ambitious and effective partnership.

4.4 Each project aligns to one of more of the above priorities. Analysis of the projects, shown in chart below, shows the most prominent priorities that the fund is supporting are “We focus on prevention and early intervention” at 28% and “We work together to give you the right care in the right place” at 25%.



- 4.5 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 of care including reduced social isolation and loneliness and delay or reduced need for care and support.
- 4.6 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 population is ageing.
- 4.7 Providing the right care in the right place ensures people can access the most appropriate health and social care in the right place dependent on their needs.
- 4.8 From the total investment of £6m, £4.598m has been committed to specific projects. This leaves a balance of £1.402m remaining to support future investment.
- 4.9 Appendix one provides the quarterly highlight report including financial position, new projects approved, completed, cancelled.
- 4.10 The next section of the report will provide more detail of specific projects within services reviewing progress to date and any early improvements that have been identified.

COMMUNITY CARE AND HEALTH

- 4.11 Community Care and Health have 32 projects approved a total investment of £1.976m. Fourteen projects have now been completed, and eighteen projects are in progress of being delivered and are at various stages.

Reablement Supervisors Capacity

- 4.12 Investment of £0.085m was approved to provide additional reablement supervisor capacity over a two-year period to improve team's performance. The post commenced in June 2024 and had a positive impact on the services, the postholder left in September 2025, and new employee took up post in November 2025. Overtime spend has reduced from 56% to 31%, statutory and mandatory training levels are sitting at 96% (core) and 96% (role specific) and PDR's at 81% completion. Quality assurance visits 50% completed within 5 working days and 75% within 10 working days.

Girvan Hospital Nurse Leadership

- 4.13 Girvan Hospital investment of £0.127m for a two-year period to enhance clinical leadership at Girvan hospital delivering on training and development in the minor injury unit (MIU) and reduce locality use of acute sites. This additional

capacity has been supporting the hospital site and supported delayed discharges more effectively. The funding was also used to test point of care testing related to possible blood clots, this test reduced the number of referrals to acute sites and fits with the ethos of right care, right time. The MIU remains open and supports the Girvan community with support from GP and nursing staff.

Care Home Review Team Additional Capacity

- 4.14 Investment in additional capacity within the care home review team, has reduced outstanding care home reviews, with all reviews now completed within the 28 days of set review date, providing additional capacity to social workers to focus on statutory work with no outstanding supervisory visits for guardianships, overall the capacity has benefitted the team to meet demands, this will continue to be monitored.

MAT Standards Pilot

- 4.15 The MAT Standards Pilot investment of £0.040m was due to commence in August 24, however due to recruitment challenges, this was delayed, and a member of the team has been appointed to run the test of change from January 2025.
- 4.16 Following evaluation and receiving feedback we have recognised that there is scope to add in additional tasks to the role in terms of wider prescribing around alcohol support. This is something that is being worked on at present. Additionally, the service is looking at what GP practices are aligned to the service to look to increase uptake. The plan is to continue with the role and these alterations for a further year, funding enables this as it is an uplift to a band 6's role.

Programme Manager-Focus on Frailty and Ageing Well

- 4.17 Investment of £0.080m was approved for a Programme Manager for two years to focus on Ageing Well and Frailty to lead on this work. The Ageing Well Strategy was launched on the 10th of September this included an Ageing Well Action Plan for 2024-25, this is now complete with good progress made within all the Frailty workstreams. An updated year 2 Ageing Well Action Plan including work around frailty will be presented to IJB in June 2026.
- 4.18 The Ageing Well Strategy received a silver award in the Transformation in HSCP category at the iESE (Improvement and Efficiency Social Enterprise) public sector transformation awards ceremony in March 2025.

Learning Disabilities -Senior Nurse

- 4.19 Learning Disabilities Senior Nurse investment of £0.060m was approved to fund a Pan Ayrshire nurse to improve services within learning disabilities by increasing leadership to the same level as Mental Health nursing team. The post was filled in September 2024. Currently the impact of this post can not be

assessed as postholder has been off sick since Dec 25 and is unlikely to return when funding ends in Aug 26.

Hospital Social Work team capacity

- 4.20 Within the hospital social work team investment of £0.044m to increase community care assistant capacity to improve performance. The CCA has completed 201 care home reviews. All hospital Discharges to care homes are now receiving an initial review. There are no social care assessment cases awaiting allocation for people who are fit for discharge due to the additional capacity provided. Work is ongoing to ensure early referrals are processed and allocated, whole system approach continues with social workers attending ward reviews to support early intervention.

