



south ayrshire
health & social care
partnership

Summary Annual Performance Report

2020-2021



STRATEGIC CONTEXT

In South Ayrshire, the HSCP delivers and commissions a broad range of services, meaning the HSCP is in contact with citizens at all stages of life. Services delegated by South Ayrshire Council and the NHS cover:

- Adults and Older People's Community Health and Care Services;
- Allied Health Professions;
- Children's Health and Care Services;
- Community Nursing; and
- Justice Services.

In practice, this means that our services work more closely together to deliver streamlined and effective support to people that need it, bringing together a range of professionals including social work, nursing and our allied health professionals.

All services are strategically driven by local and national priorities and full-service details are provided within the South Ayrshire Integration Scheme.

The Public Bodies (Joint Working) (Scotland) Act, establishing integrated health and social care partnerships on a legal footing, came into effect on 2 April 2014.

COVID-19: IMPACT AND RESPONSE

This report covers the period to March 2021. Therefore, the activity of the HSCP has focused largely on responding to COVID-19 and adapting to the public health measures in place across the country. In response to the pandemic, we focused a significant proportion of our resources on supporting our communities through this uncertainty and maintaining service provision as best as possible prioritising critical need.

As the scale of the outbreak intensified and working from home for many of our staff became the new normal, daily teleconferences were held to respond to operational challenges locally and ensure alignment with emerging national guidance and policy as it was being produced. Communications with the communities we serve, staff and third sector provider organisations were stepped up and for the first several months of the pandemic daily briefings were issued to all stakeholders.

A local mobilisation plan was created, detailing the financial impact of the activity necessary to respond to Covid-19. The plan provided a focal point for the Partnership's response to the pandemic, feeding into the NHS Ayrshire and Arran Mobilisation Plans and allowed us to track progress and costings against key activity.

We continued to work in close cooperation with care homes and their Scottish Care representatives throughout the pandemic and have maintained these efforts. Through our

daily South Ayrshire Care Home Oversight Group, we provided support and oversight to care homes. The Oversight Group agenda has now adapted to cover day care and care at home services, demonstrating that we have proactively mainstreamed these enhanced arrangements and adapted them to our regular business. These have been unprecedented times for our care home partners and the HSCP has been prioritising our support to the vital work they have been doing to keep residents safe and ensure their wellbeing.

We worked closely with our key third sector partners VASA to support local communities, harnessing community responses, supporting those who were shielding and ensuring community resilience was at its strongest. Technology was sourced to enable staff to work from home through working in partnership with both NHS and Council IT teams. Staff wellbeing hubs were established in three locations across South Ayrshire and a Listening Service was developed.

The response to the Covid-19 pandemic has seen new ways of working emerging. Relationships developed quickly with wider services in partner organisations and with external providers. Overall, there has been an increased sense of partnership working to get things done, particularly with our partners in the council, the NHS Board and the third sector (through VASA) and Scottish Care.

ACHIEVING OUR STRATEGIC OBJECTIVES

Protect Vulnerable Children and Adults from Harm

The Child Protection Committee and Adult Protection Committee report to the Chief Officers Group (COG) through the Independent Chair. In the year past both committees have continued to discharge their responsibilities through virtual meetings and progression of their business plans with activity progressing on a number of fronts. Developments this year include:

- Successfully completing work on the performance reporting data and format leading to improved analysis and exploration of emerging trends and themes. This was of particular value given the impact of lockdown on services and communities.
- Restructuring of the sub committees – Policy and Performance; Practice Development; Communications.
- Development of auditing activity across adult and children's services

Children are placed on the child protection register when there are significant concerns for their safety; at the end of March 2021 the number of children on the Child Protection Register was 25, compared to 18 in March 2020. The period 2020-21 has seen a fluctuation of numbers of children registered, particularly during the lockdown period,

however these numbers have remained broadly within the range we would expect. During the past year 100% performance has been maintained in relation to seeing children on the child protection register. Social Workers worked diligently and with compassion to ensure this critical safeguarding activity continued.

Adult Protection by its nature is a more volatile area of activity however demand has broadly been in line with expectations. At the end of March 2021 was eight weekly Adult Support Protection (ASP) referrals compared to ten in March 2020. The past year has seen work to address South Ayrshire's position as an outlier in terms of adult protection Case Conferences.

Work to provide the best start in life for children in South Ayrshire

The Universal Health Visiting Pathway has been fully implemented, this has led to an increase in contact with families, which has enabled early intervention approaches to be used.

