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DIRECTOR'S INTRODUCTION



This is the 4th Annual Performance Report of the South Ayrshire Health and Social Care Partnership.

2018/19 has been a watershed year for the Partnership.

Increasing demand for services for older people because of demographic pressures led to a significant overspend in this area of the budget, as did an increase in the numbers of vulnerable children and young people who needed to be supported in specialist placements. These issues were the key drivers for an overspend in the Integration Joint Board budget at 31st March, 2019 of £3.3m. This overspend was met through the provision of additional temporary funding from South Ayrshire Council, which will require to be repaid over a period of four years.

A Significant Case Review was undertaken in 2018/19 which investigated the social work involvement with Sharon Greenop from Troon who was murdered in 2016. This review reported in 2019/20. It has led to significant changes in practice, internal procedures and new arrangements being put in place around the management and oversight of clinical and care governance.

During 2018 significant work continued to modernise services in South Ayrshire and to better integrate these. This saw, for example, in dementia, the approval of a new South Ayrshire Dementia Strategy; on-going work to continue to modernise the in-house Care at Home Service; the implementation of a Joint Functional Family Therapy approach in collaboration with the North and East

Ayrshire Partnerships to address a need for specialist early intervention family support designed to improve family resilience and ensure that more families remain together; an Ayrshire wide Community Phlebotomy Service was launched led by the South Ayrshire HSCP; and the IJB and the Council's Leadership Panel endorsed a joint approach to create new housing accommodation for older people, young people leaving the care system and for people with mental health issues and learning disabilities. As a first stage, a new housing development was acquired in Girvan which will provide new core and cluster housing for people with a learning disability.

Looking ahead as our services in South Ayrshire continue to develop with an ever increasing focus on local community provision, the Partnership has embarked on a significant transformational programme that will lead to better outcomes for individuals, while improving overall efficiency, meaning that more people will receive the support that they need in the on-going difficult financial climate. An example of this is our efforts to transform the care and support we provide at Biggart Hospital through a greater focus on rehabilitation.

However, I cannot finish without acknowledging the hard work of the many community volunteers, staff and colleagues from other sectors who make an important contribution to our service planning and community engagement, at locality level, through the work of our six locality planning groups.

Tim Eltringham,

Director of Health and Social Care



STRATEGIC CONTEXT

The South Ayrshire Health and Social Care Partnership was formally established on 1st April 2015 and brings together a wide range of health and social work services into a single operational delivery unit.

The Integration Joint Board, which is the principal governance body of the Partnership, is responsible for strategic planning, resource allocation and for overseeing the delivery of a full range of community health and social care services. These include: services for older people, adults, children and families and people in the Justice System in South Ayrshire. In 2018/19 it was also responsible for a number of Pan-Ayrshire health services relating to Allied Health Professions, Continence, Joint Equipment, Technology Enabled Care, Sensory Impairment, and the Family Nurse Partnership.

The Integration Joint Board approved its first Strategic Plan at its inaugural meeting on 2 April, 2015. A new Strategic Plan has been developed for the period 2018-2021 and this was approved by the IJB at its meeting on 27th June, 2018. This provides a 10-year vision for integrated health and social care services and contains a three-year strategic planning framework for 2018-21. It sets out an agreed programme for the Partnership and how it will use its resources to integrate services in pursuit of National and Local Outcomes

South Ayrshire Health and Social Care Partnership has responsibility for the delivery of Community Planning Partnership priorities for health and wellbeing, as outlined in the Local Outcomes Improvement Plan (LOIP). The Health and Social Care Partnership (HSCP) vision is:

WORKING TOGETHER FOR THE BEST POSSIBLE HEALTH AND WELLBEING OF OUR COMMUNITIES



To deliver on this vision the Integration Joint Board had agreed the following Strategic Objectives for the period 2018 - 2021:

- We will protect vulnerable children and adults from harm.
- We will work to provide the best start in life for children in South Ayrshire.
- We will improve outcomes for children who are looked after in South Ayrshire.
- · We will reduce health inequalities.
- We will shift the balance of care from acute hospitals to community settings.
- We will support people to exercise choice and control in the achievement of their personal outcomes.
- We will manage resources effectively, making best use of our integrated capacity.
- We will give all of our stakeholders a voice

These Strategic Objectives will be underpinned during this planning period by these values:

All staff and partner organisations will be: CARING • POSITIVE • SAFE • RESPECTFUL • SUPPORTIVE

We will demonstrate: ENGAGEMENT • INTEGRITY

LEAD PARTNERSHIP RESPONSIBILITIES

In 2018/19 South Ayrshire Health and Social Care Partnership was the Lead Partnership for the following services on behalf of the three Ayrshire Health and Social Care Partnerships:



Continence

The objectives of the service are:

- to offer intermediate clinics across
 Ayrshire the Continence Team delivers
 clinics in 12 locations throughout
 Ayrshire, including a monthly clinic
 on Arran. The number of clinics has
 increased over the last four years and
 the service aims to develop these where
 and when the need arises, thus allowing
 patients to access services locally.
 The aim is to allocate patients a clinic
 appointment within eight weeks;
- to offer an advisory and educational service to NHS clinicians thus enhancing

the quality of evidence-based continence care being delivered to patients and carers. The service delivers an annual programme of education;

- to offer an advisory service to patients, carers and voluntary organisations;
- to provide a 9am-5pm, Monday to Friday helpline; and
- to improve motivation and self mangement thus reducing reliance on continence products.

Sensory Impairment

A Pan-Ayrshire Sensory Locality Plan and Action Plan 2014-2024 was developed to better support people with sensory impairment needs. The Plan was developed through involvement with all partners across Ayrshire, the Third Sector and local people. A six-year campaign to enhance access to public services across Ayrshire for people using British Sign Language was launched in November 2018. The Ayrshire Shared British Sign Language (BSL) Local Plan 2018-24 is a partnership between Ayrshire College; East, North and South Ayrshire Councils; East,

North and South Ayrshire Health and Social Care Partnerships; and NHS Ayrshire & Arran.

The Scottish Government wants Scotland to be the best place in the world for BSL users to live, learn, work and visit.

The Ayrshire Shared Plan sets out what partners will do to support BSL users in Ayrshire, covering early years and education; training and work; health, mental health and wellbeing; transport; culture and the arts; justice and democracy.





It describes the actions the eight partners will take between 2018-24, including:

- Improving access to a wide range of information and public services in BSL
- Investigating the level of BSL of teachers and support staff in schools
- Enabling parents who use BSL to be fully involved in their child's education
- Improving the experience of students who use BSL, when they move from school to college, university, training and the world of work
- Improving access to health care and mental health services in BSL
- Removing obstacles to BSL users participating.

Helen Morgans-Wenhold, Local Authority Lead for the British Deaf Association welcomed the move as a positive step:

"The Ayrshire Shared BSL Plan places the region in a great position for promoting access and inclusion for Deaf BSL users. We congratulate Ayrshire for involving BSL users in all levels from the start to the end. We wish you great success for the next six years."

Falls Prevention

In Ayrshire and Arran the strategic approach to falls is led by AHP Services and given the Lead Partnership arrangements, South Ayrshire HSCP is providing oversight and leadership in this area.

Effective falls prevention and management is making an essential contribution to reducing the negative impact of falls on people's independence and quality of life, and reducing demands on health and social care services.

Positive Steps falls prevention and management information resources have been updated and are available in community venues and 220 care at home staff and 338 care home staff have been trained in falls prevention and management. Our community-based exercise programme 'Invigor8' delivered through Leisure Services has continued to develop with 525 new individuals undertaking the programme across Ayrshire in 2018/19 and people with multiple long-term conditions now receiving falls prevention intervention as part of our Healthy and Active Rehabilitation Programme 'HARP' again across Ayrshire.

Allied Health Professionals (AHP's)

The process of Allied Health Professionals being devolved to the three Ayrshire partnerships took place during 2018/19. The MSK (Musculoskeletal) service and Podiatry service have remained as Pan-Ayrshire services.

Family Nurse Partnership

The Family Nurse Partnership Team continues to deliver the programme to 1st time parents aged 19 and under. The case study below provides an example of the support which can be provided:

CASE STUDY -Family Nurse Partnership 'Sienna'



Sienna's life was spent in and out of care from the age of 6. At the age of 16, Sienna got involved with the wrong crowd and ended up drinking alcohol and taking legal highs. At this time, Sienna moved out from her foster carer's home and went into supported care and from there ended up in a homeless accommodation, Sienna met someone, who was to become the father of her child, who she moved in with very quickly. Sienna's partner became controlling and physically abusive towards her.

Sienna then discovered she was pregnant but her partner was not really interested. Around this time Sienna was invited out by relatives for the day and her partner started to make threats about what was going to happen to her when she returned home that night. Sienna was really frightened and decided not to return and put herself and her unborn baby at risk so she went to stay with a friend. From there, Sienna moved into supported care/living.

It was when Sienna was staying with her friend that she was offered the Family Nursing Partnership Programme and decided to join. The programme made Sienna think about how she would bring up her baby. Sienna learned about babies' brain development, feeding, caring for her baby and their health and how to look after her own health. One of the pieces of work Sienna did was learning about how smoking could affect her unborn baby. At this time, Sienna was smoking 20 cigarettes a day and decided to stop. Sienna's baby is now 5 months old and she has not smoked since giving birth.

Due to the risks around Sienna and her baby, there was be a Pre-Birth Case Conference

and there was a chance that Sienna's baby may be placed on the Child Protection Register. Sienna was really scared about the meeting and how it would go and was worried how she would be able to get across her thoughts and feelings. The Family Nurse helped Sienna to prepare for it by looking at the SHANARRI wheel. This helped Sienna feel more confident about what she was going to say and made her feel well prepared for the meeting. At the meeting they decided that the baby's name did not have to go on the Child Protection Register. Sienna was so pleased.

Sienna's baby is now 5 months old and she now looks forward to the future and family days out. Sienna has a really good friend but when she goes to college and mother and toddler groups, she knows that she will meet more friends. Sienna now feels really positive about her and her baby's future. Sienna is planning for her own and her baby's future. She really wants to pass her driving test and would also like to get a part-time job and start night classes, eventually completing a course in beauty therapy. Sienna would also like to have her own home and give her baby a good happy and stable life.

According to Sienna:

"I think the Family Nurse helps people to think about how they are going to bring up their child, learning about their child's health and their own health. It helps people to make changes and builds your confidence and self-esteem. It makes you feel as if you have achieved something that you never thought you would do. I feel that I can really trust my Family Nurse and I can phone and seek advice or support from her whenever I need to."





NATIONAL HEALTH AND WELLBEING OUTCOMES

The Scottish Government has set 15 National Outcomes against which progress will be measured towards the aspirations for Integration as set out in the 2014 Public Bodies (Joint Working) (Scotland) Act. These Outcomes guide the activity of the South Ayrshire Health and Social Care Partnership. They are supported by a core suite of 23 National Performance Indicators. This report sets out local progress against these Outcomes. In addition Appendix 1 details the 23 National Indicators and trends against time.