Microenterprise

- 4.21 Microenterprise project continues with regular monthly meetings with AILN, SAHSCP and Council's economic development team. Funding from economic development has created a post providing advice and support on setting up businesses. This is part of our wider strategy to ensure individuals can access support that matters to them and does not necessitate the need for formal health and social care support, focussing on prevention and early intervention.
- 4.22 At end of March 2026 there were forty-six micro-enterprises on the directory providing a range of services such as shopping, transport, befriending, mental health support, personal care and carers respite.
- 4.23 The microenterprises were supporting 184 clients, 83 (45%) were using self-directed support options to fund care where care met assessed needs and 101 (55%) were privately funded by clients.

Getting it Right For Ayr North (GIRFAN)

- 4.24 Getting It Right For Ayr North (GIRFAN) two nurses have in post for 12months and end in April 26, the additional capacity has allowed the roles within the homeless nursing service to have time to consider their contribution to wider partnership working across Ayr North, which will be maintained within the established team. The team will embed GIRFE (Getting It Right For Everyone) a holistic approach to reduce demand on various health and social care services. As a contributor of the work of the Integrated Nursing Team in Ayr North, it is hoped the collaborative working that these posts will be part of will impact on emergency department presentation and reduce pressure on acute hospitals.

Project Officer – Occupational Health Team

- 4.25 Project Implementation Officer to work alongside South Ayrshire Council Occupational Therapy Team to document and streamline existing processes and identify areas for improvement, this post has now been filled and initial

priorities identified including referral processes mapping, web presence, integrated and collaborated working and workforce development.

- 4.26 To date improvements have been made to the Blue Badge referrals process. New recording pathways and criteria have been designed which has decreased duty referrals and improved screening process of referrals. Standard Operating Procedures have been created for occupational therapy staff to support process improvements. Improvements have been made to delivery of equipment to service users. Service review within Occupational Therapy Team continues.

Project Officer – Team Around the Locality

- 4.27 The fund invested in a Project Officer to implement the Team Around the Locality model this role has led on the launch and implementation of Connect South Ayrshire within various localities. Funding for this post has now ceased, the project officer is continuing in this to the end of June to complete the launch of Connects in Girvan.
- 4.28 Connect South Ayrshire is a collaboration between South Ayrshire Health and Social Care Partnership (HSCP) and Voluntary Action South Ayrshire (VASA) providing communities with easier access to information, advice, and support. The phone line is established and is overseen by colleagues within VASA. The website is also part of a contract between the HSCP and VASA and is overseen by VASA.
- 4.29 Connects continues to be implemented through physical spaces in Ayr, Prestwick, Maybole and commitment to open in Girvan with further developments being considered in Troon and a “spoke” model in Ayr.

Ageing Well Development Fund

- 4.30 Ageing Well Development Fund £0.050m has been approved to support innovative approaches in the community to enable healthy and active ageing in line with the Ageing Well Strategy. Guidance has been established and published with applications received and signed off by the Ageing Well Oversight Group. To date a total of £0.035m has been allocated to a variety of projects including intergenerational, older people’s wellbeing, social isolation, arts and sports-based work.
- 4.31 The projects will provide impact and evaluation reports, case studies, etc in due course. Some of the activity has been presented in wider forums, for example, the artwork produced by Troon Art Club has been exhibited at Crosshouse Hospital and will be exhibited at Ayr Hospital and other South Ayrshire venues. The Over to You pack has been used in a variety of community events to support more proactive planning for death and bereavement.
- 4.32 In January 2026, The Ageing Well Oversight Group approved £0.015m of remaining funding to support a community transport initiative (in line with the priorities emerging from the Ageing Well Champion’s Board). A small group has

been convened to develop a pilot transport project focused on supporting better access to Crosshouse for Clinic/Outpatient appointments.

- 4.33 Age Scotland in Ayr has now established a small development fund with similar criteria to the Ageing Well Development Fund this will allow for more sustained funding for small community groups going forward.

Reablement Supervisor – Hospital Discharge

- 4.34 To support hospital discharge and increase in reablement supervisory capacity at Ayr Hospital was approved to support ongoing demand and ensure timely assessments and appropriate discharge planning to improve patient flow and timely intervention aimed at reducing length of stay. Two post holders were recruited and in post by end April 2025. One post holder left in October 2025; the remaining post holder has been extended to September 2026.
- 4.35 The additional capacity has allowed attendance at the 9am Frailty meeting within Ayr Hospital and the 1pm Crosshouse Huddle where the team are able to provide information about admissions to support restarts and quick discharges and pick up of early referrals working directly at front door of Ayr hospital. Influencing discharges and ensuring social care pathways are known. Highlighting individuals and supporting turn around with existing care or identifying ongoing needs.
- 4.36 Working is underway with the Performance Team to develop data reporting around reduction in length of stay. Anecdotal evidence from acute staff is that the post is beneficial and helps with discharge decision making, turning people around at the front door and reducing length of stay once appropriate medical intervention has been completed.
- 4.37 Other benefits include improved communication across different parts of services (Acute and social care), helping streamline hospital discharges. Positive feedback from AHP's at front door regarding the value of post to build relationships, share knowledge and improve discharges.

