

Subject: **Allied Health Professions Highlight Report 2018**

Purpose: The purpose of this paper is to introduce the attached Allied Health Professions Highlight report for 2018 and,

(i) Clarify the range of AHP Services now provided within North Ayrshire Health and Social Care Partnership; (ii) provide a highlight of the contribution of AHP services for the people of North Ayrshire in 2018; (iii) Provide a precis of the challenges faced in 2018; (iv) provide a summary of the objectives for AHP services in North Ayrshire for the next 12 months.

Recommendation: It is recommended that the IJB :

Note the content of the attached AHP Highlight report and, endorse the AHP Service objectives outlined within the attached report.

Glossary of Terms	
NHS AA	NHS Ayrshire and Arran
HSCP	Health and Social Care Partnership
AHP	Allied Health Professional
HCPC	Health and Care Professions Council

1.	EXECUTIVE SUMMARY
1.1	The attached report provides detail on the activity of Allied Health Professions (AHPs) in North Ayrshire Health and Social Care Partnership (HSCP) during the calendar year of 2018.
1.2	With the integration of Health and Social care almost 4 years on, and with the recent devolution of AHP services to each HSCP in Ayrshire, the attached report clarifies the range of AHP services now delivered within North Ayrshire HSCP, the range of roles this encompasses, and highlights the contribution AHPs are making for the people of North Ayrshire.
1.3	The attached report further sets out collective objectives for AHP services in North Ayrshire for the next twelve months as follows, to : <ul style="list-style-type: none"> ○ Maximise the AHP contribution to multi disciplinary working ○ Continue workforce planning, to maximise the AHP workforce available within North Ayrshire, within the resources available

	<ul style="list-style-type: none"> ○ Continue work that promotes early access to AHPs and preventative approaches ○ Continue to prioritise the wellbeing of AHP Staff ○ Continue to build on progress around digital agendas ○ Ensure progress that supports consistent and robust performance data
2.	BACKGROUND
2.1	The Scottish Government defines AHPs as being a diverse group of professionals who support people of all ages, with a focus on personal outcomes. AHPs provide support and interventions in areas such as self-management, diagnostic, therapeutic, rehabilitation and enablement services; to support people to live healthy, active and independent lives. AHPs in the UK are registered with and regulated by the Health and Care Professions Council (HCPC).
2.2	In North Ayrshire, AHPs encompass several different professional groups – Physiotherapy, Podiatry, Occupational Therapy, Dietetics and Speech and Language Therapy - working as part of multi disciplinary teams across health and social care, hospital and community settings, and across all stages of the life curve. As such, AHPs provide support across North Ayrshire, including Arran and Cumbrae within Ayrshire Central Hospital Site (providing inpatient and outpatient services), Douglas Grant Rehab Centre, Woodland View, and within community settings including day centres, care homes, people's own homes, social services premises, community clinics, health centres, education premises and community facilities.
2.3	The attached Highlight Report provides introduction to each of the professional groups led under the umbrella term of AHP in North Ayrshire Health and Social Care Partnership. It highlights the achievements of these professional groups in 2018, as well as some of the key challenges, and service objectives moving forwards.
2.4	The attached Highlight Report underlines the strong contribution that AHPs make to the people of North Ayrshire, the improvement culture that has been embraced among team members, and the ways in which AHPs work alongside a wide range of partners – carers, families, statutory, independent and voluntary sectors - as critical components of multi disciplinary teams; to support wellbeing, self management and promote independence.
3.	PROPOSALS
3.1	<u>Anticipated Outcomes</u>
	The attached Highlight report seeks to raise the profile of AHPs in North Ayrshire and to assist the IJB in understanding the contribution that this group makes for the people of North Ayrshire, as part of multi disciplinary teams
3.2	<u>Measuring Impact</u>
	Systems to record AHP performance and impact will continue to be refined, with regular reports to the Director of North Ayrshire HSCP, and the North Ayrshire Health and Care Governance group.

4.	IMPLICATIONS	
Financial:	Nil	
Human Resources:	Nil	
Legal:	Nil .	
Equality:	Nil	
Children and Young People	The attached report highlights the contribution of AHPs for the people North Ayrshire, including children and young people.	
Environmental & Sustainability:	Nil	
Key Priorities:	The attached report outlines the contribution of AHPs in North Ayrshire to the priorities articulated in the HSCP's Strategic Plan	
Risk Implications:	Nil	
Community Benefits:	Nil	

Direction Required to Council, Health Board or Both	Direction to :-	
	1. No Direction Required	X
	2. North Ayrshire Council	
	3. NHS Ayrshire & Arran	
	4. North Ayrshire Council and NHS Ayrshire & Arran	

5.	CONSULTATION
5.1	The attached report has been developed in consultation with the AHP Leadership team in North Ayrshire.
6.	CONCLUSION
6.1	<p>The attached AHP Highlight Report</p> <ul style="list-style-type: none"> • Clarifies the range of AHP Services now provided within North Ayrshire Health and Social Care Partnership • Provides highlight of the contribution of AHP services for the people of North Ayrshire in 2018 • Provides a precis of the challenges faced in 2018 • Provides a summary of the objectives for AHP services in North Ayrshire for the next 12 months <p>The IJB are asked to :</p> <ul style="list-style-type: none"> • Note the content of the attached AHP Highlight report • Endorse the AHP Service objectives as outlined within the attached report

For more information please contact Alistair Reid, Lead Allied Health Professional on 07825227834 or Alistair.Reid@aapct.scot.nhs.uk

ALLIED HEALTH PROFESSIONS

HIGHLIGHT REPORT 2018



NORTH AYRSHIRE
Health and Social Care
Partnership

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Introduction

This report highlights the activity of Allied Health Professions (AHPs) in North Ayrshire Health and Social Care Partnership (NAHSCP). The report content covers January to December 2018.