Health and Wellbeing Outcomes

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

9. Resources are used effectively and efficiently in the provision of health and social care services.

National Outcomes for Children

- 10. Our children have the best possible start
- 11. Our young people are successful learners, confident individuals, effective contributors and responsible citizens.
- 12. We have improved the life chances for children, young people and families at risk.

National Outcomes for Justice

- 13. Community safety and public protection.
- 14. The reduction of re-offending.
- 15. Social inclusion to support desistance from offending.

In addition to the Core Indicators noted against the National Outcomes in this report, the Ministerial Strategic **Group for Health and Community Care** (MSG) proposed a set of measures to track performance in Integration Authorities. These are discussed in the appropriate section.

NI - National Indicator

(p) - provisional
HSCP PF - reported through HSCP Performance Framework
(s) - a statistically significant difference in the percent positive result between SA HSCP area and Scotland as reported through the Health and Social Care Experience Survey.
HCES - Health and Care Experience Survey result. This survey is carried out every two years with the last survey results being for the year 2017/18.



HEALTH AND WELLBEING OUTCOMES

OUTCOME I

People are able to look after and improve their own health and wellbeing and live in good health for longer.



94% of adults surveyed reported that they were able to look after their health very well or quite well. (HCES)



16.1% of adults in South Ayrshire smoke compared with 18.8% across Scotland.

The national action plan, Raising Scotland's Tobacco-free Generation, was published in June 2018. The Tobacco Control Action Plan for Ayrshire (2018-21) was agreed by partners in September 2018 and is now being implemented.

The focus of the plan is on cessation, pre prevention and protection. This plan will be overseen by the Ayrshire and Arran Tobacco Free Alliance.



The South Ayrshire rate of alcohol related hospital stays per 100,000 rose from **776.3** in 2016/17 to **831.2** in 2017/18 compared with a reduction across Scotland of **737.8** to **718.5**.



The South Ayrshire rate of drug related hospital stays per 100,000 rose from **300.21** in 2016/17 to **316.6** in 2017/18. Scotland also saw a rise from **220.9** to **236.5**.

NUMBER OF DRUG DEATHS PER YEAR HAS RISEN ACROSS SCOTLAND. SOUTH AYRSHIRE FIGURES ROSE FROM 12 IN 2017 TO 15 IN 2018.

The South Ayrshire Alcohol and Drug Strategy 2018-21 "Recovery is Reality" was approved on 17th April 2019. The South Ayrshire Alcohol and Drug Partnership (ADP) recognises the significant harm which can result from dependent substance use, including the increased risk of an alcohol or drug related death. Alcohol and drug related presentations at acute services continue to be higher in South Ayrshire than the Scottish average.

There has also been an increase in drug related deaths, often older people who have experienced complex physical and mental health and social harms, related to their substance use. The ADP is committed to working together to develop innovative, flexible and assertive outreach approaches to engage with those most at risk of alcohol or drug related deaths and provide support tailored to their needs.

The ADP is committed to implementing the Everybody Matters: Preventing Drug Related Deaths: A Framework for Ayrshire & Arran 2018-2021 and take forward the appropriate actions to implement the recommendations from the national Dying for a drink, 2018 report.

People, including those with disabilities, long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home in a homely setting in their community.



OUR ANNUAL INSPECTION, BY THE CARE INSPECTORATE, GRADED OUR SOUTH AYRSHIRE CARE AT HOME SERVICE AS "GOOD" ACROSS ALL QUALITY THEMES.

Feedback from people using the services:

"Very happy with all my regular carers, friendly and helpful."

"On behalf of my relative they are completely happy with the service they get from the care at home service. They feel very comfortable with all the carers who visit them. They go

above and beyond their job".

"The service has very high standards and has treated me with care and respect".

"Quite frankly they have been a lifeline!"

The Care at Home Reablement service provided people with intensive support from occupational therapists and reablement care at home staff for a period of around 6 weeks. This intensive support helps people to regain their skills and independence after an illness or a spell in hospital. Reablement is not suitable for everyone, but for those who receive this service the target set for 2018/19 was met and 40% needed no further care support at the end of their period of Reablement.



of adults supported at home who agreed that they are supported to live as independently as possible. (HCES)

SUPPORTING PEOPLE WITH DEMENTIA

- Post Diagnostic Support.

Everybody newly diagnosed with dementia in South Ayrshire is offered a year of post-diagnostic support delivered by a professional with training appropriate to that person's needs. 97.6% of people referred received 12 months dementia post-diagnostic support in NHS Ayrshire and Arran compared with 83.9% across Scotland.

DISABLED ADAPTATIONS - Private Sector Housing

Total Grants and Loans	2017/18	2018/19
Total no. of cases approved	162	190
Total amount spent	£624,423	£681,933

SUPPORTED ACCOMMODATION IN GIRVAN

The South Ayrshire Health and Social Care Partnership is working in partnership with the Strategic Housing Team in the Council to develop supported accommodation for people with Learning Disabilities. People will be offered their own tenancy within a cluster of 11 flats and will be individually supported by a staff team located at the cluster.

Support will be flexible, responsive and designed to empower and enable people to live as independently as they can, to improve their health and wellbeing, reduce inequalities and social isolation, together with creating real opportunities to further engage with a range of supports and services within the community. The use of technology will be a key feature of the development.



OUTCOME 3

People who use health and social care services have positive experience of those services, and have their dignity respected.



of South Ayrshire adults supported agree that they have had a say in how their help, care or support was provided. This is higher than the national average of 76%. (HCES)



of adults who receive any care or support rated it as excellent or good. This is higher than the national average of 80%. (HCES)



of people reported positive experiences of the care provided by their GP practice. This is higher than the national average of 83%. (HCES)

SFLF DIRECTED SUPPORT



Option 1 - Direct Payment

Option 2 - Individual Service

Fund

The uptake of SDS Options 1 and 2 has increased from **88** in 2013/14 to **221** in 2018/19. Option 1 levels increased from **88** to **107** and Option 2 increased from **0** cases in 2013/14 to **114** in 2018/19.

OPTION I - Case Study

Jacqueline was diagnosed with multiple sclerosis when she was 19yrs old. She lived at home with her mother and was able to manage the symptoms of her condition with minimal input every morning from a local care company and daily family support.

When she was 24yrs old her mother passed away and combined with a notable deterioration in her condition, Jacqueline was struggling to maintain her independence. A review of her care and support needs was carried out by social work and it became evident that additional support was now required to maintain Jacqueline in her own

home and enable her to be part of her community.

Having been made aware of the SDS options, Jacqueline considered that Option 1 a Direct Payment could provide her with both the consistency and flexibility she required from her care and support. With support from Ayrshire Independent Living Network (AILN) she placed an advert in the local job centre and recruited a personal assistant for 30 hours per week. This allowed Jacqueline to be supported by the same person every day and to have choice over when and how her care and support would be delivered.

OPTION 2 - Case Study

Gordon was admitted to hospital after experiencing a stroke. He lived at home with his wife who suffered from her own health problems. On discharge, Gordon required some personal care support at home as part of his rehabilitation plan. In developing his support plan along with a social worker, Gordon wanted to have choice and control over who provided his support and when it would be delivered. Accessing support through Option 2 (Individual Service Fund) enabled Gordon to use a local care company and have regular contact with them to ensure his care and support was delivered in a way that met his outcomes.





Health and social care services are centred on helping to maintain or improve the quality of life of service users.

87% of adults supported at home agreed that their services and support had an impact in improving or maintaining their quality of life. (HCES)



INVIGORATE

Invigor8 is an evidence based falls prevention the floor and back up, floor work, tai chi programme for the over 60's. More people are admitted to hospital for falls related incidents than any other condition. Having a fall can affect people in many ways ranging from soft tissue damage, fractures or even death. People also lose confidence and can become isolated by having fall(s) or being fearful of having a fall.

Invigor8 classes work on balance, strength, flexibility, endurance, how to get down onto

and confidence building as well as socialisation. The programme delivers excellence through the operation of Invigor8 classes throughout Ayrshire; maintaining people's independance, improving or maintaining functional ability to do every day tasks, socialising to improve mental health and reduce loneliness.

In 2018/19 there were 271 new referral clients and 8393 attendances at classes.

ONE. TWO THREE AMIGOS!

The Three Amigos, Angela, Betty and Mary, take part in South Ayrshire Council's Invigor8 classes. Invigor8 aims to reduce the risk of falls for over 60s by improving mobility, strength and balance through physical activity. It also helps to reduce social isolation by bringing the local community together.

"I only go out once a week so the class gets me out, helps me meet people and improves my balance through the exercises" - Angela



ONE, TWO THREE AMIGOS! (Continued..)

After a stroke, Angela Rennie who is 72 years young, was referred into HARP, the NHS Healthy and active Rehabilitation Programme, where she received poststroke support and physical activity.

After progressing through HARP, Angela was referred to Invigor8 where she experienced many physical and mental benefits saying:

"As time has gone on I get better and better, even my family mentioned that I look better and I'm much more confident."

Our second amigo, 78 year old Betty Campbell, self-referred after a knee replacement, but only a year later contracted sepsis and was placed in intensive care requiring kidney dialysis. Astonishingly, Betty recovered only to fall and break her leg months later. However, this very determined lady rejoined Invigor8 saying:

"Invigor8 is a great day out, Karen is good fun and an excellent Instructor. For me the class ticks all the right boxes. It gets me out of the house, socialising and doing exercise."

Completing the trio, Mary Hodkinson, 86 was referred by a physiotherapist due to polymyalgia which causes painful inflammation in her muscles and joints. Mary attends to improve her balance and strength, but most importantly, to have tea and chat after the class.

"Before I came to Invigor8 the only time I went out was for the tea club I am a member of. Now I can go out when I feel like it. I am much more confident especially with steps and kerbs."



EXAMPLE OF GOOD PRACTICE: Girvan Opportunities – Learning Disabilty Service

At Girvan Opportunities, our aim is to ensure each individual service user has a positive, outcome focused experience of our service. To deliver this, we have a wide range of classes and tools available that can be adapted to meet each individual need. We always ensure our service users are treated equally and are respected and listened to in all aspects.