Power of Attorney Fund

- 4.38 Power of attorney fund of £0.010m was created to financially assist people who may be at risk of losing capacity to make a POA. The criteria to access this fund is based on health condition that will likely affect future cognition, priority is given to people who are at risk of repeated hospital admissions to help prevent an Adults with incapacity delayed discharge in hospital. The average adults with incapacity delay in hospital is 23 weeks and there is a considerable cost and resources to compile a guardianship report in order to facilitate discharge.
- 4.39 This fund has gone from strength to strength and £0.005m has been spent, supporting 17 people who do not have funds to pay for a POA. A further 14 have been supported with advice only and 3 referrals are being screened for support. The process of legal services contacting the team and payment methods are working well. Many other partnerships have contacted the team

to establish how the fund operates. Consideration should be given to creating a permanent budget for this support.

- 4.40 Cost avoidance can be aligned to this preventative work. The average cost of a POA is £500, when you compare this to the cost of a guardianship which is approximately £3,000. Also, the staffing cost to resource ie. MHO to complete the report and 2 medics to approve. The people we are targeting for the POA fund are at high risk of hospital admission and there is also the potential saving in terms of delayed discharge from hospital. This work has been sighted as good practice at a national level, and aligns to Audit Scotland recommendation in tackling delayed discharge.

South Locality – Initial Response Team

- 4.41 South locality initial response team community care assistant resource allocation of £0.088m to support community led support within the rural villages of the South Locality. The employee started on the 1st of Dec 2025 and is supporting the team to look at referrals. With no referrals unallocated.
- 4.42 The community care assistant is also supporting the CONNECT site in Maybole and the villages having good conversations and signposting appropriately which means there is clarity and referrals to team for statutory work are appropriate.

Improving continuity of care at Barns Medical Practice

- 4.43 Improving continuity of care at Barns Medical Practice investment of £0.004m was made to Barns medical practice who have completed a deep dive into patients frequently attending the practice. The patients selected were from the Ayr North area and who have been coded with a mental health illness within the past 6 months. They identified 42 individuals and found that 39 of these individuals had reason to attend. They identified that continuous care was beneficial for these patients and that the practices' open access appointment system was beneficial. It was also noted that these individuals were signposted to other external services for further support. The Practice did not feel that further intervention was required for this cohort.
- 4.44 In almost all of the cases that were part of this cohort, the contact with GPs were appropriate and related to genuine clinical need. Contacts were not reduced and the practice felt that they would not benefit from continuing with the project beyond the first 3 months.

Supported Decision Making

- 4.45 Supported Decision Making Community Resource investment of £0.129m in an early intervention approach to ensure that appropriate supports are in place should the person ever require formal care in the future, this includes anticipatory care planning and power of attorney.

- 4.46 The post is embedded in the team and our colleagues in hospital are making referrals for supported decision making 42 referrals have been received in 2026. This is an increase of 133% since the SDM process began. The SDM worker has also presented at 7 events this year, raising awareness of SDM.
- 4.47 SDM has had a positive impact on hospital discharges, in 2024 the average delay for someone awaiting an AWI intervention was 14 weeks. As it stands in 2026, we have reduced this average to 6 weeks. This is significant both in terms of the person themselves but also from resource/financial implications. This approach has been cited as good practice nationally and shared in national meeting.

Connects Physical Hubs

- 4.48 Connects Physical Hubs investment of £0.150m as a one off to fund the creation of hubs in each of the five localities to promote wellbeing and access to social opportunities, to reduce demand on health and social care services in the longer term. Costs associated with development of these sites include furniture, signage, digital equipment etc.
- 4.49 To date hubs have been set up in Ayr, Prestwick and Maybole. Funding will be used in 2026-27 to create a hub in Girvan, with an ambition to open spaces in the heart of Ayr North, and also in Troon, with all sites set up to the same standard with the Connects branding.
- 4.50 KPI's for each of the hubs are being collated and will be reported in due course, these include the number of people who attend the hub, the number of people who attend the hub for health and social care and number of people who attend and are signposted elsewhere.