The Scottish Government defines Allied Health Professionals (AHPs) as being, 'a diverse group of professionals supporting people of all ages focusing on personal outcomes. They provide 'preventative interventions in such areas as supported self-management, diagnostic, therapeutic, rehabilitation and enablement services to support people to live healthy, active and independent lives' . AHPs in the UK are registered with, and regulated by the Health and Care Professions Council (HCPC).

There is no statutory requirement for an annual AHP report. However, as NAHSCP is about to enter year four of the integration of health and social care , and with the recent devolution of AHP services to each health and social care partnership area in Ayrshire, it is anticipated that this report will be useful for the Integration Joint Board. The report will clarify the range of AHP services and roles within North Ayrshire Health and Social Care Partnership, and highlight the contribution of AHPs to the Partnership's strategic ambitions.

In North Ayrshire, AHPs encompass several different professional groups – Physiotherapy, Podiatry, Occupational Therapy, Dietetics and Speech and Language Therapy. They work as an integral part of multi-disciplinary teams across health and social care, hospital and community settings, and across all stages of life. AHPs provide service across North Ayrshire, including Arran and Cumbrae, within Ayrshire Central Hospital Site (inpatient and outpatient services), Douglas Grant Rehabilitation Centre, Woodland View and within communities including day centres, care homes, people's own homes, social service premises, community clinics, health centres, education premises and community facilities.

This report provides an introduction to each of the professional groups under the umbrella term of AHP in North Ayrshire Health and Social Care Partnership. It highlights the achievements of these professional groups in 2018, as well as some of the key challenges, and service aims moving forwards, and underlines the valuable contribution that AHPs make to the people of North Ayrshire.

AHPs in North Ayrshire



The majority of AHPs in North Ayrshire are led within an AHP professional structure.

In addition, AHPs within North Ayrshire also sit as part of established multi-disciplinary teams across all services, including,

- Dirrans Centre
- Enhanced Intermediate Care Team
- Assessment and Reablement Teams
- CAMHS
- Universal Early Years Team
- Locality based community care teams, including learning disabilities teams and community mental health teams

Where AHPs are managed out with their own profession, lines of professional leadership and support are also in place.

Additionally there are also a number of small, specialist, pan Ayrshire AHP services, delivered across the three Ayrshire health and social care partnerships, that are led by North Ayrshire, including,

- The Alternative and Augmentative Communication Service
- Speech and Language Therapy Learning Disabilities Service
- Community physiotherapy for children and young people
- Occupational therapy, physiotherapy and dietetic input to forensic services
- Dietetic mental health teams
- Physiotherapy for the community mental health teams
- Physiotherapy for people with learning disabilities
- AHP input to pan Ayrshire neurological rehabilitation services based at Douglas Grant Rehabilitation Centre, Irvine

Similarly, there are a number of small, specialist, pan Ayrshire AHP services delivered to people in North Ayrshire, but led through AHP structures in neighbouring health and social care partnerships, including,

- Musculoskeletal (MSK) Services – Led via AHP structures in East Ayrshire Health and Social Care Partnership, currently under review
- Podiatry services – Led via AHP professional structures in East Ayrshire Health and Social Care Partnership, currently under review
- Pulmonary rehabilitation – Led via AHP professional structures in South Ayrshire Health and Social Care Partnership

3 *AHP leadership team in North Ayrshire*

The AHP leadership team in North Ayrshire works closely with a range of partners to provide leadership, management and professional governance for all AHPs in North Ayrshire Health and Social Care Partnership.

The AHP Senior Manager/ Lead Allied Health Professional has overall professional accountability for AHPs in North Ayrshire. This is supported by a team of service managers who lead and manage the profession for which they are responsible, and act as professional lead for that profession within North Ayrshire Health and Social Care Partnership.

In addition to those services which the AHP Senior team directly manage, they also provide professional leadership to those AHPs managed out with AHP structures.