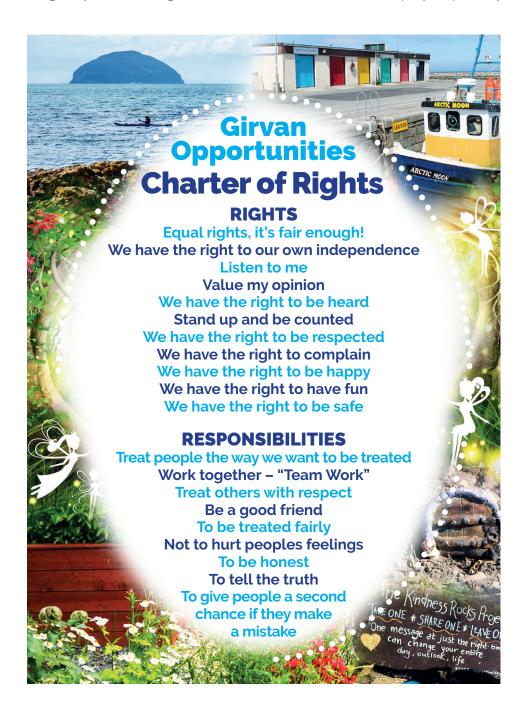
One way in which this is demonstrated is through our Self-Advocacy Group. The group is made up of service users who want to be involved and have a say in making choices and creating positive outcomes, not only within the service, but also within their local community. When the group was established,

they created their own Charter of Rights for Girvan Opportunities, based on the principles from the Charter of Involvement. They worked together to research, discuss and establish their own rights when attending the service and also, their own individual responsibilities as service users.

The group worked very hard to create Girvan Opportunities, unique Charter of Rights and they feel very passionately about it, as it helps each individual know their rights, ensure they are listened to and that they are respected when attending the service, by fellow peers, staff and other agency's accessing the

service. The group were visited by a member of the National Involvement Network, who was more than impressed by the service user's dedication and hard work.

The Self-Advocacy Group recently gave our Charter of Rights a bright new design that can be displayed in our social support room and throughout the building. After consultations with staff on how they wanted the Charter to look, the design they have created has captured Girvan Opportunities perfectly with elements of the service as well as the community projects that they have been involved in displayed proudly on it.



Health and social care services contribute to reducing health inequalities.

PREMATURE MORTALITY

The death rates for those aged under 75 rose from **380** in 2017 to **419** in 2018. This is lower than the Scottish average of **432**.

Early deaths from cancer would be 32% lower if the levels of the least deprived area were experienced across the whole South Ayrshire population.

The most deprived areas have 42% more deaths than the overall average.



LIFF FXPFCTANCY

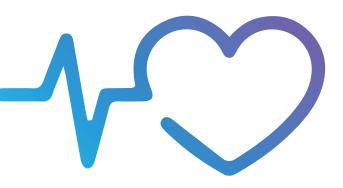
Life expectancy at birth in South Ayrshire in 2015-2017 was **77.2** years for males and **81.1** years for females. The 2015-2017 life expectancy estimate of **77.2** for males residing in South Ayrshire was marginally higher than the average for Scotland as a while (**77.0**). The life expectancy estimate of **81.1** for females residing in South Ayrshire was approximately the same as the Scotland average.

There are variations in life expectancy across South Ayrshire. A boy born in Holmston & Forehill can expect to live to **82.5** years of age, while a boy born in Ayr North Harbour, Wallacetown & Newton South might live to **68.9** years of age. A girl born in Muirhead can expect to live to **85** years of age, while another born in Ayr North Harbour, Wallacetown & Newton South might live to **76**.

As a Partnership we recognise the importance of prevention and early intervention approaches in improving opportunities and life chances for everyone in South Ayrshire. We believe that our prevention and early

intervention approaches should be embedded across the life course; from pre-birth and parenting support to ensuring our youngest children achieve their developmental milestones, to supporting our older population who may be socially isolated and turn to substances as coping mechanisms.

We believe that everyone has a role to play in prevention and helping to address the social causes of poor health and inequality. We are committed to working in partnership to reduce the gap in outcomes for individuals living in the most and least deprived areas within our communities.



CASE STUDY -Richard's Story



My name is Richard and I began my recovery journey in July 2018. A chance meeting with a Peer Development Worker while waiting for an appointment with my Justice Worker saw me invited to a support group called PING (Peoples Involvement Networking Group).

At the time I was struggling badly with alcohol and my relationship had broken down, so I agreed to go along. I was 51 years old and going to my first support group, it was terrifying but I went. I was made so welcome and soon felt more at ease, even being able to share a bit about my life and my addiction. I became a regular at PING and was meeting new people and gaining a wider support network every week. New opportunities came along and I attended a Men's Group where we looked at topics such as self-esteem, confidence and wellbeing. The knowledge and enthusiasm of the peers I was meeting was inspirational and my recovery was progressing well.

With Recovery Ayr I attended a Scottish Recovery Consortium event in Easterhouse with talks and workshops and the scale of the recovery movement was becoming apparent. I was honoured to be asked to say a few words about my journey at an event PING were speaking at in Dreghorn. All the opportunities being offered to me made me more determined to stay sober. I was becoming

part of a fantastic recovery family and learning more everyday not only from peers but from new friends on a similar journey.

I enrolled on the "Steps to Excellence" course looking at how our mind works and how we perceive things. At this time in my recovery as I wasn't working, keeping busy was important. At a PING meeting VASA came in to discuss volunteering opportunities and in a couple of weeks I was fixing bikes a few hours a week. Volunteering became part of my routine and I've volunteered at River Garden Auchincruive, RecoveryAyr and helped with the refurbishment of McAdam House reception. I am now volunteering at the weekly PING group.

Working with the Alcohol and Drug Partnership and Recovery Ayr was letting me plan my future and set goals to aim for and achieve. I completed the ADP Steps to Change course and then moved onto the 14 week Gateway Day Programme where I gained my REHIS certificate and was naloxone trained. Armed now with a desire to work in the field, supporting others, I applied and was accepted for the ADP Stepping Stones course at Ayrshire College with the hope of being accepted onto the ADP Volunteer Peer Worker (VPW) project. I'm delighted to say I was offered a place on the PWP and started college at the beginning of August. I still attend PING and am now volunteering to help run the group. I was recently invited to join the Steering Group to have an input on the way the group runs and ideas moving forward.

People who provide unpaid care are supported to reduce the potential impact of their caring role on their own health and wellbeing.

The Draft Adult Carers Strategy was developed in October 2018. Approximately 230 carers and other interested parties were able to provide their views and emerging themes were:

- I am recognised and valued in my caring role
- I am supported in my caring role
- I am able to take a break from caring and look after my own health
- I am not defined by my caring role



93% of carers who care for a person receiving services from the Partnership stated that they felt supported to continue in their caring role.

There was a 100% increase in the number of Carers Support Plans/Assessments completed in 2018/19 compared with those completed in 2017/18. 69 in 2017/18 rising to 139 in 2018/19.

TRAINING

As required by the Carers (Scotland) Act 2016 polices such as the Short Break Statement and Carers Eligibility have also been developed and are available online.

Training was delivered to over 70 frontline social work staff in February and March 2019 covering their role and responsibilities and providing them with practitioner guidance.





CARERS DAY CELEBRATES HIDDEN NETWORK IN PRESTWICK, TROON AND AYR

The tireless work of carers who put the lives of others before their own has been celebrated in South Ayrshire. Carers Day was held at Prestwick Academy on Friday 5 October 2018, with the event recognising carers and the contribution they make to their families and communities.

For the first time event organisers at the school invited carers outside of Prestwick, with the group of 60 VIP guests also including people from Ayr North and Troon. Carers and cared-for people were treated to an afternoon themed around the 100th anniversary of the end the First World War.

Guests were treated to entertainment including a choir from Kingcase Primary School with highlights including lunch and relaxing activities like nail treatment and soothing massage.

To help break down barriers and raise awareness of available local networks the event was supported by the South Ayrshire Health and Social Care Partnership; Crossroads; South Ayrshire Carers Centre; South Ayrshire Dementia Support Association (SADSA); and South Ayrshire Life.

People who use health and social care services are safe from harm.

ADULT PROTECTION REFERRALS

There were **955 Adult Protection Referrals** during 2018/19.

Response rates to protection concerns (inquiries completed within 5 working days) have improved from **70% in 2017/18** to **83% in 2018/19**.



There were **1151 Vulnerable Adult referrals** during 2018/19 which is an increase on the previous year of 815.



The South Ayrshire HSCP continues to work with Trading Standards to provide safeguards against mail/phone scams and unscrupulous doorstep callers.





of adults at home agree they felt safe which is higher than the national average of 83%. (HCES)

KEEP SAFE

Keep Safe is an Ayrshire wide initiative currently being implemented by the South Ayrshire Health and Social Care Partnership, Police Scotland and local providers to provide support and advice to vulnerable people within our communities.

Keep Safe works with a network of local businesses to create safe places for

disabled and vulnerable people to go if they are lost, scared, need help or if they are a victim of crime.



Suitable premises identify themselves by displaying the Keep Safe/I Am Me window sticker.

People who work in health and social care services are supported to continuously improve the information, support, care and treatment they provide and feel engaged with the work they do.



STAFF SURVEY RESULTS – iMATTERS (2018)

74% of employees would recommend the organisation as a good place to work. This is slightly higher than the results of the previous year for 2017 which showed 72% against this question. 1983 Partnership staff were surveyed with 1318 responses representing a response rate of 66%.

CHAMPIONS BOARD

The Champions Boards provide platforms for young people to talk directly to Council Staff, elected members and service providers to discuss the challenges that being in care can bring, and how these challenges can be faced and overcome with the right support.

Between November 2017 and February 2019 'Champions for Change', South Ayrshire Champions Board has designed and delivered corporate parenting awareness sessions to 1,005 corporate parents across South Ayrshire, participants include:

- Elected members, South Ayrshire Head Teachers and targeted groups of teaching staff, Locality Planning groups, SAHSCP Integration Joint Board
- Police Scotland
- · CAMHS
- Community Planning Partnership
- Voluntary sector colleagues and partners including Barnardo's, Girvan Youth Trust, Community Learning and Development teams
- Human Resources
- Procurement
- Health and Social Care Partnership planning policy and performance team





- Children's health care and justice teams
- South Ayrshire Foster carers
- Employability and Skills team
- · Skills Development Scotland
- Housing teams including teams from Viewfield Gate and Succession House, Maybole and Girvan, Troon, Housing Options and housing staff based in Riverside House.

All sessions closely reference The Scottish Care Leavers Covenant and have been developed and are delivered by young people living in South Ayrshire with lived experience of care. The sessions provide a platform for young people's voices to be heard through animation and film with a focus on developing local solutions to local issues using a strengths based approach.

An online module has been developed for all South Ayrshire Council staff as mandatory induction training and this module is almost ready to be implemented.

QUALIFYING THE WORKFORCE

Working in partnership with colleagues in East and North Ayrshire HSCPs has enabled the sharing of resources and the joint planning of learning opportunities for staff:

ADULT SE	ADULT SERVICES RELATED TRAINING												
COURSE TITLE	NO OF ATTENDEES	SERVICE/AGENCY											
Medication	255	Adult and Community Care											
Moving and Handling including Refresher, Observations and Driving Escorts	456	Adult and Community Care											
Food Hygiene	225	Care at Home, Adult Residential											
Dementia	70	Adult and Community Care											
Epilepsy	37	Day Care and Adult Residential											
Adult Support and Protection	30	15 agencies including HSCP, NHS, Voluntary and Private											
MAPPA	174	Day Care and Adult Residential											
Crossing the Acts	15	Adult and Community Care											
Defensible Decision-making	9	Adult and Community Care											

CHILD SEF	CHILD SERVICES RELATED TRAINING											
COURSE TITLE	NO OF ATTENDEES	SERVICE/AGENCY										
Child Development and Trauma	22	All										
Supporting those in Recovery	31	Children's Services, Addictions, Housing, Voluntary sector										
Inter-Agency 2-day Child Protection	21	All										
Neglect	61	All										
Mental Health and Young People	26	All										
Sexually Harmful Behaviour and Risk	87	All										
5-day Child Protection	32	All										
Child Protection Roles and Responsibilities	27	All										

There is a requirement for staff in particular services to be registered with the Scottish Social Services Council (SSSC).