Improve outcomes for children who are looked after in South Ayrshire

South Ayrshire Champions Board consists of partnership staff and a range of volunteers all of whom have care experience. The board is able to inform policy changes that will enhance care delivery and ultimately the outcomes of current and future care experienced children. During the year the Board have been involved in developing the implementation of the Promise in South Ayrshire.

The transformational work within children services which was planned for 2020/21, has been disrupted by the Covid-19 pandemic. However there has still be significant progress within the "Whole Family, Whole System Approach", which was to enable the partnership to work alongside education and health to intervene at an earlier stage and prevent the escalation into care and away from families as well as improving wellbeing for children as they are supported within their community and within family type care settings.

Training in year commenced on a new strengths-based model, "Signs of Safety", this will contribute to cultural change to embed new practice that will build upon community and family assets.

During 2020-21 out with authority placements continued to reduce with an overall reduction of 4 to 19 at the end of the year.

The number of looked after and looked after and accommodated children has shown a reducing trend over the years, with Social Workers and other staff, intervening at an earlier stage to prevent the need for statutory orders and interventions.

Shift the balance of care from acute hospital settings to community settings

In March 2020 initial reaction to the pandemic was focused on reducing delayed transfers of care, to minimise the pressure on the health and social care system in preparation for increased admissions to acute settings. Within South Ayrshire the delayed transfers of care at 4th March 2020 were 76. As at the 22nd April 2020 they had reduced to 27, a decrease of 64% in line with expectations of Scottish Government.

Community Care and Health implemented a delayed discharge action plan during the year focusing on specific plans to continually improve the discharges of care, actions included:

- Building capacity into the reablement team to facilitate delayed transfers of care relating to care at home;
- Implement a test of change within the responder team to reduce admissions to hospital and enable return home from hospital out of hours;
- Further embed moving and handling process and procedures through training practices to reduce the need for double carers providing additional care at home capacity;
- Enhanced intermediate care screening of GP calls and schedule appointment to the Combined Assessment Unit to reduce the number of GP admissions to hospital

Support people to exercise choice and control in the achievement of their personal outcomes

The majority of social care support provided to service users continued during the pandemic, with the exception of day care and group activities, due to social distancing measure these services were not possible. This led to creative new services being developed with use of zoom, service users were able to participate in social activities and keep in touch with their families. Training was provided in use of technology by volunteers. Other respite services evolved and the creation of mini breaks where service users were taken out for the day offering respite to carers.

Manage resources effectively, making best use of our integrated capacity

Technology developments have continued during the year with the roll out of Microsoft Teams allowing meetings and training to be delivered whilst working from home. Carefirst is now fully implemented for case management purposes and community care financial data for financial projections.

The in-house Care at Home Service has introduced a call monitoring system, (CM2000). This system enables scheduling and monitoring of care at home services. This has been successfully rolled out to internal care at home and reablement teams.

Digital Board was established at the start of the year, chaired by the Director of HSCP with representatives from HSCP including Heads of Service, Senior Managers and Council's Heads of Service Finance and ICT and IT representatives. The board review progress on current digital workstreams and discuss and approve future actions.

The HSCP Digital Strategy was approved by the IJB on the 21st of October 2020. The strategy supports the delivery of the partnership's vision and aligns closely with national and local strategies including Scotland's Digital Health and Care Strategy and the digital strategies of both NHS Ayrshire and Arran and South Ayrshire Council.

This year has seen a significant increase in the use of Near Me, the NHS video consultancy service, with GP's utilising for appointments and Speech and Language Therapists and Physiotherapists using for consultations.

Give all our stakeholders a voice

The IJB Strategic Plan 2021-2031, was drafted following significant consultation and engagement. The pandemic created several barriers to the consultation process and our ability to engage with the community and stakeholders in person due to social distancing measures. A number of methods were used to overcome these barriers including engagement with Locality Planning Partnerships and Community Planning Partners, an online survey "What Matters to You?", online workshops and telephone conversations with targeted individuals working in collaboration with the third sector. These methods ensure that the new plan reflects the views and opinions of the community.

During this year we met with our commissioned providers on a regular basis and worked in collaboration to ensure Scottish Government guidance was understood and acted upon.

OUTCOME 1: HEALTHIER LIVING

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 2019/20) 16.1% of adults in South Ayrshire smoke compared with 19% across Scotland (Source Scottish Health Survey, 2018).