The AHP senior team in North Ayrshire Health and Social Care Partnership currently comprises of:

- Alistair Reid – AHP Senior Manager/ Lead AHP
- Louise Gibson – Dietetics Service Manager / Professional Lead for Dietetics
- Elspeth Mair – Speech and Language Therapy Service Manager / Professional Lead for Speech and Language Therapy
- Linsey Stobo – Occupational Therapy Service Manager/ Professional Lead for Occupational Therapy
- Madelaine Halkett – Physiotherapy Service Manager / Professional Lead for Physiotherapy
- Rhona Allardice – Podiatry Service Manager / Professional Lead for Podiatry

The AHP senior leadership team provides AHP representation and participation in a range of strategic groups within North Ayrshire Health and Social Care Partnership:

- Integration Joint Board
- Strategic Planning Group
- Partnership Senior Management Team
- Health and Care Governance
- Social Work Governance

- Mental Health Governance Groups
- Staff Partnership Forum
- Transformation Board
- National Secure Adolescent Inpatient Service development
- Trindlemoss and Warrix Avenue development
- Additional Support Needs School Campus development

In 2017, the AHP leadership team participated in the Blue Wave leadership programme with Fiona MacNeill Associates. The strategic workforce intentions developed by the team through this programme remain relevant now:

1. AHPs will support early intervention and prevention by connecting with people within locality planning, education, the third sector and the private sector
2. AHPs will work to the top of their professional licence and empower support workers, volunteers and other colleagues to make a positive difference
3. AHPs will provide a targeted approach by working as part of multi-disciplinary teams using a generalist approach to meet needs of people with complex conditions whilst providing specialist advice and intervention as necessary
4. AHPs as a workforce will support the shifting balance of care by coordinating and advocating for people across traditional boundaries
5. AHPs will embrace alternative models of care and explore the development of new roles, skills and approaches

North Ayrshire AHP leadership team meets on a weekly basis. In addition, bi-monthly extended leadership sessions (including team leads) take place to support operational matters and professional/ leadership development.

In 2018, the full North Ayrshire AHP senior leadership team participated in NHS Education for Scotland (NES) Leading for the Future programme focusing on adaptive leadership and managing wicked problems.

The following pages introduce the role of each individual profession in North Ayrshire, articulate the workforce available, and highlight achievements and contributions during 2018.

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AHP Professions

Dietetics

Dietetics is concerned with the assessment, diagnosis and treatment of nutritional and dietary problems at individual and population level.

Dietitians use public health and scientific research on food, health and disease, which they translate into practical guidance to enable people to make appropriate lifestyle and food choices.

In North Ayrshire, the dietetic service consists of 12.8 Whole Time Equivalent (WTE) with a headcount of 22 people.

Key achievements in 2018

- Continuing to provide regular, quality practice education opportunities to undergraduate dietetic students
- Working to reduce waiting times for community dietetic teams
- Input to the National Dietetic Prescribing Network taking forward pieces of work around data; care bundles and best practice guidance and will report progress through Scottish Dietetic Leadership Network
- Involvement in National Dietetic Supplies contract negotiations, commence November 2018
- Developing engagement resources and facilitators notes to promote discussion with local groups about the undernutrition strategy. Stakeholder events will be held in spring 2019
- Funding gained to carry out test of change with regard to oral nutritional supplements (ONS) in all Ayrshire partnership areas. This will involve direct requests to community pharmacy for ONS initiation; changes and cessation as part of a tightly monitored pathway to reduce the number of long-term users and subsequently prescribing costs. This work is in partnership with GP practice staff; community pharmacy; pharmacy prescribing advisors and care homes where aligned to GP practices/aligned dietitian. It is envisaged that a whole systems pathway will result in access to ONS via dietetic assessment only, for the majority of people in Ayrshire and Arran.

- Representation on acute and primary care prescribing groups. As a result, prescribing costs associated with ONS already reducing in all areas
- Integrating as part of the AHP team within the Beehive at Woodland View
- Supporting new mental health developments in Woodland View
- Providing support to people across Ayrshire who need neuro rehab
- Providing support to people across Ayrshire with mental health problems, learning disabilities, eating disorders, including children and young people

Challenges in 2018

- Waiting times for some community based services
- Managing workforce – including key staffing changes throughout 2018
- Timescales associated with recruitment
- Impact of Cash Releasing Efficiency Savings (CRES)
- Leading the local approach to international thickener descriptor changes
- Providing full support to care homes
- Supporting student colleagues

Aims for 2019

- Continue work with catering colleagues, linked to International Dysphagia Diet Standardisation Initiative (IDDSI), to include new descriptors on acute hospital menus by March 2019.
- Progress initiatives outlined above, including dietetic input to diabetes prevention work in North Ayrshire
- Build on existing positive dietetic contribution to the new intermediate care and rehabilitation model, and locality based multi-disciplinary working
- Contribute to and support new developments, including Trindlemoss and the National Secure Adolescent Inpatient Service (NSAIS).
- Work with primary care colleagues to review, streamline and optimise the dietetic service provided to GP practices and care homes via multi-agency work

Speech and language therapy

The service uses Care Aims as its main clinical decision-making methodology to support quality, effective and equitable speech and language therapy care. The service works with multi-disciplinary and multi-agency teams but increasingly is also developing strong links with the third sector to support early intervention and health promotion practices.