There are six people in the Partnership undertaking SVQ courses of study to obtain or maintain SSSC Registration.

The following table shows the number of staff that completed an SVQ course in 2018/19:

QUALIFICATION	LEVEL	NO. OF STAFF	COHORT
SVQ	2	2	Care at Home
SVQ	3	4	Care at Home
SVQ	3	4	Children and Families



ATTENDEES FROM
"Working With Difficult, Dangerous
and Evasive Service Users"

"I found it extremely useful to watch back and reflect what I would change or what I could do to improve my practice"

"It has given me a better understanding of people's behaviour"

"I will consider my approach in future when dealing with challenging situations"

ATTENDEES FROM "Neglect Training"

"The toolkit will help improve practice and early identification of neglect"

"Very helpful to have multi agency training"

"Neglect is the responsibility of everyone"

PRACTICE TEACHING

South Ayrshire Health and Social Care Partnership has a well-developed practice learning programme offering practice learning opportunities for social work students to undertake work experience in a social work setting.

In 2018/19, 20 placements were provided totalling 1680 days and as part of the process, students and educational providers were asked to evaluate their experience. Feedback included:

"As usual South Ayrshire student placements are well prepared and they provide valuable learning opportunities for our students.

Many thanks to the Justice Team who offered this opportunity."

The HSCP has been working in partnership with the University of the West of Scotland and Children and Adolescent Mental Health Services (CAMHS) to further develop integration and practice learning through enhanced student placement programmes. This programme builds on South Ayrshire's Social Work Degree Programme and the BSc



Mental Health Nursing Programme which are both delivered and supported by the University of the West of Scotland.

The main focus of the exchange programme is centred on Children's Services specifically around Children and Family Locality Teams and Child and Adolescent Mental Health Services (CAMHS). The main component of the programme enables students from Social Work to spend a proportion of their 2nd Year placement in the CAMHS Services. Nursing student who are in Year 2 or Year 3 and have CAMHS as their designated base placement will spend a proportion of their placement with the Children and Families Locality Team.

OUTCOME 9

Resources are used effectively in the provision of health and social care services, without waste.



85% of adults supported at home agreed that their health and care services seemed to be well coordinated. This is higher than the national average of 74% across Scotland. (HCES)

27% of health and care resource in South Ayrshire in 2018/19 was spent on hospital stays where the patient was admitted as an emergency. This is a reduction from 31% in 2017 although is higher than the national average of 24%.



MINISTERIAL STRATEGIC GROUP FOR HEALTH AND COMMUNITY CARE **CORE INDICATORS**

In addition to the Core Indicators noted against Chief Officers from each Integration Authority the National Outcomes in the previous section and in Appendix 1, the Ministerial Strategic Group for Health and Community Care (MSG) has proposed the following measures to track performance in Integration Authorities:

- 1. Unplanned Admissions;
- 2. Admissions from ED
- 3. ED Attendance
- 4. Unplanned Bed Days
- 5. Delayed Discharges
- 6. End of life care; and
- 7. The balance of spend across institutional and community services.

were invited to submit local trajectories on the proposed measures to the Scottish Government in January 2018 for the years 2017/18 and 2018/19.

The South Ayrshire Partnership chose 2015/16 as the baseline year for all indicators with the exception of delayed discharges, where the baseline year is 2016/17.

The graphs below show the South Ayrshire actual performance against the trajectories set for 2018/19. Updated trajectories for 2019/20 were submitted in January 2019 and will be reported against in the 2019/20 Annual Report.

PERFORMANCE SUMMARY

	MEASURE	OBJECTIVE FOR 2018/19	ACTUAL PERFORMANCE	OBJECTIVE STATUS
1	Unplanned Admissions	Reduce growth to 8%	10.4% increase	X
2	Admissions from ED	22% decrease	31.2% decrease	✓
3	ED Attendance	12% decrease	8.4% decrease	X
4.1	Emergency bed days (Acute)	Reduce growth to 1%	10.7% decrease	✓
4.2	Emergency bed days (MH)	14% decrease	27.6% decrease	✓
4.3	Emergency bed days (GLS)	69% decrease	44.6% decrease	X
5	Delayed Discharges (All)	25% decrease	14.4% increase	X
6	End of Life Care - % of last 6 months of life in community.	86%	87%	✓
7	The Balance of spend across institutional and community services.	Maintain		



x - Objective not met



UNPLANNED ADMISSIONS 2018/19

18,227

Ø 17,829

ED ATTENDANCE 2018/19

35,769

34,349

DELAYED DISCHARGES 2018/19

21,536

Ø 14,120

SOUTH AYRSHIRE HSCP



TRAJECTORY

ADMISSIONS FROM ED 2018/19

10,612

12,038

EMERGENCY BED DAYS (ACUTE)

109,210

Ø 123,546

LAST 6 MONTHS OF LIFE 2018/19

87%

Ø | 86%

TRAJECTORY MET



TRAJECTORY NOT MET

| CHILDREN'S | OUTCOMES

OUTCOME 10

Our Children Have The Best Possible Start In Life.



BREASTEFFDING

The percentage of babies who are exclusively breastfed at 6-8 weeks has decreased over the past year from **21.8%** in 2016/17 to **20.5%** in 2017/18. The NHS Ayrshire and Arran position in 2017/18 was **18.1%** and Scotland was **30.7%**.

Three breastfeeding peer support workers employed by the Breastfeeding Network were in post by February 2019 and will target support in the immediate post-natal period to women who breastfeed following caesarean section. The peer support workers are based at Ayrshire Maternity Unit and work closely with the infant feeding team. Work is underway to develop processes to ensure services including midwifes, health visitors and assistant nurse practitioners work in tandem to support breastfeeding families. All schools and early years establishments have been encouraged to sign up to the Breastfeed Happily Here scheme. Across Ayrshire over 400 premises have signed up to the scheme demonstrating their support for breastfeeding women when they are out and about with their babies, helping to normalise breastfeeding in our communities.

	SCOTLAND	SOUTH AYRSHIRE
2012/13	26.1%	22%
2013/14	27.1%	23.8%
2014/15	27.2%	22.4%
2015/16	28.2%	21%
2016/17	30.3%	21.1%
2017/18	30.7%	20.5%

HEALTHY WEIGHT IN PRIMARY ONE



The percentage of children with a healthy weight in P1 has been above the national level for the past two years and increased from **77.0%** in 2016/17 to **78.0%** in 2017/18 in South Ayrshire. The national figure across Scotland was **76.5%** in 2017/18. The JumpStart Choices programme continues to be delivered across South Ayrshire to children as part of a school based healthy living programme.

DEVELOPMENTAL MILESTONES

From 2016/17 to 2017/18, the overall percentage of those reaching the developmental milestones at the time of their 27-30 month review has increased. The overall number of reviews has decreased and the number of those reaching milestones has risen from **702** in 2016/17 to **738** in 2017/18. South Ayrshire performance is higher than both the national and Ayrshire and Arran level.

Speech, Language and Communication is the domain where the least number of children are reaching their milestones and this area has shown a decrease over the past two years. This pattern is evident across Scotland with SLC being the area where the least number of children are reaching milestones nationally. The Universal Health Visiting Pathway has been fully implemented. Outcome data is currently available from reviews undertaken at 11-24 days, 6-8 weeks, 13-15 months and 27-30



months. This has led to increased contact with families which has enabled early intervention approaches to be used. The introduction of the 13-15 month review should enable staff to identify concerns earlier and facilitate strategies to be put into place to help more children reach their developmental milestones by 27 months.

P1 Children in South Ayrshire have higher than average levels of NO dental caries, although performance has decreased slighltly from 76.7% in 2016 to 75.6% in 2018. South Ayrshire has a higher level compared with 69.4 across Ayrshire & Arran and 71.1% across Scotland.

The rapid progress made initially following the introduction of the Childsmile programme has slowed. Additional activity is needed to address persistent oral health inequality; tooth decay rates continue to be higher amongst children from more deprived backgrounds. The NHS Ayrshire and Arran Activity Plan 2019/20 is in development to include specific activity for targeted groups including care experienced children and young people, children from travelling communities and children with additional support needs. In South Ayrshire, Fairer for Scotland funding provided Childsmile Flouride Varnish Applications in five additional schools.



OUTCOME II

Our young people are successful learners, confident individuals, effective contributors and responsible citizens.

ACH	ACHIEVEMENT IN LITERACY FOR LOOKED AFTER YOUNG PEOPLE WHEN THEY LEAVE SCHOOL															
Percentage achieving	South	,	e Looked Leavers	After	Virtual Comparator South Ayrshire all school leavers Gap b					Gap bet	etween Looked After and all school leavers					
	2015	2016	2017	2018	2015	2016	2017	2018	2015	2016	2017	2018	2015	2016	2017	2018
Level 3 +	80%	83%	100%	84%	73%	77%	89%	80%	98%	98%	98%	98%	18%	15%	2%	14%
Level 4 +	50%	74%	86%	66%	51%	63%	80%	67%	95%	96%	96%	96%	45%	22%	10%	30%
Level 5 +	15%	26%	45%	19%	8%	21%	46%	27%	78%	84%	86%	85%	63%	58%	1%	66%
Level 6 + (Higher)	5%	4%	23%	6%	1%	4%	20%	6%	50%	59%	63%	59%	45%	54%	40%	53%

Between 2015 and 2017 there were annual improvements in the percentage of Looked After school leavers achieving Levels 3,4,5 and 6 in Literacy.

Attainment levels for Looked After School Leavers in 2018 declined and the gap between Looked After and all school leavers returned to previous levels seen in 2015 and 2016. The percentage achieving Level 3 was higher within the SA Looked after school leavers than the virtual comparator, however, Levels 4 and 5 were below the virtual comparator achievement level, with Level 6+ being in line with the virtual comparator.