The 2019/20 alcohol-related admissions rate is 688 per 100,000 age-sex standardised population which is a 21% decrease overall since 2011/12. The Scotland wide rate is 673.

Number of drug deaths per year has risen across Scotland. South Ayrshire figures rose from 26 in 2019 to 31 in 2020. Ayrshire and Arran had the second highest rate of drug deaths at 27.2 per 100,000 population compared with Scotland at 21.2.

OUTCOME 2: INDEPENDENT LIVING

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.

82% of adults supported at home who agreed that they are supported to live as independently as possible. (HCES)

88.2% of people referred received 12 months dementia post-diagnostic support in South Ayrshire (2018/19p) compared with 75.1% across Scotland.

OUTCOME 3: POSITIVE EXPERIENCES AND OUTCOMES

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

75% of South Ayrshire adults supported who agree that they have had a say in how their help, care or support was provided. This is the same as the national average of 75% (HCES).

81% of adults who receive any care or support rated it as excellent or good. This is higher than the national average of 80% (HCES).

86% of people reported positive experiences of the care provided by their GP practice. This is higher than the national average of 79%. (HCES)

The uptake of SDS Options 1 and 2 have increased from 88 in 2013/14 to 240 in 2020/21. Option 1 levels increased from 88 to 109 and Option 2 increase from 0 cases in 2013/14 to 131 in 2020/21.

OUTCOME 4: QUALITY OF LIFE

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

81% of adults supported at home agreed that their services and support had an impact in improving or maintaining their quality of life. (HCES) 79% of care services were graded "good" or better.

Dementia Awareness Week is focused on raising awareness of dementia and making sure that people living with dementia in Scotland continue to have access to the support they need and deserve.

Various creative and wellbeing activities took place at Hillcrest Care Home for Dementia Awareness Week. A beach theme party was held and residents enjoyed music and movement with staff and reminisced about days down the beach. Residents at South Lodge Care Home enjoyed a visit from Flynn, the friendly Dalmatian. Animal therapy is a great way for residents with dementia to be comforted.

OUTCOME 5: REDUCE HEALTH INEQUALITY

Health and social care services contribute to reducing health inequalities

The death rates for those aged under 75 rose from 428 in 2019 to 435 in 2020. This is lower than the Scottish average of 457.

In the latest time period available from 2017-2019 (3 year aggregate), the average life expectancy in South Ayrshire was 77.3 years old for men, and 81.6 years old for women. This is higher than both the Ayrshire and Arran and Scotland wide life expectancies for females.

Life expectancy in South Ayrshire varies between each Locality with Ayr North having the lowest average expectancy for both males and females at 72.9 and 77.4 respectively compared to Troon which has the highest for Males at 79 and Prestwick which has the highest for females at 82.5.

In the financial year 2019/20, in South Ayrshire HSCP, 30% of the total population had at least one physical long-term condition (LTC).

OUTCOME 6: CARERS ARE SUPPORTED

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

There was a 4% decrease in the number of Carers Support Plans/Assessments completed in 2019/20 compared with those completed in 2018/19. 139 in 2018/19 rising to 402 in 2019/20 and then slightly reducing to 385 in 2020/21.

OUTCOME 7: PEOPLE ARE SAFE

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

There were 796 Adult Protection Referrals during 2020/21 which is a decrease of 31 % from 1151 in 2019/20. Response rates to protection concerns (inquiries completed within 5 working days) have increased from 75% in 2019/20 to 88% in 2020/21.

85% of adults at home agree they felt safe which is higher than the national average of 83% (HCES).

The rate per 1000 population of falls that occur in the population (aged 65 +) who were admitted as an emergency to hospital has decreased from 24.1 in 2018/19 to 22.8 in 2019/20 which is largely in line with the national average of 22.7.

OUTCOME 8: ENGAGED WORKFORCE

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.

The Pulse Survey took place in September 2020. HSCP staff scored their overall experience of the organisation as 6.92 out of 10 which is slightly higher than the national figure of 6.8. Staff identified colleagues, family and their manager as supporting their well-being over the previous 6 months. Concerns were identified around the lack of face-to-face contact, care for vulnerable people in the community, non-urgent cases not being referred and people not coming forward for treatment.

South Ayrshire Council carried out a staff survey in 2020 focusing on Recovery. There were 256 responses from HSCP staff. The survey found there was a high positivity rating for general health and wellbeing and for ability to access health and wellbeing resources.