The main client groups supported by speech and language therapy are:

- Adults with acquired and progressive neurological difficulties (including MND, stroke, dementia, multiple sclerosis, Parkinsons, traumatic brain injury)
- Adults with voice disorders
- Adults with head and neck cancer
- People who stammer
- Children and young people with speech, language, fluency or communication difficulties, some of whom may have associated other diagnoses (cerebral palsy, syndromes, autistic spectrum conditions, complex needs) and their families/carers
- Adults with learning disability
- People who have eating, drinking and swallowing difficulties

In North Ayrshire, the speech and language service consists of 13.02 WTE with a headcount of 21 people. Of this, 5.20 WTE deliver services to children and young people, and 7.82 WTE provide input to adults

The team work across a number of specialist areas (see below). There are staff members who work across teams and also have a responsibility to deliver service on an area-wide basis, dependent upon need.

Children's services

We offer an open requests for assistance system and accept requests from parents, carers, education, GPs, consultants, other AHPs, transfers from specialist services in Glasgow and individuals themselves. Speech and language therapists respond to requests, triage, deliver therapy information sessions, provide specialist assessment (where appropriate) and offer time-ended packages of intervention based on agreed outcomes.

Adult services

The adult service receives referrals from multiple sources including GPs, AHPs, specialist teams include Huntington's disease, motor neurone disease (MND), multiple sclerosis, neuro rehab, Woodland View, mental

health teams, learning disability service, enhanced intermediate care teams, care homes, health and therapy teams, ENT consultants. Referrals are triaged, assessed where appropriate and intervention offered.

Staff across both paediatric and adult services work with a range of multi-agency and multi-disciplinary teams to ensure the best care possible is provided. At every opportunity those most proximal to the individual are offered interventions that are enabling and support self-management and therefore engagement with local communities and 3rd sector organisations is beneficial.

Additionality

In addition to the core posts detailed above, additional fixed term funding has been achieved in partnership with education via various sources (Scottish Attainment Challenge, Early Years and Change Fund). This has enabled projects that specifically target capacity building, whole school approaches, parental engagement and promoting public awareness.

In 2018 the resource funded equates to:

Additionally funded resource	WTE	Headcount	Funded until
Within professional learning academy			
Band 6	1 WTE	1	March 2020
Band 7	1 WTE	1	March 2020
SPIN			
Band 6	2 WTE	5	March 2019
Raising Attainment Arran			
Band 5	0.5 WTE	1	January 2020
Band 6	1 WTE	1	March 2019
Change Fund (in universal health visitor team)			
Band 6	1 WTE	1	2019

Key achievements in 2018

- Reducing waiting times for children / young people accessing service
- Staff utilising improvement methodology to support change
- Staff accessing and engaging in training to ensure evidence based interventions and support succession planning
- Key staff being supported to develop dysphagia competencies, staff training at postgraduate level, which will ensure longer term sustainability and support capacity building across the speech and language service
- In partnership with IT, staff have developed a Learn Pro module, 'Supporting CYP Language and Communication' and will be tested with health visitors

- Success and continuing development of therapy information sessions and service access
- Maximising skill mix within teams
- Positivity and resilience of team
- Achieving continued funding from education partners
- Successful use of social media in engaging with parents and communities
- Extensive spread of Makaton training engaging parents, carers, families, local authority staff and third sector and building capacity and self-management approaches
- Introduction of remuneration for training, therefore allowing the department to backfill, support development of training strategy for Makaton, role development for speech and language assistant and building capacity across communities and organisations
- Increase in parents, carers and educators accessing training opportunities
- Update of AHP content on NHS Ayrshire & Arran public facing website
- Speech and language therapist engagement in national research projects
- Staff supporting and engaging in national initiatives
- Development of new pathways within voice service and discharge from acute hospitals to North Ayrshire to reduce waiting times, maximise self management and ensure the right service is delivered

Challenges in 2018

- Capacity of core service
- Unable to respond to the unmet need identified within our communities:
 - » Current staffing does not allow delivery of sufficient evidence based intervention at specialist level
 - » Inability to deliver sufficient universal and targeted approaches within core provision
- Inability to deliver approaches to reduce the barriers to access for most vulnerable individuals
- Impact of Cash Releasing Efficiency Savings (CRES)
- Sustainability of approaches undertaken via additional funding
- Increasing inequity of service delivery across Ayrshire due to variance of available funding
- Managing waiting times
- Patient / community dissatisfaction
- Recruitment and retention of staff

Aims for 2019

- Continue to build staff knowledge and capacity across early years and primary to support children in their speech and language communication development
- Develop skill mix across teams when the opportunity arises
- Deliver quality professional development experiences
- Maintain communication champion professional network
- Provide targeted speech and language services to support parents/carers as part of the universal early years service
- Raise awareness of appropriate speech, language and communication resources by maximising use of technology and social media



- Engage in further joint working with education, third sector and communities to support speech language and communication development
- Establish joint CPD with universal early years and health visiting teams
- Establish language and communication policy with specialist educational environments, pathway and competency framework for other stakeholders.
- Build capacity by developing competencies and training for band 3, 4 support staff and other AHP staff to ensure every contact counts
- Build on progress and opportunities around digital agendas

Occupational therapy

Occupational therapy is a client centred profession concerned with promoting health and wellbeing through occupation. The primary goal of occupational therapy is to participate in the activities of everyday life. Occupational therapists achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they want to, need to or are expected to, or by modifying the occupation or environment to better support occupational engagement .