ACHIEVEMENT IN NUMERACY FOR LOOKED AFTER YOUNG PEOPLE WHEN THEY LEAVE SCHOOL																
Percentage achieving	South	,	e Looked Leavers	After		Virtual Co	omparato	r	South A	Ayrshire al	l school l	eavers	Gap between Looked After and a school leavers			
	2015	2016	2017	2018	2015	2016	2017	2018	2015	2016	2017	2018	2015	2016	2017	2018
Level 3 +	80%	83%	100%	84%	73%	77%	89%	80%	98%	98%	98%	98%	18%	15%	2%	14%
Level 4 +	50%	74%	86%	66%	51%	63%	80%	67%	95%	96%	96%	96%	45%	22%	10%	30%
Level 5 +	15%	26%	45%	19%	8%	21%	46%	27%	78%	84%	86%	85%	63%	58%	1%	66%
Level 6 + (Higher)	5%	4%	23%	6%	1%	4%	20%	6%	50%	59%	63%	59%	45%	54%	40%	53%

Between 2015 and 2017 there were annual improvements in the percentage of Looked After school leavers achieving Levels,3,4, and 5 in Numeracy, however, there has been a decline in all levels for 2018.

The gap in percentage achieving all levels has increased between 2017 and 2018 for levels 3-5, however, has reduced slightly for Level 6 due to a reduction in all school leavers achieving this level in 2018. South Ayrshire Looked After school leavers achieved a higher percentage at level 3 compared to the virtual comparator.



We have improved the life chances for children, young people and families at risk.

CHILD PROTECTION

Children are placed on the child protection register when there are significant concerns for their safety.

Children on the register will be subject of close monitoring and support with a multiagency plan to affect changes to reduce risk.



No. of children on Child Protection Register as at 31st July

On 31 July 2018, in South Ayrshire, there were a total of 44 children on the child protection register.

50% of registrations are for unborn babies or children under four years of age.

35% of these are children under two years of age.



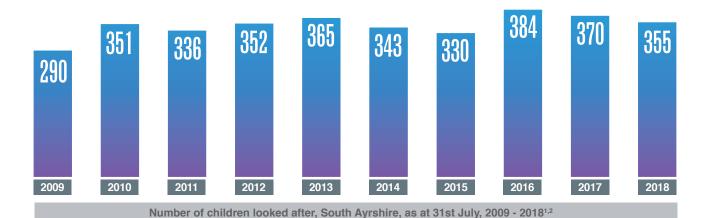
The South Ayrshire profile is similar to the national picture. The latest available benchmarking data was published in March 2019 based on data as at 31st July 2018. There has been a marked reduction in the South Ayrshire rate of Children on the Child Protection Register between 2017 and 2018, from **3.4** to **2.5** per 1000 population aged 0-15. In 2017, South Ayrshire had the second highest level out of the benchmarking family group, however, in 2018 had the second lowest level. The average rate across the group for 2018 was **3.2**.





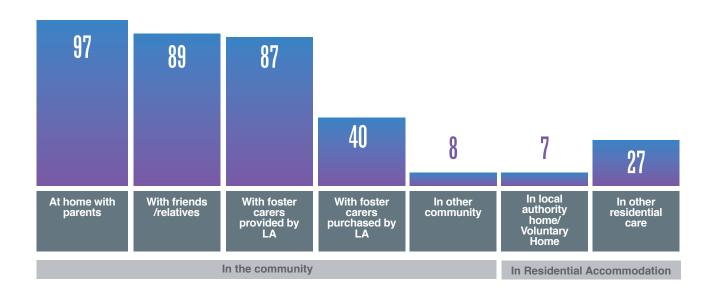
LOOKED AFTER CHILDREN

The number of children looked after has reduced over the past year from 370 to 355.



¹ Excludes children who are on a planned series of short term placements. A child may start and cease to be looked after more than once during the year and will be counted once for each episode of care starting and ending.

As at 31st July 2018, the majority of children (90%) are being looked after in the community either at home with their parents, with friends/relatives or with foster carers. 10% of children looked after are in residential accommodation.



² Figures for 2017/18 are provisional and may be revised in 2018/19.



CHILD POVERTY

South Ayrshire's rate of child poverty AHC (24.36%) is the 10th highest of all Scottish local authority areas.

This is a small improvement on the previous 2015 rate when it was estimated **25.74**% children in poverty AHC (After Housing Costs), the 8th highest rate in Scotland.

In recognition of the fact that South Ayrshire had the 8th highest child poverty level in Scotland (2015), the Community Planning Partnership developed a Child Poverty Action Plan. The Partnership implemented one of their identified actions which was to develop a financial inclusion pathway to support families in need. Families are easily and quickly referred to the Information and Advice Hub for the support they need.

IMPROVING HOUSING OUTCOMES FOR CARE EXPERIENCED YOUNG PEOPLE

Work is ongoing to ensure all care experienced young people are provided with the opportunity to improve their life chances by making more positive life choices.

Positive progress is being made in South Ayrshire to support young people leaving care to develop the necessary life skills to live independently, hold down tenancies, avoid homelessness and reach their full potential. The work underway is focused on four key areas – life skills, person-centred housing options, preventing the need to apply as homeless, and appropriate person-centred support – and ensuring these support the young people involved to achieve the best possible outcomes.

To support improved life skills, the Council is running two dedicated pilot programmes in conjunction with Ayr Housing Aid Centre, young people and carers:

First Home focuses on money management, cooking and healthy eating, living as part of a community, looking after your home and improving and maintaining your home.

Housing Education for Youths is aimed at young people 14-16 years thinking about taking their first steps towards independent living and covers areas such as housing options, the cost of running a household, the realities of moving out and homelessness. To ensure that suitable and sustainable housing options are available to young people are undertaking 'trial' tenancies. The trial includes scheduled reviews that help assess how well the tenancy is going, with the aim of converting it into a permanent secure tenancy. programme, I don't know where I would be."



Alongside this, a Housing First pilot is underway, providing a care-experienced young person with permanent accommodation as well as intensive wraparound support to meet their individual needs. It's hoped this approach will maximise the potential for the young person to successfully integrate into the local community and live a good quality life.

To help those who may not be quite ready to live on their own, the Health and Social Care Partnership is also working to expand the number of supported carers available. Supported carers provide young people with a supportive family setting while they prepare for living on their own.

Feedback from the young people benefiting from the Council's approach has been very positive. Arron (21) is taking part in the housing First pilot - he said:

"The programme is absolutely brilliant and has helped me so much over the past few months. If I didn't have the support from the

COMMUNITY JUSTICE OUTCOMES

The National Outcomes for Community Justice Services, as detailed on page 5, are the Scottish Government's high-level statements which aim to gain and sustain the public's confidence in the work of Justice related services through promoting the values of safety, justice and social inclusion.

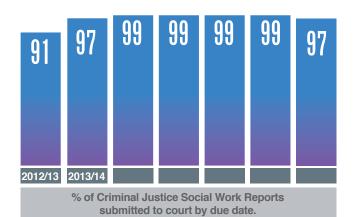
PERFORMANCE AGAINST THE NATIONAL OUTCOMES FOR JUSTICE SERVICES

Performance against each of the National Outcomes for Community Justice Services and associated National Performance Indicators is detailed below. Where relevant, performance against associated Local Performance Indicators is also provided.



OUTCOME 13

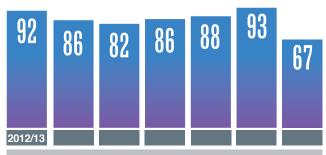
Community Safety and public protection



In 2017/18, **99%** of Criminal Justice Social Work Reports were submitted to court by their due date. Performance for 2018/19 had reduced slightly to **97%**. The reports which were not submitted by 12 noon on their due date were lodged on the afternoon of the due date.

OUTCOME 14

The reduction of re-offending



% of those placed on Community Payback Orders with a requirement of unpaid work starting within one week.

In 2017/18, **93%** of individuals placed on a Community Payback Order with a requirement of unpaid work attended their first work appointment within 7 days of their court appearance.

In 2018/19 **67%** of service users placed on a Community Payback Order with a requirement of unpaid work attended their first work appointment within 7 days of their court appearance.

Where targets were not met this was due to such issues as service user's failure to attend as instructed, period of custody, already undertaking hours on a previous order and first direct contact being delayed.

OUTCOME 15

Social inclusion to support desistance from offending

In 2017/18, **99%** of individuals placed on a Community Payback Order with Supervision Requirement were seen within 5 days of their court appearance.

In 2018/19 **93%** of individuals placed on a Community Payback Order with a Supervision

Requirement were seen within 5 working day of their court appearance.

Where timescales were not met this was due to the fact that orders had been made at courts outwith the area, due to a service user being in custody or a delay in the first contact being made.



% of individuals placed on Community Payback Orders with Offender Supervision seen within 5 days of court appearance.



SUMMARY FINANCIAL PERFORMANCE

2018/19 was an extremely challenging financial year for the IJB. In order to reach a breakeven position it used £3.3m of additional funding and £1.0m of reserves from 2017/18.

The IJB holds no reserves for use in 2019/20 and must address its underlying overspend, together with repaying the additional funding. This will inevitably mean delivery of a large efficiency programme and service transformation in order to return to financial balance.

The financial environment in 2018/19 was extremely difficult with demand for services continuing to rise. Unprecedented demand for placements for vulnerable children and increasing demand for adult social care services resulted in the IJB utilising all of its reserves and requiring additional funding. This funding has been provided by South Ayrshire Council on a temporary basis and is repayable.

The initial budget was approved in June 2018 and made clear the high level of

risk inherent within the assumptions and proposals. The month 4 financial monitoring report forecast an overspend of £4.0m, and recovery options were presented to the IJB in October. The options implemented were partially successful and reduced the need for additional funding to £3.3m.

Older People's services overspent by £1.6m. This was driven by high levels of demand for residential and nursing home placements together with similarly high demand for Care at Home packages. Biggart Hospital overspent by £0.4m. This was caused by additional beds being opened to relieve pressure on Ayr Hospital, together with a high reliance on bank and agency nursing.

Children and Families Social Work Services overspent by £1.6m. During the year there was unprecedented demand for secure and residential outwith authority placements. By nature these are high cost low volume, with individual cases costing up to £0.3m per annum. This area of the service continues to represent a key financial risk for the IJB going forward due to unpredictable demand for high cost placements.



FINANCIAL REPORTING

Financial information was presented to the Integration Joint Board throughout the year.

A full analysis of financial performance for 2018/19 is detailed in the Financial Monitoring Report for the year to 31st March 2019, as considered by the IJB at its meeting on 26th June, 2019. This details key budget pressures and over/underspends. Link

This shows that the IJB broke even after receiving £3.3m of additional temporary and repayable funding.