During the pandemic, Staff Wellness Suites were established at four locations across South Ayrshire for all Partnership staff and Care Home and Care at Home partners to access. The suites were set up to offer somewhere for staff to come to have time out, for relaxation, mindfulness or distraction. In May 2020, South Lodge Care Home developed a staff wellbeing room which enabled staff to have quality time out and relax. The room has a wellbeing tree for staff to write their thoughts and feelings.

South Ayrshire Health and Social Care Partnership has continued to facilitate its practice learning programme whilst managing to navigate the challenges that the COVID-19 pandemic has presented. Following suspension of placements in March 2020, the Partnership has continued to work in partnership with the Learning Network West and Universities to meet its full allocation of social work students. Practice Teaching staffing numbers in South Ayrshire remain healthy with good uptake on the Professional Development Award in Practice Learning although this will need to be maintained and promoted to maximise capacity for student opportunities across all services.

OUTCOME 9: EFFECTIVE RESOURCE USE

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

72.4% of adults supported at home agreed that their health and care services seemed to be well coordinated. This is lower than the national average of 74% across Scotland (HCES).

25% of health and care resource in South Ayrshire in 2020 was spent on hospital stays where the patient was admitted as an emergency. This is higher than the national average of 21%.

MINISTERIAL STRATEGIC GROUP FOR HEALTH AND COMMUNITY CARE CORE INDICATORS

Table 1: South Ayrshire Progress Against MSG Indicators 2020/21 (Aged Under 18) (PHS July 2021 Release)

NO.	MEASURE	OBJECTIVE FOR 2020/21	ACTUAL PERFORMANCE	OBJECTIVE STATUS
1	Unplanned Admissions	2% decrease	46% decrease	✓
2	ED Attendance	Reduce growth to 3%	44.4 % decrease	✓
3	Unplanned Bed Days (Acute)	Maintain at 0%	18% decrease	✓
4	Emergency Bed Days (Mental Health)	62% decrease	82.4% decrease	✓

Table 2: South Ayrshire Progress Against MSG Indicators 2020/21 (Aged Under 18) (PHS July 2021 Release)

NO.	MEASURE	OBJECTIVE FOR 2020/21	ACTUAL PERFORMANCE	OBJECTIVE STATUS
1	Unplanned Admissions	Reduce growth to 10%	8% decrease	✓
2	ED Attendance	10% decrease	36.4% decrease	✓
3.1	Unplanned Bed Days (Acute)	1% decrease	15.8% decrease	✓
3.2	Emergency Bed Days (Mental Health)	19% decrease	54.3% decrease	✓
3.3	Emergency Bed Days (Geriatric Long Stay)	60% decrease	34% decrease	X
4	Delayed Discharges (All)	Reduce growth to 25%	12.6% increase	X
5	End of Life Care - % of last 6 months of life in community	Increase by 1 percentage point	Increase of 1.4 percentage points (p)	✓
6	Balance of spend across institutional and community services	Maintain		

CHILDREN'S OUTCOMES

Our children have the best possible start in life.

In the latest time-period available from 2017/18-2019/20 (3- year financial aggregate), the percentage of babies exclusively breastfed at 6-8 weeks in South Ayrshire was 22%. This is higher than Ayrshire and Arran (19%) for the same period but lower than Scotland as a whole at 31%. From 2018/19 to 2019/20, the overall percentage of those reaching the developmental milestones at the time of their 27–30-month review has reduced slightly from 82.9% to 82.7%.

Dental Health Programme

In 2019, 86.3% of children in Primary 7 presented with no obvious decay in permanent teeth compared with 79% across Ayrshire and 80% across Scotland.

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

The number of young people who are looked after at home or away from home moving to positive destinations has improved significantly following a targeted approach of support. 98.4% of all young people moved to a positive destination compared to 94.5% in this cohort. This is an increase from 75% in 2018/19. It should be noted that this measure is subject to fluctuation due to small numbers.

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

High-Risk Pregnancy Protocol has been implemented across South Ayrshire. Following assessment by a Safeguarding midwife, a multiagency forum ensures a proportionate level of support is provided to families. Safeguarding midwives undertake a pre-birth assessment for families of unborn children where pregnancy is identified as high risk.

At 31 July 2020 there were 300 children and young people looked after by South Ayrshire a decrease of 13% from 345 in 2019.

As at 31st July 2020, the majority of children (91%) are being looked after in the community either at home with their parents, with friends/relatives or with foster carers.