ALLIED HEALTH PROFESSIONALS

- 4.51 The Allied Health Professionals (AHP) team have eight projects with a total investment of £1.116m. Two projects are now completed, with the remaining six in progress.

Speech and Language Therapy – “Vibrant Voices”

- 4.52 Speech and Language Therapy (SLT) team investment of £0.075m has provided for implementation of an adult singing intervention “Vibrant Voices” aimed at providing supportive singing for people with acquired neuro communication difficulties. This early intervention approach has proved so successful that the choir in Prestwick had to move location due to high numbers, with around 50 people attending per week. The service has been expanded to Maybole and Girvan and is running 3 times per week. Choral singing group therapy is now offered to 100% of identified patients with acquired neurogenic communication difficulties within the South Ayrshire Adult SLT service. Quality of life (QOL) measurements continue to be captured pre and post group on a weekly basis to identify impact on patient's wellbeing.

4.53 Local MSP Sharon Dowey and Glenn Carter, Royal College of Speech and Language Therapists (RCSLT) Scotland visited the Vibrant Voices service in November. Glenn Carter (RCSLT) said “Vibrant Voices is a great example of how speech and language therapists think outside of the box to support adults with communication difficulties. By embedding therapists in the community, we can maximise people’s opportunities for connection, prevention, improved mental health and quality of life.”

4.54 Funding for this project will continue until December 2026, then service will be embedded within core services, due to the success of the initiative and the benefits to attendees. The project is also a finalist in the NHS Ayrshire Achieves Awards for 2026, recognising exceptional staff and volunteers who provide health and care services in Ayrshire and Arran.

Speech and Language Therapy – “Children and Young People Communication Friendly Environments”

4.55 Speech and Language Therapy (SLT) investment of £0.114m over two years to create children and young people communication friendly environments. Work continues to drive forward at pace. The initial target of having 20 establishments on the South Ayrshire Community Friendly Environment (SACFE) journey was met 17 months early. The target was then updated with the current ambition being “By June 2026, sixty community settings in South Ayrshire will be on the journey to achieving SACFE, with forty being fully accredited.

4.56 As of March 26, there are now 80 community settings on board with over 40 fully accredited. The first two community settings to receive their SACFE plaque and achieve full accreditation in January 2025 were Tempura and The View at Monktonhill.

4.57 Communication boards have been installed in local parks, beaches, woodland walks and in all South Ayrshire leisure centres. Positive comments from people include “*My girls recognised the symbols from school, and it was great to see them ‘read’ and understand the board.*” “*Seeing things like this while out and about makes me and my family very happy and helps people like me feel more supported and included.*”

4.58 Funding for this project will end in June 26.

Speech and Language Therapy – “Children and Young People Waiting List”

4.59 Speech and Language Therapy (SLT) additional capacity to reduce children and young people’s waiting list with £0.208m of investment over two years. The waiting time has now reduced from 28 weeks to 8 weeks. Work is progressing to reduce the waiting time to targeted 6 weeks and waiting list to nil. Waiting list was 115 now 17 children waiting, a decrease of 85% and an improvement of 62% when 45 children were waiting in March 25.

AHP Front Door Team

- 4.60 AHP Front Door Team total investment of £0.433m, over a two-year period is now complete. The team consisted of a Dietician, Occupational Therapist, Speech and Language Therapist and two technical instructors based at combined assessment unit (CAU) at Ayr Hospital. Funding for the two technical instructor posts of £0.080m has not been utilised, this will be returned to the available improvement and innovation fund for use on other projects.
- 4.61 The principle of the team is to assess and intervene in patient care as soon as they enter the emergency department and/or CAU to get them home as quickly as possible either negating an admission to hospital or reducing their hospital stay and lowering risk of repeated admissions.
- 4.62 The latest quarterly summary report for period Aug 25 to Oct 25 for physio and occupational therapy front door service, there were 76 referrals from Emergency department, with 65% of these referrals completed at front door and discharged the same day. For the same period within the combined assessment unit there were 277 referrals with 21% avoiding admission to hospital.
- 4.63 Most recent data, for Jan 26 AHP front door teams discharged 20-32 per site (UHA and UHC) and in Feb 26 AHP front door teams discharge 38-40 per site. Therefore, on average the AHP front door teams discharge 10 -11 patients per week per hospital.
- 4.64 From the 1st of April acute will fund these posts for a period of 6 months initially. All line management, budget responsibility and risk will transfer to acute for this service. This is in line with the transfer of all acute AHP posts to Acute responsibility as detailed in the [Allied Health Professionals Transfer to Acute](#) report presented to IJB on the 10th of December 2025.
- 4.65 The AHP Front door teams will enable Discharge to Assess pathway to be developed earlier in the journey to frailty. Front Door AHPs support with decompressing the emergency department overcrowding and Getting It Right For Everyone (GIRFE).