The occupational therapy service works with people of all ages. It offers options and choices in respect of appointment locations that support their goals; at home, in clinics or in community resources, and utilises positive partnerships; peer support, volunteers, community resources, education.

Occupational therapy staff are based across North Ayrshire Health and Social Care Partnership, at Arran Social Work Dept, Rainbow House, Douglas Grant Rehabilitation Centre, Woodland View, The Horseshoe, Brooksby Resource Centre, Caley Court, Bridgegate House and Three Towns Resource Centre.

In North Ayrshire, the occupational therapy service consists of 31.38 Whole Time Equivalent (WTE) with a headcount of 37 people.

Occupational therapy team members are managed within community care teams, Dirrans Centre, Enhanced intermediate care and rehabilitation teams, Assessment and Reablement Team, Service Access Team.

Key achievements in 2018

- OT Attend Anywhere work initiated for people with MS experiencing fatigue
- Constraint based therapy – measureable outcomes on ability to improve function in arm after a stroke
- Supervision and support to Individual Placement Support (IPS) practitioner working for the Scottish Association of Mental Health based in the Three Towns Resource Centre. Occupational therapy staff supported the development of this service that assists people to directly access employment opportunities
- Greater diversity of work being undertaken with schools and desire expressed by schools to have greater occupational therapy involvement, for example, mindfulness work on Arran.
- Occupational therapist working within North Ayrshire Alcohol and Drug Partnership (ADP) supporting capacity building via Cafe Solace and wider partnership working

- Recovery focussed work within addictions – group programme, self-management. Occupational therapist facilitating ‘Moving on Together’ groups with peer practitioners. This includes support to training of peers.
- ‘Health and Social Care Occupational Therapy – best use of resource and skills’ – poster displayed at NHSScotland Event (June 2018)
- Shared staff training opportunities across Health and Social Care Partnership.
- Occupational therapist in Woodland View in-patient mental health working with voluntary partners across Ayrshire.
- Engagement with Ayrshire College to support in-patient learning. An example is recognition of the need to increase knowledge of local mental health services for occupational therapists working in community care. An event was organised where MDT colleagues (OT, nursing, SW) across mental health provision spoke to the services available and answered questions.
- Test of locality based specialist services with occupational therapist based within Brooksby’s Health and Therapy Team offering therapy for people post stroke, to bring service closer to person’s home.
- Test of closer working between occupational therapy colleagues across the system; health occupational therapist and social care colleagues undertaking joint visits to support grant process for some adaptations to reduce delays.
- Work on-going related to early diagnosis and intervention for people diagnosed with dementia
- Universal and targeted work within Child Health and Education
- New occupational therapist (Band 6 fixed term) confirmed for Low secure unit and IPCU in Woodland View
- Involved in triage testing with Adult Community Mental Health Team, skills development: CBT qualification, Behavioural Activation
- Carers – pilot work with Chest Heart & Stroke Scotland
- Improving Observation Practice Scottish Patient Safety Programme – Pilot work with an Acute ward team. This works aims to support occupational therapy intervention for people requiring ‘continuous intervention’ through direct engagement and supervision of nursing assistants.
- Engagement with adult literacy – North, South, East Ayrshire – to support people in Woodland View
- New carers support group for those under 65 diagnosed with dementia
- Key member of leadership teams associated with NSAIS, Trindlemoss/ Warrix Avenue, Forensic Review, Mental Health Review, Models of Care and ADP Quality work stream

Challenges in 2018

- Waiting times have increased in children's services and adult community mental health due to staff changes including retirement/left the service/ maternity leave. Demand, capacity and scrutiny processes are being reviewed in terms of impact.
- Inclusive and integrated workforce – occupational therapists and support staff are paid different salaries dependent on employer (NHS Ayrshire & Arran or North Ayrshire Council). This has challenged our ability to rotate staff and flexibly cross cover.

Aims for 2019

- Improve access and decrease waits – particularly CMHTA, young people and those referred to community occupational therapists
- Progress locality and cluster approaches for schools and communities
- Inclusive workforce planning – service not silo
- Demand and capacity modelling
- Focussed work with carers
- Benefits realisation of models of care investment and low secure investment.
- Progress group assessment models with children
- Progress work with interested partners associated with trauma informed care
- Opportunities to improve integrated approach Children's Services / CAMHS across North Ayrshire, including Arran
- Involvement in work around "Dementia Friendly Arran"
- Involvement in further developing Mental Health Service delivery on Arran
- Sustain goal setting, criteria led and early supported discharge within in-patients
- Progress use of technology for communication and treatment
- Ongoing work in obesity and multiple sclerosis pathways
- One records system – patient and staff risks highlighted by use of multiple systems
- Involvement in supporting and promoting activity for older adults with a functional mental health problem to improve wellbeing

Physiotherapy

Physiotherapy supports people affected by injury, illness or disability through movement and exercise, advanced manual therapy, education and advice. Using highly specialised assessment and treatment planning, physiotherapy maintains health for people of all ages, helping people to manage pain and prevent disease. Physiotherapy works across both physical and mental health, promoting self-management and preventing long term disability.

The Physiotherapy service in North Ayrshire has a headcount of 59, and a whole time equivalent of 47.24.