A detailed analysis of the financial outturn information is available in the Annual Accounts for the IJB which are available at:

https://www.south-ayrshire.gov.uk/health-social-care-partnership/documents/item%20 7%20annual%20accounts%20201819%20 ijb%20190619.pdf

INTEGRATED CARE FUND

Additional funding received from the Scottish Government for the Integrated Care Fund (ICF) for 2018/19 was £2,218m. Significant investment has been directed towards early intervention and prevention approaches, for

example, self-management and rehabilitation work, as well as locality based preventative approaches. The funding was utilised as shown below:

PROGRAMME THEME	ICF INVESTMENT	ACTUAL SPEND
Supporting Service Improvement, Redesign and Change	£284,402	£262,662
Developing Community and Locality Based Preventative Programmes	£548,186	£512,452
Developing Comprehensive Clinical and Care Pathways	£411,144	£336,045
Developing Self-management and Rehabilitation Programmes	£345,233	£317,889
Developing Technology Enabled Care	£138,000	£138,000
Programme and Performance Support and Enablers	£111,400	£113,282
Additional Spend	£380,412	£464,889
Grand Total	£2,218,779	£2,145,219

The ICF is largely used as a catalyst to deliver change in the way services are delivered with the overall aim of shifting the balance of care from a hospital based setting to the community. The allocation of ICF monies has been reviewed to ensure that projects with a proven track record are mainstreamed; those that have been less successful are discontinued; and that those requiring more time for establishment are focussed on a

sustainable exit strategy. During 2018/19 and 2019/20 underspends in this area will be used to address overspends in other areas, but there is a focus on ensuring, in future years, that the ICF can be utilised as a change fund as originally intended.

Note: The Additional Spend takes into account any underspend or funding discrepancy and is used to fund other projects in the financial year.

BEST VALUE

NHS Ayrshire & Arran and South Ayrshire Council delegate functions and budgets to the IJB in accordance with the provision of the Integration Scheme.

The IJB decides how to use these resources to achieve the objectives set out in its Strategic Plan. The IJB then directs NHS Ayrshire & Arran and South Ayrshire Council to deliver services in line with the objectives and programme set out in its Plan.

The governance framework sets out the rules and practices by which the IJB ensures that decision making is accountable, transparent and carried out with integrity. The IJB has legal responsibilities and obligations to its stakeholders and residents of South Ayrshire. The IJB ensures proper administration of its financial affairs by having a Chief Finance Officer, in line with Section 95 of the Local Government (Scotland) Act 1973.

The IJB Performance and Audit Committee met five times throughout the year. It considered progress reports on the implementation of the IJB Strategic Plan for 2018-21, various approved strategy documents, including the Adult Learning Disability Strategy, the Community Mental Health Strategy and the Dementia Strategy.

It considered performance by Partnership Services against its approved Performance Framework and reports by the Chief Internal Auditor on the approved audit plan for the year. In addition, it considered reports from Inspection Bodies on the performance of directly provided and commissioned social care services and on other matters relating to Health and Social Care Integration, including a self-assessment of local performance in this regard.



A number of service reviews have been progressed during 2018/19 as part of the HSCP agenda to modernise services and the ways in which it provides support across the sectors:

- In-house Learning Disability Services
- Day Services for Older People.

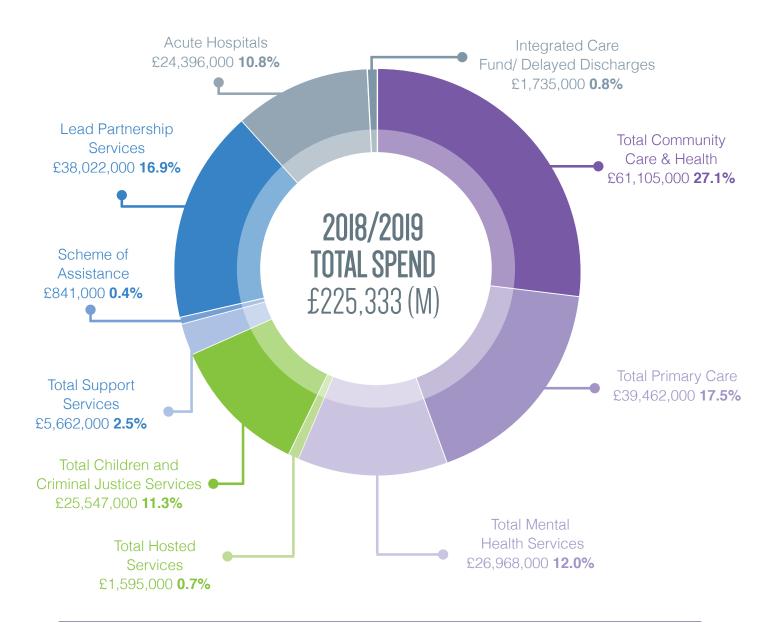
Work continued to implement a new computerised information system for Social Work/Social Care, designed to improve access to information, reporting and overall efficiency. By 1st April, 2019 both Justice and Children and Families Social Work Services had transferred to the new system. During 2019-20 the remaining services will be migrated.

Financial Reporting on Localities

The 2018/19 financial information has not been broken down and presented by localities as information has not been recorded on that basis. Historically this information has been recorded at Ayrshire and Arran and South Ayrshire levels.

Going forward the development of locality based financial information will be part of the Partnerships agreed transformation programme.





| COMMUNITY | ACTIVITY

LOCALITY PLANNING GROUPS

Locality Planning Groups in the 6 Localities have been active in the following ways:

Identifying local priorities and developing linked action plans – local priorities include social isolation, mental health, young people, alcohol/drugs, long-term conditions and local communication.

Influencing/Petitioning/Lobbying – for example the 2 LPGs in the Carrick area have been active in relation to addressing changes or reductions in local NHS services (Youth Sexual Health and Ante-natal classes), to local transport services and the greater potential community use of the new Invergarven School

Initiating, Activating and 'Commissioning'

– A range of 'dementia friendly' work has been driven initially by the LPGs often in partnership with others (see below). In North Carrick a set of local workshops (North Carrick Cares) has attempted to communicate the range of local services available for community members.

Supporting local HSCP and wider activity

- The LPGs have actively supported the role out of Community Led Support in a range of ways. Both Carrick LPGs have been supporting the wider Primary Care transformation work linked to 'Redirection' of patients to make the best and most appropriate use of services.

Linking to Place Planning: e.g. actively supporting the wider place planning work such as Charettes for example work taking place in Troon on Place Planning.



PARTICIPATORY BUDGETING

Another area where the LPGs have been key players has been in the successful organisation of another 6 local Decision Days where Participatory Budgeting methods have been used to allocate local grant funding to local projects in line with locally agreed priorities.

The days have attracted very significant numbers of participants of all ages (1346 participants in total) who explore the projects that are bidding for support and then influence the projects that are then supported. The events have been excellent contexts for wider community engagement (Conversation Cafes), networking, showcasing and celebrating local initiatives, and 'marketing' the many local projects to local residents. In the 2019 events £88,076 was allocated to 104 projects/groups, many of them linked to LPG priorities such as Social Isolation, Mental Health and Long-Term Conditions.



COMMUNITY LFD SUPPORT

New 'front door' sites have been active in Girvan, Maybole, Troon, Prestwick and within 3 Ayr sites with the branding 'South Ayrshire Connect'.

The new front door in Ayr North was established in early 2018. In the period July-September 2018, Ayr North Social Work staff recorded the contact they had with an average of 27 individuals weekly, whose contact would previously have resulted in Social Work referrals.

The 27 individuals were signposted effectively to local organisations, agencies and projects that could meet their needs and interests and allow them to focus on their own strengths and resources instead of being assessed for formal services.



THIRD SECTOR

VASA is commissioned by the HSCP to provide a range of supportive services including an extensive activity programme for older people, mechanisms to support isolated older people (including a new volunteer transport service) and the South Ayrshire LIFE web-site, help-line and drop-in service with over 1000 local activities, groups and clubs identified on the SAL web-site.

Ayr United Football Academy has continued to be supported by the HSCP to develop

its 'Football for Life' programme involving activities such as Walking Football (which is significantly increasing in levels of participation), Walking Groups, Dementia work (including football Memories) and work on weight management.





DEMENTIA FRIENDLY COMMUNITIES

Prestwick and Troon Dementia Friendly work has continued to grow and develop. Examples of local activity have been:

The local Dementia Friendly Walking Group which has now successfully applied to develop the Prestwick Promenade as 'dementia friendly.'

- Continuation of the 'Relaxed Cinema' screenings
- Training and awareness raising including with local businesses
- The development of a 'dementia friendly' hotel room in Carlton Hotel
- Work with Faith Communities
- The Troon allotment, intergenerational work and the development of the 'Howf'

In Girvan, following extensive public consultation, a range of local activity has been initiated including work on training, drop-in support, inter-generational work, leisure and transport.



In Maybole, following locally developed research and needs assessment, and also strong awareness raising/training, the beginnings of local initiatives have begun to take place.

In Ayr, LPG members have been undertaking dementia friendly training and there is work taking place to make Newmarket Street' dementias friendly.

SOCIAL ISOLATION AND LONELINESS

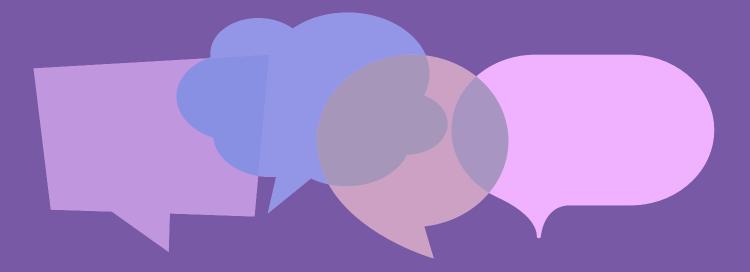
A local group has led the development of a Draft South Ayrshire Social Isolation and Loneliness Strategy and Action Plan initially focusing on older people. The Draft Strategy was consulted upon during February 2019 and will be fully launched later in 2019/20.

The development of the Plan has been informed by a significant range of consultation and engagement at a range of levels.





| PARTICIPATION, CONSULTATION | AND ENGAGEMENT



Effective participation and engagement is at the very heart of achieving of the vision of the South Ayrshire Health and Social Care Partnership.

The Partnership is required by the Public Bodies (Joint Working) (Scotland) Act 2014 to involve and consult with relevant stakeholders, including patients and service users, in the planning and delivery of services.

The Participation and Engagement Strategy outlines how the Partnership will involve partners across South Ayrshire in order to develop services that meet the needs and improve outcomes for our communities.

There are formal consultation and engagement opportunities for people and organisations to share their views on specific proposals being developed for health and social care in South Ayrshire. This can include strategies, plans, service developments and service reviews among other areas. It is in addition to the ways in which people and organisations are already involved in shaping

the work of the Partnership and Integration Joint Board, including membership on the Integration Joint Board and its Committees. The Integration Joint Board at its meeting on 14th March, 2018 approved the following Communication Strategy and plan for the Health and Social Care Partnership. The Communications Strategy:

- Sets out a framework for effective communication;
- Identifies our stakeholders and who we will communicate with – both internally and externally;
- Identifies the ways in which we will communicate; and
- Sets out how we will further improve the effectiveness of our communication activities.

The examples over the page demonstrate the range of participation, engagement and communication activities which have taken place during the reporting period.

DRAFT STRATEGIC PLAN 2018-21

Consultation took place with key stakeholders on the draft IJB Strategic Plan 2018-21.

An online survey was used to collate views on the draft Plan and key stakeholder groups were consulted e.g. the Alcohol and Drugs Partnership Board and the Independent Sector.