Primary Care Occupational Therapists

- 4.66 Investment in Primary Care Occupational Therapists of £0.312m over two years, has ensured all GP practices in South Ayrshire now have Occupational Therapists (OT) as part of their Multi-Disciplinary Team, offering easier and earlier access to OT, improving people's health and wellbeing regardless of age and diagnosis. Occupational Therapist's aim to improve an individual's ability to carry out everyday tasks and promote independence. For example, supporting people at work or those who require adjustments to return to work or promoting positive self-management advice when experiencing early indicators of frailty.
- 4.67 All GP surgeries now have OT in place using various models of face-to-face clinics, telephone clinics and home visits. This is the future service delivery

model and is being embedded into everyday practice in primary care. This has been very well received by staff, Primary Care colleagues and the patients who use the service. Nationally this is a model that other health boards are learning from and looking to embed.

- 4.68 The Team have been working beyond the scope of the KPI's for the project and are invested in facilitating interventions around public health messaging, aiming to reduce health inequalities. Posters have been circulated providing information on what an OT can help with such as difficulties in day-to-day activities, persistent pain, women's health, tiredness, long covid, new diagnosis of a long-term condition, stress, issues with sleep and falls. Information also includes who to contact an OT to discuss your difficulties with daily activities, set realistic goals, and receive practical support, education and advise to self-manage health.
- 4.69 One of the KPI's was to increase identification of individuals who are experiencing an impact to their daily live due to reduced occupational performance. A total of 602 of referrals have been received. Early intervention when someone is having difficulties at work ensure a better chance they have to return to work and also improve health outcomes.
- 4.70 EuroQuol Quality of Life Measure demonstrates a 89% improvement in quality of life and wellbeing following an intervention for the 230 Quality of life assessments completed.
- 4.71 Vocational Rehab is offered in all GP practices funded by this project. Since Dec 24 to Nov 25, there has been 48 vocational rehab interventions, 81% of these interventions resulted in a positive outcome recorded by the patient. On average the team deal with 32 fit notes per month. Average figures highlight 25 of those stating not fit for work, 7 might be fit for work which is 22%, compared to national average of 6.4% when completed by a GP.
- 4.72 Fifty-five people have attended the Falls Prevention Group, 80% of attendees have either improved or maintained their '30 second sit to stand' score. On average there is a 25% improvement in EQ5D score of the individuals attending the falls prevention group. The content of the Falls prevention group will slightly change moving forward. This is due to change of staffing resource and skill; however, attendees will continue to benefit from information, practical strategies with an additional element of Tai Chi.
- 4.73 Falls advice is also now available from the CONNECT shops within Prestwick and Ayr. Further access to an Occupational Therapy assessment can be provided when appropriate.
- 4.74 A total number of 400 people have attended functional fitness MOT sessions facilitated across the localities. These sessions can detect early changes in an individual's functional ability and offer advice and strategies in relation to strength and balance.

- 4.75 A total number of 289 Frailty OT assessments have been carried out by the postholders. Every individual is offered an Up and About Leaflet and supported to develop a wellness personalised plan. 30% of these require a further multi factorial assessment and have been provided with Falls Prevention (specialist) advice face to face either within their own home or in the GP Practice.
- 4.76 The team are also working on increasing numbers of people with wellness plans in place. Three cohorts of Taking Action for Whole Health and Wellbeing self-management programmes have been offered, with very positive feedback.

Pulmonary Rehabilitation Physiotherapy Waiting List

- 4.77 Investment of £0.054m was made in Pulmonary Rehabilitation Physiotherapy to reduce the waiting list. A part time post commenced in June 2025, at that time there were 265 patients waiting for assessment (34 South patients), with the longest wait of 40 weeks. At March there are 106 patients are waiting for an assessment (31 South patients), and the longest wait is 16 weeks. The service is now at the lowest total number since January 2022. The number of patients waiting peaked in July 2024 at 259.

CHILDREN'S HEALTH CARE AND JUSTICE

- 4.78 Children's Health Care and Justice services have seven projects with a total investment of £0.605m, six projects have now been completed, one project remains in progress.