Physiotherapy services available in North Ayrshire:

- North Ayrshire Community Physiotherapy Team provides slower stream rehabilitation to patients including Arran (1.93 WTE), and Cumbrae and as part of Brooksby and Beechview Health and Therapy Team. The team was enhanced through investment in the Enhanced Intermediate Care and Rehabilitation Service. People are seen in their own homes, nursing home or can be brought in to hospital sites if more specialised equipment is required.
- The physiotherapy team based at Douglas Grant Rehabilitation Centre provides physiotherapy input to neuro outpatient services to people from North Ayrshire and they host pan Ayrshire physiotherapy services for people with muscular sclerosis, motor neurone disease and people with spasticity. The team also provides specialist inpatient rehabilitation for people following a stroke, for older adults, and for people with neurological conditions.
- The child health pan Ayrshire paediatric physiotherapy team provides highly specialist treatment to children who have additional needs, including children with cystic fibrosis and complex respiratory disorders, neurodevelopmental delay, neuromuscular conditions, cerebral palsy and MSK issues. They assess, treat and provide plans of care at home, in clinics in special schools, and in main stream schools.
- The combined, pan Ayrshire, mental health and learning disability physiotherapy team (formed in summer 2018) provides physiotherapy input to inpatient areas and community teams for people with learning disabilities, and the community mental health teams for adults and older people.
- In addition, there are physiotherapists working in North Ayrshire, managed through different structures – within the Integrated Care Teams, cardiac rehabilitation, pulmonary rehabilitation and MSK.

Key achievements in 2018

- Completion of physiotherapy restructure to bring closer alignment to the health and social care partnerships
- Integration of community rehabilitation team with wider partners as part of Enhanced Intermediate Care and Rehabilitation Service
- Training of band 3 interdisciplinary workers
- Successful recruitment to fill posts and stabilise teams including some hard to fill posts – e.g. Arran band 7, mental health band 7
- All teams progressing service improvement projects and have clear goals for 2019
- Increased focus on multi-disciplinary working and towards AHP collaborative work
- Skill mix review commenced in all areas – work ongoing to ensure workforce fit for the future.



Challenges in 2018

- Instability created by several key staff members retiring and gaps in filling post due to scrutiny process timescales
- Physiotherapy restructure and associated budget challenges
- Impact of Cash Releasing Efficiency Savings (CRES)
- Scrutiny process for recruitment
- Review of skill mix to include more support workers
- Unprecedented sick leave in key areas
- Challenging silo working and traditional models of practice

Aims for 2019

- Reduce wait list in all areas
- Evidence impact of models of care
- Continue clinical supervision pilot and embed into practice
- Focus on wellbeing of staff and maintenance of staff attendance levels
- Improve use of capacity and demand data to improve service provision
- Run postural stability course with paediatric and learning disability team
- Ensure LD and MH teams are integrated into one team, strengthen governance
- Review mental health team service provision
- Use data to demonstrate value of teams
- Closer team working with AHP colleagues and other partners
- Seek further opportunities to work with third sector and communities
- Inpatient teams to support earlier discharge from wards and out reach
- Embed self-management within all teams
- Embed quality improvement and leadership values in all staff

Podiatry

Podiatry focuses on the diagnosis, treatment, prevention and management of diseases, defects and injuries of the foot, ankle and lower limb. This includes ankle and foot injuries, problems with gait or walking, complications related to medical conditions such as diabetes and arthritis and diseases of the skin or nail. Interventions range from support in self-care through to specialist work in areas such as nail surgery, arthritis, diabetes, vascular, renal wound management, sports injuries and specialist footwear clinics.

The Podiatry Service is provided by a team of clinicians that include advanced practitioners, specialist podiatrists, podiatry assistants and healthcare assistants.

Podiatry is a pan Ayrshire, whole system service, currently led through East Ayrshire Health and Social Care Partnership. It provides open access/self-referral. Assessment is undertaken to determine clinical need and provided to people on the basis of medical risk and/ or podiatric need.

The Podiatry Service continues to work with multi-disciplinary and multi-agency teams and has strong links with the third sector agencies following redesign of the service in 2015 with the introduction of nail cutting by trained volunteers.

Care is provided through three main Podiatry Care Pathways:

1. Podiatry High Risk and Diabetes Pathway

This pathway involves the provision of wound care and foot protection for those patients with high-risk and limb threatening conditions found in people with peripheral arterial disease, diabetes, PAD, chronic kidney disease and patients with compromised immune systems.

North podiatry community workforce associated with this work is 3.5 WTE.

Seamless care is provided with direct referral with the podiatric/multidisciplinary team across acute and community settings

Podiatry diabetes annual screening – this is provided to people with diabetes who are ‘low risk’ and have no other foot problems. Patients are recalled annually for screening in community clinics or at consultant led hospital outpatient clinics, This service is provided by healthcare assistants.

North podiatry workforce associated with this work is 0.66 WTE

2. Podiatry Musculoskeletal (MSK) Foot and Ankle Pathway

This pathway provides assessment, diagnosis, treatment and rehabilitation of MSK foot and ankle conditions and combines gait analysis, assessment and treatment for other related lower limb conditions. Specialities within this pathway include MSK management of paediatric and rheumatology patients. North podiatry MSK workforce associated with this work is 3.3 WTE.