There was also two sessions held in each locality in South Ayrshire – one during the day and another in the evening to make the sessions as accessible as possible for the public and staff in each of the locality areas. Two sessions were also held with staff – one in Ayr and one in Maybole to allow staff working in rural areas the opportunity to attend. The consultation was promoted in a variety of ways, such as:

- Public notices in local newspapers
- Social Media
- Through local participation networks
- Posters in public facilities
- Screens in Customer Contact Centres



Following approval of the IJB Strategic Plan, a summary version of the Strategic Plan and a poster was developed displaying the Vision, Mission, Values and Strategic Objectives and this was distributed to local public facilities for the public to access this information.

STRATEGY DEVELOPMENT

Extensive consultation has taken place on the development of the Adult Carers Strategy, A Young Carers Strategy and the production of the Dementia Strategy.

In addition to the above a wide range of communication activity has been undertaken to keep internal and external stakeholders informed on the work of the Partnership.

These include Partnership newsletter,
Partnership Twitter page @sahscp and a range of public information leaflets.

ANNUAL PERFORMANCE REPORT

A summary Annual Performance Report 2017/18 was designed to highlight performance information relating to health and wellbeing outcomes for adults and for children and outcomes for people accessing justice services. The summary report was distributed to local health and social care facilities to be shared with those using services.



CLINICAL CARE AND GOVERNANCE

The South Health and Social
Care Partnership has revised
and further developed its Quality
Governance Framework for
oversight of clinical, financial
and staff governance to provide
assurance and continual
improvement in the delivery of
integrated services.

There are a range of groups in place.
The Clinical and Care Governance Group provides quarterly reports on all incidents and complaints reviewed to the Clinical and Care Governance Committee.

Adult Support and Protection reports along with Child Protection reviews support learning for the HSCP and these wider multi-agency protection-based Partnerships.

Good governance arrangements ensure that all staff are supported to share issues in a safe and confidential environment. Learning summaries are shared and the Partnership supports education and learning through the work done by the Education and Learning Sub-Group. This approach ensures that governance procedures improve, assure and, where necessary, result in remediation to drive the quality of our joint services. The Partnership Improvement Plan derived from this governance approach, ensures that continuous improvement is embedded throughout every aspect of care delivery; from corporate leadership values to clinical and partnership support for staff.

These governance processes provide assurance of clinical and care standards to the public and support the needs of staff in the delivery of care.

These updated governance processes were implemented in 2018/19 and ensure where incidents and service or system failures are identified that appropriate action is taken and that the necessary communication and improvement plans are put in place to develop joint learning from incidents and complaints and to improve the outcomes for the population of South Ayrshire.



- GOVERNANCE AND DECISION MAKING



The table below highlights the key decisions taken by the Integration Joint Board in 2018/19.

Copies of the relevant reports can be found on in the committee reports and agendas section of the website.

KEY DECISION	DATE OF INTEGRATION JOINT BOARD
Endorsed a Framework for Ayrshire & Arran on Preventing Drug Related Deaths	15 May 2018
Agreed to provide Functional Family Therapy to support families with children at risk of being looked after or accommodated	15 May 2018
Agreed to accept a Review Report from In-Control Scotland recommending a re-launch of Self-Directed Support in South Ayrshire	15 May 2019
Appointment agreed of new IJB Standards Officer	27 June 2018
Approved a Short Breaks statement for South Ayrshire	27 June 2018
Approved IJB Budget and ADP Budget for 2018/19	27 June 2018
Approved Strategic Plan for 2018-21	27 June 2018
Approved the Primary Care Improvement Plan for Ayrshire	27 June 2018
Approved South Ayrshire Health and Social Care Annual Performance Report 2017/18	12 September 2018
Approved a new Commissioning Plan for Care at Home Services	12 September 2018
South Ayrshire Dementia Strategy 2018-23 - approved	12 September 2018
Approved British Sign Language Plan	12 September 2018
Approved Audited Annual Accounts for 2017/18 and External Audit Report	3 October 2018
Approved 2018/19 Integrated Budget Recovery Plan	3 October 2018
Approved the indicative IJB funding requirements for 2019/20 for submission to the Parties	24 January 2019
Approved the South Ayrshire Corporate Parenting Plan 2018-21	24 January 2019
Approved the IJB Records Management Plan	13 February 2019

INSPECTION OF SERVICES

In 2018/19, **10 Local Authority care services** and **58 Externally Commissioned** services were inspected.

The Care Inspectorate award grades to services they inspect based as set out in the table below:













One of the Scottish Governments suite of National Indicators is the proportion of quality themes evaluated as "good (4)" or above by the Care Inspectorate.

OF THE SERVICES INSPECTED DURING 2018/19, 80% WERE EVALUATED AS BEING GOOD OR ABOVE.

SUNDRUM VIEW - CHILDREN'S HOUSE

A new purpose-built children's house is making a real difference for the young people who live there and is supporting them to achieve positive outcomes. Sundrum View provides care and accommodation for up to seven children and young people and is designed to allow them to grow, develop and meet their full potential in all aspects of their lives.

Inspectors assessed the quality of care and support, the quality of staffing and the quality of management and leadership as good, while the quality of the environment was rated as very good.



Children living in Sundrum View told the inspectors:

"I don't think things could be any better."

"They changed their support to help me".

"It's a nice place to stay."

"Staff talk to you and help with homework."

WHAT'S NEW AT NURSERY COURT DAY CENTRE

Nursery Court Day Care Centre in Girvan received grades of Excellent for "Care and Support" and "Environment".

A recent addition to the service was a reminiscence train carriage with wallpaper backdrop, a replica framed window surrounding an LDF screen which plays scenes from countryside. There is even a replica train table, lamp and train memorabilia, including an authentic suitcase.

This unique therapy tool turns the space into a therapeutic and calming environment and has been shown to provide an innovative way of improving mental wellbeing.



IN YEAR PROGRESS UPDATE

SUMMARY

The operation of the Partnership in 2018/19 has in large part been dominated by the challenging financial position.

This saw the IJB require additional funding of £3.3m at the year-end, brought about by demographic pressures and increasing demand for services in both adult and children's social care.

However, the year has also seen significant progress being made by the IJB and the Health and Social Care Partnership in a number of areas.





SOCIAL CARE SERVICES

A review of the roll-out of Self-Directed Support in South Ayrshire has been undertaken by In Control Scotland.

The outcomes of the review were accepted by the IJB and an Action Plan is being implemented to "re-boot" Self-Directed Support.

Most importantly, this will put in place a system that permits the allocation of upfront budgets which the current system based on an Equivalency Model does not. The new system will be a Resource Allocation System (RAS) which will come into effect early in 2020-21.

A Short Breaks Statement was approved and published by the IJB as required by the Carers (Scotland) Act 2016 to support the caring relationship and promote the health and wellbeing of the carer, the supported person and other family members affected by the caring situation.





STRATEGIC PLAN, STRATEGIES AND NEW PLANS

The IJB approved a new Strategic Plan for the period 2018-21 based around its existing Vision, a new Mission Statement and eight Strategic Objectives all designed to support the delivery of national and local outcomes. The Strategic Objectives will be delivered through an Implementation Plan, progress against which is monitored every six months by the Performance and Audit Committee.

DEMENTIA STRATEGY FOR 2018-23

A South Ayrshire Dementia Strategy for 2018-23 was approved by the IJB which is outcomes based. Outcomes will be delivered through an Implementation Plan which will support the development of services and supports locally.

More than 70 people attended an event in Ayr to launch the Dementia Strategy to hear how people living with dementia in South Ayrshire will be cared for in the future. The Strategy sets out key strategic themes identified through discussions with service user representatives, carers, staff and the South Ayrshire Dementia Strategic Planning Group.

In summary people have told us how they would like services to be developed:



Support will be designed and delivered in ways that:

- Promote preventative activity.
- Will ensure that people with dementia get access to appropriate and timely interventions.
- Address environmental issues to better support people with dementia.
- Examine how care pathways might be adapted to better support those with dementia.
- Provide options in the way people can choose to receive support.
- Ensure that the needs of carers are fully considered.
- · Protect people with dementia from harm.





In Children's Health and Care Services, a Corporate Parenting Plan was approved by the IJB for the period 2018-21. This sets outcomes to be met by all Corporate Parents through a series of agreed action items, progress against which will be assessed at regular intervals by the IJB Performance and Audit Committee.

As reflected in the Strategic Plan, the IJB approved a Primary Care Improvement Plan for the period 2018-21 that demonstrates how South Ayrshire and the other two partnerships in Ayrshire will implement the new GMS contract.

The Plan sets out a clear direction of travel and acts as a core framework for the HSCPs and NHS Board to reform primary care services.

The IJB submitted its draft Records Management Plan for consideration by the Keeper of Records as required by the Public Records (Scotland) Act 2011.

In South Ayrshire approximately 70% of all care at home services are provided on a commissioned basis from the Independent Sector.

The IJB approved a Commissioning Plan in 2018/19 for the recommissioning of these services at £7.9m per annum.

The South Ayrshire British Sign Language (BSL) Plan designed to promote and support British Sign Language locally in accordance with the provisions of the British Sign Language (Scotland) Act 2015 was approved.



COMMUNITY HEALTH AND CARE SERVICES

An Older People's Position Paper setting out options for the future provision of older people's services in South Ayrshire, based on an assessment of information from the IJB Strategic Needs Assessment, was considered by the Board which agreed that a further paper be presented setting out how appropriate options might be taken forward.

CHILDREN'S HEALTH AND CARE SERVICES

A Joint Functional Family Therapy approach with the North and East Ayrshire Partnerships to address a need for specialist early intervention family support designed to improve family resilience and ensure that more families remain together, was approved by the IJB.

The Champion's Board continues to provide a voice for looked after children and young people in South Ayrshire in the development and provision of services

Twenty one young people aged from 8-21 years take part in weekly group work sessions in Ayr and Girvan and a group of 10 care leavers aged 17-29 years meet every two months to progress key priorities. Monthly house visits take place to South Ayrshire's two Children's Houses for tea and Sunday brunch. The Champions Board Team lead on the Children's Rights work stream of the CELCIS inclusion project with Belmont Academy and feeder primary schools. Four showcasing events have taken place involving young people and their corporate parents, with each event attracting over 100 participants. Four key priorities have been established to determine the work of the Champions Board for the coming year. These are relationships, rights, mental health and housing.



HEALTH SERVICES

A Pan-Ayrshire Community Phlebotomy Service supported by all of the IJBs in Ayrshire was launched in 2018/19. The development work on this was led by the South Ayrshire IJB Clinical Director.

In 2018/19 the decision was also taken to decentralise the Allied Health Profession

function to the Partnerships in North and East Ayrshire. From 2019-20, South Ayrshire will manage AHPs operating in it's own area, but will no longer act in the role of lead partnership across the whole of Ayrshire.



NFW HOUSING DEVELOPMENTS



The IJB and the Council's Leadership
Panel endorsed a joint approach which
will see resources invested through the
SHIP (Strategic Housing Investment Plan)
to create new housing accommodation for
older people, young people leaving the care
system and for people with mental health
issues and learning disabilities.