Children's Locality Groups

- 4.79 Investment of £0.100m has been utilised over a two-year period to fund locality children's groups where multidisciplinary partners in each of the 8 school clusters worked together to support whole family wellbeing. This investment is now complete.
- 4.80 The aims of the fund were to (i) mitigate poverty and improve wellbeing and (ii) enhance children and family's wellbeing and support family wellbeing.
- 4.81 In total 373 individual families have been supported over the two-year period. Families were identified through discussion with family first forums, and from evaluations of personalised plans in place to support children and young people. A Winter Holiday fund was organised to ensure that families were well supported when financial pressures can be higher, families were provided with vouchers to ease the financial pressure. Funding was provided to families for essential items such as washing machines, school clothing, winter jackets, bedding, bikes and scooters to ensure transport to school.
- 4.82 Partners have worked collaboratively to plan both individual and group support. A number of targeted interventions have been funded which have positively impacted children, young people and their families across the authority. These include outdoor learning experiences, wellbeing groups, targeted supported

around positive masculinity and increasing self-esteem confidence through Get Set Girls group.

Neurodiversity

- 4.83 Investment of £0.300m to support Neurodiversity assessments with an external provider supported by NHS Ayrshire and Arran Child and Adolescent Mental Health Services (CAMHS) is now complete. This has taken 151 young people out of the CAMHS waiting list and enable those children with more complex Neuro conditions to be seen quicker by Neuro CAMHS.
- 4.84 The CAMHS team managed the referrals to the external provider. Referrals were made to the provider for autism assessment, and following assessment post diagnostic intervention was provided.
- 4.85 The project received 151 referrals, 142 completed the diagnostic autism assessment, this resulted in 126 (89%) receiving a positive autism diagnosis, while 15 (11%) were negative and 1 was inconclusive.
- 4.86 Post diagnostic support is offered this includes a couple of sessions following diagnosis to answer any questions which are remaining from families. Many families feel they don't require this as the assessment has provided the answer and support is continued through local community services including NEST (Neurodevelopmental Empowerment and Strategy Team) which all families are offered, and support from schools.
- 4.87 Forty-seven families who were given a positive diagnosis went onto post diagnostic support, 2 families who started did not complete, as they said it was no longer required. Forty-five families completed the post diagnostic support.
- 4.88 Evaluation and feedback from families, highlighted the following: -
- 89% of families would recommend the provider
 - 88% satisfied with the service environment
 - 93% satisfied with care received
 - Positive feedback – clinician kindness, patience and professionalism
 - Improvement suggestions from a minority of responses – better communication, shorter sessions, seamless assessments and more strategies.

Pre 5 Young Carers Support

- 4.89 Investment of £0.098m was approved to create a Pre 5 Young Carers Support Worker to raise awareness, train staff, create and develop teeny carers assessments suitable for age and stage. Early identification enables a supported transition to primary school and access to young carer support at the earliest point, avoiding children and families reaching crisis point before seeking help. The post was filled, then vacant, recently been filled in March 26, the funding will continue until Nov 27. Currently 55 teeny carers have been identified.

- 4.90 National Lottery funding of £2m has been secured over a 9-year period to deliver the Teeny Carer Support Services project, aimed at transforming how very young carers (under five) are identified and supported. The grant will fund staff posts, research and partnership work with local charities, plus a range of resources and family support activities

POLICY AND PERFORMANCE

- 4.91 Policy and Performance team have six projects with a total investment of £0.772m, three projects are now complete with one project remaining. The most significant investment is in the Digital Strategy £0.500m has been invested in digital projects with projects scrutinised and approved by the Digital Board.

Digital Assistant

- 4.92 A Digital Assistant was recruited to update the content within the SAHSCP website, this work is now complete. Significant updates have been undertaken on the SAHSCP website to provide relevant, up to date information for members of the public. To date, this has supported an increase in online engagement, improved access to relevant care services and enhances the HSCP's transparency and trust with the community.
- 4.93 This activity required a committed and encouraging approach to gather the information. There is an expectation that this will be maintained now that we have realised improvements which will be monitored within existing resources, or if that isn't possible to identify alternative pathways.
- 4.94 Whilst the work undertaken has positively improved the outward facing HSCP, some key finding during this process were: lack of consistent presentation approach, proofing, evidence gathering or identification of what was needed to be on the webpage, linkage to the service and other service areas, governance compliance and ownership. These issues needed to be addressed by the Digital Assistant before able to upload to public facing webpage. This will need to be considered as we progress without the resource. Additionally cover for the Communications Officer was provided as part of the role – this was hugely beneficial as it extended our coverage and capture of activity across South Ayrshire.

Quality Improvement

- 4.95 Quality Improvement assistant commenced in Jan 25 and is providing comprehensive QI support to Frailty work being undertaken in conjunction with Health Improvement Scotland. Case studies have been developed to measure impact and outcomes of QI work within the HSCP and a development session was held with the senior leadership team in September to share some of these. These case studies will also be included in our annual update report this year to be presented to the IJB in due course.