3. Podiatry Enablement Pathway

This pathway involves the provision of care to patients with long-term medical conditions such as COPD, stroke, dementia, Parkinson's disease, multiple sclerosis, learning disabilities, etc. This pathway also includes provision of minor surgery (nail surgery, electrosurgery) and falls prevention. Input into the Prison Service is also provided.

This pathway team also provides support to Enhanced Intermediate Care and Rehabilitation Service across three health and social care partnerships

North podiatry workforce associated with this work is 5 WTE

Within each pathway of care, podiatrists use specialist and advanced skills to manage a caseload of patients with high complex needs, using evidence-based/patient-centred principles to assess, plan, implement and evaluate interventions in both hospital and community settings as required.

Key achievements in 2018

- Podiatry workforce redesign - improved skill mix achieved with introduction of one Band 2, five Band 5s and one Band 8A advanced podiatrist in foot and ankle
- Minor surgery: significant improvements in patient waiting times as a result of ring fencing 2wte resource to this area of the service. Performance target for 'urgent' within 3weeks, 'routine' 8 weeks.
- E-Health Enablement Pathway transferred from Trak to EMIS for domiciliary visits, care homes and minor surgery. All clinics will move to EMIS during 2019. This transition is supported with the roll-out of 4G laptops to support agile working. In addition, for the first time, the service has access to electronic patient records (EPRs)
- Strategic planning and development – Podiatry senior management team agreed measures to demonstrate performance against the four pillars of management performance and governance; 1) people, 2) service, 3) quality and 4) finance.
- Podiatry Senior Management Team also considered how the service

will contribute to the transformation of services relating to the four transformation priorities: 1) prevention, 2) primary, community and social care, 3) digital and 4) models of care.

- Foot and ankle proposal – Submitted to Scottish Government to support the orthopaedic drive around service improvement. The primary ambitions are to abolish the orthopaedic backlog, establish MDT working and improve patient flow. The anticipated results are removal of unnecessary review appointments in orthopaedics, which will address the New:Return ratio, and to remove guided injections from theatre to podiatry out-patients, therefore releasing capacity in this area also.
- Approved bid – 12 month funding for 1wte Band 8A advanced podiatrist
- Introduction of 'Virtual Clinic' - joint working initiative with orthopaedic consultant at Ayrshire Central Hospital. By increasing knowledge and skills improves the decision making outcome of patients with complex foot needs
- MSK service user feedback: Local officer from the Scottish Health Council provided feedback on the recent information gathering exercise from 78 service users. No major issues around service design were identified and the majority of those surveyed were happy with the treatment and care they received
- 'CPR for Feet' - In-patient foot screening initiative linked to identify patients admitted to hospital who may be at risk of tissue breakdown
- Vascular Pathway - direct referral from vascular ward at Ayr Hospital to High Risk/ Diabetes Pathway for patients discharged from hospital with foot wounds/ulceration – post surgery
- Minor surgery – 'No Delays' (in partnership with NHS Grampian) is an online platform that health professionals can use to share video clips with patients following a consultation and treatment. A link to the video clip is sent by the clinician to the patient via email. No Delays is a nail surgery package to 'prescribe' information to patients who are recovering from nail surgery
- Podiatry finance objectives and aims achieved:
 - » Podiatry Service Managers jointly working with Finance Team with a number of key action points to address areas of overspend within certain budget lines.
 - » Improved Pecos ordering aligned to pathway/budget lines
 - » MSK consignment company undertake 6 monthly pan Ayrshire audit to identify potential over stocking in hubs

Challenges in 2018

- Staff vacancy delays caused by introduction of scrutiny panel
- Maintaining and prioritising areas of service due to diminished resources caused by long term absences and filling vacancies
- Continued minimal admin support for service. Some support is provided by MSK and non-MSK hub, however since moving to EMIS, admin support has again decreased with staff undertaking admin tasks/ appointing patients and dealing with enquiries and phone calls.
- Workforce stressors – mainly as a result of lack of admin support.

Aims for 2019

- Progress digital agendas including agile working and use of Electronic Patient Records.
- Continue skill mix review and workforce planning
- Podiatry high risk/diabetes – NHS Ayrshire & Arran Vascular Service transfer to NHS Lanarkshire will require joint MDT planning to ensure seamless provision of care continues for patients residing in Ayrshire
- Podiatry enablement to complete domiciliary re-design/re-assessment of all caseloads including podiatry assistant caseloads. Podiatry assistant time released will be reinvested into foot health prevention/ promotion activities which includes delivery of focus on WATOM factors (Work, Alcohol, Tobacco, Obesity, Mental health).
- Continue to progress self-management approaches across all three pathways
- Extend the enhanced intermediate care and rehabilitation model and its continuing development with podiatry contributing to multi-disciplinary locality working.

5 Governance

Clinical and care governance

Clinical and care governance for AHPs in North Ayrshire is assured through a variety of mechanisms.