In 2018/19 significant progress has been made in the likely provision of core and cluster accommodation for both people with learning disabilities and people with mental health issues. Four sites are actively being progressed in Girvan and in Ayr, one in partnership with Ayrshire Housing a local Registered Social Landlord. The Girvan development of 11 flats and one common area/staff base was acquired in 2018/19 and will be occupied in 2019-20.

INFRASTRUCTURE IMPROVEMENTS

The major ICT infrastructure project to replace the outdated Social Work/Social Care SWIS information system with Carefirst proceeded at pace in 2018/19 with implementation in Justice Services and in Children's Health and Care.

GOVERNANCE

The IJB Performance and Audit Committee considered, in year, the report from the Ministerial Strategic Group for Health and Community Care on the Review of Progress with the Integration of Health and Social Care, together with an update on the progress that has been made locally against the six themes outlined in the report. The discussions of the Committee and this initial local analysis formed the basis of the information included in the Government issued Self-Assessment of progress which was returned early in 2019-20 after receiving approval.

The Partnership's Strategic Planning Group (Strategic Planning Advisory Group) received regular reports throughout the year on the work being taken forward in each of the six localities by Locality Planning Groups. [link] The Strategic Planning Advisory Group also considered two new Strategy documents; one for Social Isolation and Loneliness and also an Adult Carers Strategy and agreed that these should proceed to public consultation prior to their submission to the IJB for approval.

The HSCP continues to have good working relationships with partner organisations from across the sectors. Representatives from a number of these sit on the Board, contribute to the work of its Strategic Planning Advisory Group and are active participants in a number of provider and other forums.

The Partnership strengthened its clinical and care governance arrangements in 2018/19 with the creation of an Officers Group for this purpose to support the work of the Clinical and Care Governance Committee.

TRANSFORMATION

2018/19 saw the continuation of transformation activity within South Ayrshire designed to achieve a shift in the balance of care locally in areas such as Care at Home, Intermediate Care and at Biggart Community Hospital in Prestwick, for example.

PERFORMANCE

Comprehensive performance reports can be found here on our public website:

www.south-ayrshire.gov.uk/health-social-care-partnership/partnershipperformance.aspx

THE YEAR AHEAD

The Mission Statement agreed by the Integration Joint Board for the planning period 2018-21 is:

The IJB through the Health and Social Care Partnership will express its mission in this planning period through an approach rooted in the following principles:

- Support and services will be co-produced 'doing with' not 'doing to;'
- Partnership with communities sharing all resources;
- People will be treated as equals and assets and strengths will be built upon;
- People will have access to good information and advice pre-crisis points;
- The system will be outcome focused, proportionate and responsive; and
- Bureaucracy will be the minimum it needs to be.

The IJB has put in place plans and arrangements that will support the growth and development of primary care services and will work with communities and partners to find innovative ways to accomplish this in challenging financial circumstances.

Through the adoption of this approach and a policy agenda focussed on the needs of the individual, the IJB's priority, while continuing to support our Acute Hospitals will be to shift the balance of care from hospitals and other institutions to local communities.

The IJB's preferred focus continues to be on an approach based on early intervention, prevention, anticipatory care planning, the innovative use of technology, choice and control for individuals over the way in which their care is provided and joint working with communities through locality planning, to ensure that people are able to support their own health and wellbeing by means of the resources and support networks available within their local communities.

The Partnership's Community Led Support Programme and activity managed through the Third Sector Interface VASA and other organisations, such as the Carers Centre, supports this approach. This includes support for South Ayrshire Life – a community information directory.

Current funding issues for the IJB which resulted in an overspend in 2018/19 and in difficulty setting a balanced budget for 2019-20, militate against this preventative approach. The increasing demand for older people's services and in social care services for children and young people, has resulted in the IJB taking the decision to raise the level at which people will be eligible for statutory social care support in services for adults and older people to "critical" – the highest level possible under its approved Eligibility Criteria.

The Integration Joint Board is pursuing a transformation programme in South Ayrshire in Partnership with the Council and the Health Board and more widely across Ayrshire with the other two Ayrshire Partnerships. This

transformation activity has been designed to achieve two clear objectives: The first is to work collaboratively exploiting the benefits of Integration to change the way that services are delivered thus leading directly to improved outcomes for individuals. The second is to deliver efficiencies in the way that services are commissioned and provided, so as to create a sustainable financial position and to release funds that can be reinvested to meet on-going budget pressures from a range of issues, including demographic pressures.

Particular examples include the on-going remodelling of Biggart Hospital in Prestwick in 2019-20 in a way that sees a reduction in the overall number of beds, while releasing resource that can, in part, be used to invest in a number of community based services. Developments in technology are also being taken forward with plans to introduce computerised work scheduling and call monitoring in care at home services which should see improved efficiency within the overall service. The new Social Work Information System Care First will be implemented in adult community care services.

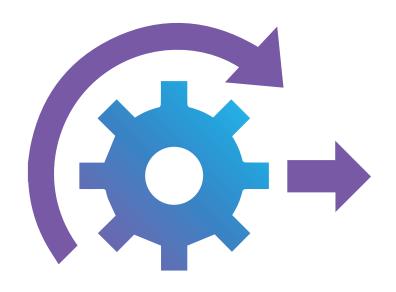
In day services for adults and older people, consideration is being given to sustaining much of the current provision through the introduction of a modest charge and in seeking to commission some day services for adults with a learning disability that more directly relate to the principles set out in the Adult Learning Disability Strategy approved by the IJB in 2017.

In Social Care Services for Children and Young People, steps are being taken to put in place locally based services that for some of those concerned will see them being looked after in South Ayrshire in suitable accommodation and with the necessary support and not in placements outwith the area, which can have poorer outcomes and be more costly.

Work is continuing in partnership with South Ayrshire Housing to develop new core and cluster housing developments which will see individuals being supported in ways that will improve outcomes for some people with learning disabilities and mental health issues and which will be beneficial in reducing potential isolation and loneliness. It is expected that two new sites will open in 2019-20 in Ayr and Girvan and that a following two further developments in Ayr will open in 2020-21. In total this will provide supported housing for almost 40 individuals.

Work will continue to recommission services both internally and from the Third and Independent Sectors. In 2019-20 priority will be given to Care at Home Services and to Services for children and young people. In 2019-20 the IJB will be asked to consider new strategy documents and corresponding implementation plans to support both adult and young carers.

The IJB is a Community Planning Partner and is a key player in the work of this Partnership through the children's health and care functions that have been delegated to it by the Council and the Health Board. It is focussed on the development and care of children and families in need of support and protection and, as a corporate parent, in improving the outcomes and the potential of looked after children and young people.



APPENDIX I: NATIONAL HEALTH AND WELLBEING

			SOUTH	
NATIONAL INDICATORS		2013/14	20	
NI - 1	Percentage of adults able to look after their health very well or quite well	95%		
NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible	83%		
NI -3	Percentage of adults supported at home who agreed that they had a say in how their help, care or support was provided	81%		
NI -4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well coordinated	79%		
NI -5	Total percentage of adults receiving any care or support who rated it as excellent or good	81%		
NI - 6	Percentage of people with positive experience of the care provided by their GP practice	89%		
NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	82%		
NI - 8	Total combined percentage of carers who feel supported to continue in their caring role	43%		
NI - 9	Percentage of adults supported at home who agreed they felt safe	83%		
NI - 10	Percentage of staff who say they would recommend their workplace as a good place to work	N/A		
NI - 11	Premature mortality rate per 100,000 persons	425 (2013)	39	
NI - 12	Emergency admission rate (per 100,000 population)	14,825	1	
NI - 13	Emergency bed day rate (per 100,000 population)	153,312	10	
NI - 14	Readmission to hospital within 28 days (per 1,000 population)	109		
NI - 15	Proportion of last 6 months of life spent at home or in a community setting	85%		
NI - 16	Falls rate per 1,000 population aged 65+	22.3		
NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections	N/A		
NI - 18	Percentage of adults with intensive care needs receiving care at home	67%		
NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population)	629		
NI - 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency	28%		
NI - 21	Percentage of people admitted to hospital from home during the year, who are discharged to a care home			
NI - 22	Percentage of people who are discharged from hospital within 72 hours of being ready			
NI - 23	Expenditure on end of life care, cost in last 6 months per death			

The above figures were provided by ISD Scotland to all Partnerships for inclusion in Annual Performance Reports.

(p) provisional figures

Data for 2018/19 are not yet available for Scotland for indicators NI-12, NI-13, NI-14, NI-16 and NI-20.

This is due to data completeness issues with the SMR01 dataset.



⁽s) statistically significant difference in the percent positive result between SA HSCP area and Scotland as reported through the Health and Social Care Experience Survey.

INDICATORS DATA

AYRSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP DATA				SCOTLAND	D 4 0 0 7 4 7 11 0	
14/15	2015/6	2016/7	2017/8	2018/19	LATEST DATA	RAG STATUS
N/A	95%	N/A	94%	N/A	93% (2017/18)	
N/A	83%	N/A	82%	N/A	81% (2017/18)	
N/A	80%	N/A	77%	N/A	76% (2017/18)	
N/A	74%	N/A	85% (S)	N/A	74% (2017/18)	
N/A	83%	N/A	85%	N/A	80% (2017/18)	
N/A	90%	N/A	88% (S)	N/A	83% (2017/18)	
N/A	83%	N/A	87% (S)	N/A	80% (2017/18)	
N/A	40%	N/A	36%	N/A	37% (2017/18)	
N/A	85%	N/A	85%	N/A	83% (2017/18)	
N/A	N/A		72%	74%	74%	
(2014)	422 (2015)	451 (2016)	380 (2017)	419 (2018)	432 (2018)	
5,811	16,339	16,571	17,693	17,852	Calendar year 2018 South Ayrshire: 17,824 Scotland*: 12,201	×
66,173	178,100	178,615	174,354	148,505	Calendar year 2018 South Ayrshire 159,165 Scotland* 118,646	
107	110	116	119	124	Calendar year 2018 South Ayrshire 125 Scotland* 102	×
86%	86%	85%	86%	87%	89% (2018/19) (P)	
24.9	24.4	22.4	24.7	24.3	Calendar year 2018 South Ayrshire 24.0 Scotland* 22.6	
86%	89%	86%	87%	80%	82% (2018/19)	
63%	65%	65%	DATA NOT AVAILABLE	DATA NOT AVAILABLE	61%	
900	838	1273	967	1383	805 (2018/19	\times
27%	28%	29%	31%	27%	28% 24%	×
		Indicator u	nder development			
		Indicator u	nder development			
		Indicator u	nder development			









For further information please contact:

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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.

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,大字印刷或音頻格式,以及可翻譯成多种語言。以下是詳細聯系方式。

ਇਹ ਜਾਣਕਾਰੀ ਮੰਗ ਕੇ ਬੇਲ, 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.