South Ayrshire's rate of child poverty After Housing Costs (AHC), 24.36%, is the 10 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, 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.

Champions for Change' Champions Board

Since April 2020, a range of activities have taken place all of which increase participation and engagement between care experienced young people and their corporate parents including Life Changes Trust national network activity.

Participation Activity continued throughout lockdown via virtual groups and activity. This included:

- a 2-week summer programme;
- the distribution of 55 craft packs followed by 150 summer packs; and
- 200 Tamfest packs (in partnership with SAC Culture Services).

Social media has played a huge role in how the Champions Board has encouraged participation and maintained relationships. The Champions Board have relied on platforms such as Facebook, YouTube, Instagram and TikTok as well as South Ayrshire and South Ayrshire Health and Social Care Partnership communications services.

Children's Houses

Working with our colleagues in Housing Services, the Health and Social Care Partnership (HSCP) are working to improve the experiences for children moving from our Children's Houses and making the transition to independence. Our extended family model seeks to maintain key relationships and the nurturing connection allowing young people access to practical and emotional support when required.

Throughcare and Continuing Care

In partnership with Housing Services, the Health and Social Care Partnership has been involved in the development of a joint commissioning strategy to develop a new service to meet the needs of young people leaving care and vulnerable young people who find themselves homeless or at risk of homelessness.

Financial Inclusion Pathway

A Financial Inclusion Pathway has been developed and circulated to all health and social care staff. The number of families referred directly to the Information and Advice Hub by HSCP and NHS staff between 1st April 2020 and 31st March 2021 was 357. The total verified income generated in benefit uptake for these families was £1,109,400.

Supporting Young Carers

In January 2021, a series of staff briefings took place across the partnership involving staff within health, education and social work to raise awareness of Young Carer's and formally launch the local Young Carer's guidance, alongside our Young Carer's statement.

The Young Carers Strategy 2021 – 2026 sets out our local response to the statutory duties (responsibilities) of the Carers (Scotland) Act 2016 – which is a law that says what support must be given to carers, including young carers.

JUSTICE OUTCOMES

Community safety and public protection

In 2020/21, 98% of Criminal Justice Social Work Reports were submitted to court by their due date which is an increase on the previous year's performance of 96%. The reports which were not submitted by 12 noon on their due date were lodged on the afternoon of the due date.

Social inclusion to support desistance from offending

In 2020/21, 84% of individuals placed on a Community Payback Order with Supervision Requirement were seen within 5 days of their court.

Impact of COVID on Justice Outcomes

All Courts closed on 23rd March 2020 and operated in a virtual manner, with only custody courts sitting during lockdown periods. Ayr Sheriff Court cases were heard at the Hamilton hub and court social work staff engaged virtually with Hamilton staff. Criminal Justice Social Work Reports were provided to courts and given priority. All face-to-face contacts changed to virtual and phone contacts where risk allowed. High risk and vulnerable were seen face to face. Unpaid work was suspended for most of the year 20/21 with only a small number of people being able to undertake work in their local area. Home tasks were given where appropriate.

FINANCIAL PERFORMANCE AND BEST VALUE

The overall financial performance against budget for the financial year 2020-21 was an underspend of £10.206m.

It is essential that the IJB operates within the delegated budget and commissions services from the Council and Health Board on that basis. Significant progress has been made during 2020-21 to ensure the ongoing financial sustainability of the IJB. This work will continue and be built upon moving into 2021-22.

Key successes for 2020-21 include:

- Repayment of £1.092m, being the annual instalment of outstanding debt to the Council, leaving a balance of £1.894m to be paid over the next two financial years;

- Overall reported surplus allows for the earmarking and protection of ring-fenced funding for Scottish Government priorities and continued Covid-19 recovery and renewal;
- Savings totalling £3.1m were delivered in-year, against an approved savings plan of £3.8m, £0.402m savings were delayed due to Covid-19 and £0.298m savings were unachievable, the shortfall in savings was factored into the approved budget for 2021-22;
- Progress with reducing the number of children placed in out with authority placements in 2020-21 have meant savings for 2021-22 are achieved; and
- The level of Social Care services supporting older people in the community has increased, this is essential to maintain the improvement in delayed discharges.

CLINICAL CARE AND GOVERNANCE

Throughout the pandemic we maintained our core governance meetings and re-established a Health and Care Governance Group (HCGG), in keeping with national guidance to ensure a joined-up approach to governance of both 'health' and social work / social care services.