- 4.96 Work is also being progressed to create a knowledge sharing QI hub intranet page to allow learning from improvement activity to be shared across the Partnership; along with information on how to access training and support for quality improvement.
- 4.97 Within SAHSCP there are now 1,536 (77%) of 2,000 staff trained in Foundation Level of Quality Improvement. This training has now been superseded by an updated QI training pathway introduced by NHS Education for Scotland (NES). Work is underway to implement the revised modules and pathways locally, after which reporting will align with this new framework.
- 4.98 Practitioner level training was put on hold by NHS A&A in 2025 while the training was evaluated in line with new QI training pathways being introduced by NHS Education for Scotland (NES) in partnership with SAHSCP. A pilot for new training commenced in Oct 25 with a reduced number of places available to SAHSCP staff. The previous delivery model enabled 20 places for each cohort the revised programme allows for 10 places. The new model includes project surgeries and mentoring enhancing the previous training.
- 4.99 Ten SAHSCP staff completed the pilot in March 2026. A further two cohorts are scheduled for 2026 with 15 staff currently enrolled. The plan was to increase practitioner level trained staff to 200 by 31st Jan 2025, this will not be met due to the reduced capacity in training cohorts. At the end of March 2026 there was 133 staff trained at practitioner level.
- 4.100 We have increased our Lead Level QI staff to 12 against a revised target of 20 (revised to take into account increased workforce headcount from 1800 to 2000), a further three staff are expected to complete the national training in 2026.

Digital Strategy

- 4.101 Digital Strategy funding of £0.500m has been approved to meet actions included in the Digital Strategy aimed to enhance accessibility and efficiency through use of digital tools to make health and care services more accessible and improve health and care outcomes. Services can assess this fund through applications to the Digital Project Board. To date £0.350m has been committed on delivery and management project.
- 4.102 Technology-based therapy and assistive solutions have been introduced across care homes, community hospitals and acute settings. These tools support cognition, falls prevention and mobility, with ongoing monitoring of use and clinical engagement. We have produced pathways for apps and data hosted on the Right Decision Service app.
- 4.103 The 24-month Care Technologist programme concluding in October '26. The role worked directly with the public to identify everyday technology solutions and reduce avoidable demand on clinical services. A formal quantitative and qualitative framework has been developed to capture the model, delivery

approach and impact for future use and engagement is underway to produce training for a Technology Enabled Care (TEC) first approach to assessments for all staff aligned to the HSCP.

- 4.104 Digital capability across the partnership has improved through service design training for key staff, digital skills and Near Me / Attend Anywhere training for over 400 staff. The Digital Strategy / TEC plan and Data Framework are all completed and working documents to support future technology enabled care, data driven decision making and remote service delivery.
- 4.105 Operational improvements include better (NHS and SAC) equipment loan management and reporting, progress on our data framework, and ongoing work to replace the case management system as part of wider digital modernisation.
- 4.106 Public engagement has been strong, with awareness sessions delivered to community groups and members as well as senior leaders on available technology enabled care options. Overall, the programme shows clear progress against national priorities and strengthens South Ayrshire HSCP's position for continued digital improvement.

Near Me – Systems Support Officer

- 4.107 Near Me systems support officer £0.040m was approved to extend the post previously funded by Scottish Government Near Me funding. The officer will continue to roll out near me in health and social care teams, increase awareness in teams and access to service users.
- 4.108 This project is now complete, the final few months of the extended investment allowed the Near Me Officer to upskill champions in each team to continue to maintain progress. The agreed programme of activity was met and the access to service pathways increased successfully. It was noted that there was greater uptake in some areas to others, however, this has been a successful innovation and improvement activity for SAHSCP and the wider areas who reached out to the Officer when in post.

Workforce Recognition

- 4.109 A workforce recognition fund of £0.025m was approved as part of the budget for 2025-26, this fund will be used over the years to promote HSCP employee roles in delivering health and social care services. This will include attendance at award ceremonies, delivery of events to celebrate professions.

PUBLIC HEALTH

- 4.110 Two projects have been approved aimed at improving public health, these are being led by the HSCP's Clinical Director. One project has now been completed, with spirometry access and testing still in progress.

Spirometry Access and Testing

- 4.111 Spirometry is used for the diagnosis and management of Chronic Obstructive Pulmonary Disease (COPD), asthma, and other respiratory conditions. Spirometry testing is recognised as the gold standard for the diagnosis, assessment, and monitoring of COPD. The number of people hospitalised with COPD in Ayrshire and Arran is above the National average, with higher admission rates recorded within areas of greater socio-economic deprivation.
- 4.112 The Spirometry pilot project is going to focus on people with COPD and will aim to deliver 1000 high quality spirometry investigations over an 18-month period.
- 4.113 Clinics are ongoing in Girvan, Ayr (Arrol Park and Fullarton practice) and have commenced in Troon (Templehill practice). Numbers are below predicted which has been discussed with IJB in the mid pilot report. By end of Dec 2025, 210 spirometry tests have been carried out.
- 4.114 Performance data for Oct 25 to Dec 25, highlighted 88 out of 115 available spirometry appointments were used. Quality of testing showed 91% recorded good technique. Patient satisfaction scores from July 25 to Sep 25 highlighted 85% reported service easy to access and 60% waited less than 2 weeks for a test.
- 4.115 All residents in South Ayrshire now have access to spirometry if required either via the pilot or their own practice continuing to perform the test.

Diabetes in Primary Care

- 4.116 Diabetes in primary care is investment in training nurses within GP practices to allow them to initiate long-acting insulin to those in need of this treatment. In Ayrshire and Arran at present there exists an inequitable service between GP surgeries. Only one GP Surgery in South Ayrshire works with the full portfolio of diabetic medications and can initiate long-acting insulin.
- 4.117 A nurse consultant will deliver the training, to Practice Nurses and GPs within Protected Learning Time. The nurse will also provide mentorship and support to practice nurses as they began this work in their practices. Training session took place on Insulin Initiation on 25th February for GPs and nurses and was very well attended, this will link in with the new injectable therapies, with access to 4 group sessions.
- 4.118 During this pilot 219 injectable therapies initiations have been carried out. Analysis of the first 100 reveals 80 patients who have now had a post initiation measurement of average blood glucose levels. In these 80 patients there has been a significant drop in glucose levels with all but 3 patients experiencing a reduction.
- 4.119 Performance indicators highlight a reduction in waiting time for insulin initiation with the number in South waiting at 29 out of a total 153 waiting in Ayrshire and

Arran. The reduction in glucose levels in this cohort significantly reduces overall risk of diabetic complications.

4.120 This pilot is now complete. South Ayrshire HSCP's Clinical Director is attending the GP subgroup on the 28th of April to request board funding for an Ayrshire wide injectables program.

5. STRATEGIC CONTEXT

5.1 The Improvement and Innovation projects align to the strategy objectives of the IJB as noted within each project's submission. The overall creation of the fund aligns with IJB objective "We are an ambitious and effective partnership".

6. IMPLICATIONS

6.1 Financial Implications

6.1.1 Financial investment is noted in the project; any recurring financial commitments will be factored into the annual year end process for the IJB.

6.2 Human Resource Implications

6.2.1 Investment in human resources is included within the improvement and innovation fund, where employment has been on a permanent basis Team Managers are managing the risk through workforce planning.

6.3 Legal Implications

6.3.1 There are no legal implications.

6.4 Equalities implications

6.4.1 There are any equality implications arising from the contents or recommendations from this report.

6.5 Sustainability implications

6.5.1 There are no environmental sustainability implications arising from the contents and recommendations of the report.

6.6 Clinical/professional assessment

6.6.1 The report has been prepared by the Chief Finance Officer.

7. CONSULTATION AND PARTNERSHIP WORKING

7.1 This report has been collated with information provided by the various leads for each project.

8. RISK ASSESSMENT

8.1 The purpose of the innovation and improvement projects is to reshape services to minimise risk in terms of financial sustainability and meeting increase in demand. All funding for the projects has been identified in the short term, there is risk that where a project is successful, and targets are being achieved that recurring funding may not be available for full implementation. This will be

monitored through budget and performance monitoring reports during the duration of the project and where appropriate prioritisation to resource allocation brought forward to the IJB for future approval.

- 8.2 Non-recurring funding also has implications in ability to recruit where specific resource is required to meet projects aims. In some instances, this may be managed through workforce planning and ability to offer permanent posts based on reduction to staffing establishment in the medium term through natural staff turnover. Budget holders are responsible for ensuring they manage within their service budgets this includes managing the staffing establishment in line with budget availability and making necessary changes to staffing establishment when non-recurring funding ends.

APPENDICES

Appendix 1 – Improvement and Innovation - Highlight Report

BACKGROUND PAPERS

N/A

REPORT AUTHOR AND PERSON TO CONTACT

Name: Lisa Duncan

Phone number:

Email address: Lisa.Duncan2@south-ayrshire.gov.uk

13th April 2026