A pan Ayrshire, uni-professional governance group exists for each of the individual AHP professions in Ayrshire and Arran, chaired by one of the service managers. These groups comprise of clinical and management leads from the relevant profession who meet on a monthly basis to provide update and build assurance on service activity, following the strands of the quality strategy – safe, person centred and effective. As such, these forums report and assure on service activity – waiting times, learning from adverse events or complaints, celebrate success in terms of positive feedback and compliments received, provide updates on service improvement, and manage or escalate risk.

These uni-professional groups report into a pan Ayrshire AHP governance group which meets on a monthly basis and is chaired on a rotational basis by one of the AHP senior managers.

The AHP governance group reports to provide assurance on the activity of AHPs to the relevant HSCP health and care governance group. As such, the AHP lead has a standing agenda item on North Ayrshire Health and Social Care Partnership governance meeting agenda; to provide update and assurance on any North Ayrshire AHP matters.

Finance

The information detailed within this section relates to AHPs managed within the AHP professional structure in North Ayrshire – physiotherapy, occupational therapy, dietetics and speech and language therapy.

AHP staff budget for 2018–19 is £4,636,534 with an establishment of 114.24 WTE.

- Within 2018–19, £161,532 CRES was applied to the North AHP budget – predominantly a combination of application of the previous year's share of CRES, CRES applied while still part of the South Lead Partnership arrangement in 2018–19, and a share of additional savings attributed by the Workforce Scrutiny Group (2019).

- At month 9 there was a year to date variance of £90,425 with a projected underspend of £126,000 by year end. The underspend is due predominantly to natural delays experienced within the recruitment system, challenges in recruiting to some vacant posts, and also linked to levels of maternity leave across AHP services.

Staff governance

Staff governance of AHPs in North Ayrshire is assured through a variety of mechanisms. All teams participate in iMatter, with associated action plans developed at team level to further improve staff experience at work.

There has been significant progress made in 2018 to ensure robust arrangements are in place to support quality supervision for all AHPs working in NAHSCP. Based on the recently published national position statement on supervision for AHPs, this work has been tested with teams in 2018 with a view to rolling the approach out in 2019.

In addition, AHP senior manager input to the AHP professional committee, North Ayrshire staff partnership forum, and AHP partnership rep forum provide additional opportunity for partnership input and support during periods of change.

AHP staff wellbeing remains a priority area. The AHP leadership team remain committed to regular engagement with teams and individuals, and are currently in dialogue with Partnership colleagues as to how best to further develop this approach.



AHP Service performance

MAST (%complete)

Fire	86%
Management of aggression	8%
Moving and handling	93%
Infection control	86%
Safe information handling	83%
Adult protection	93%
Child protection	93%

All North AHP services as at 31st December 2018

Absence %

Service	Short term	Long term
AHP North Management	0.31%	0.00%
Dietetics	1.15%	0.25%
Occupational Therapy	1.03%	2.64%
Physiotherapy	1.49%	3.87%
Podiatry	1.32%	3.26%
Speech and Language Therapy	0.87%	2.55%

Accumulative - All North AHP services as at 31st December 2018

Activity data

With AHP services working across a variety of referral mechanisms and recording systems, it has proved problematic to achieve a consistent method of recording and reporting on service activity and demand. In anticipation of the roll out of a national dataset for AHPs, the focus this year has been on achieving such data; to evidence the AHP contribution and be better placed to monitor and manage demand. While progress has been made around this, the collection of robust, consistent data will remain a focus in 2019.

Quality improvement



Across all AHP services, there is a continued focus on quality improvement, with the development of a culture of improvement, through training and mentorship to promote the ethos that improvement is everyone's business. A number of AHPs have now completed the Scottish Improvement Leader (ScIL) or local practitioner level Improvement Science Fundamentals (ISF) programmes, with corresponding quality improvement activity progressed locally.

At a national level, the Active and Independent Living Programme (AILP) supports AHPs, working in partnership with multi-disciplinary teams and agencies to improve the health and wellbeing of the population throughout the life-course. (SG 2018).

In response to this national AHP programme, four local workstreams were developed and have been progressed during 2018:

1. Workforce

This workstream seeks to determine the future vision of the AHP workforce - to ensure the right AHP staff, in the right place, at the right time with the right skills and competences to provide quality services – through analysis and consideration of the existing workforce using agreed tools and techniques.

2. Wellbeing

This group seeks to enable AHP staff to be healthy and happy at work through supporting and developing an understanding of individual and team resilience and its role in maintaining healthy working lives and our ability to adapt to change.

3. Data for improvement

This group has progressed testing and implementation of a framework to provide the information necessary to inform improvement.

4. Research, development and evaluation

This workstream seeks to build on the previously published improvement framework for AHPs; to enable AHP teams and individuals to use information in a meaningful way, to demonstrate impact and improvement.



AHP contribution to Partnership priorities

The contribution of AHPs to NAHSCP vision 'all people who live in north Ayrshire are able to have a safe, healthy and active life'

Tackling inequalities

- Improved workforce planning associated with specific services – thinking better outcomes for people, thinking service and not silo. Use of digital technology, Attend Anywhere, to reduce impact of inequalities.
 - » Project plan developed with digital services to enable video link between Arran War Memorial Hospital and mainland hospitals. The use of Attend Anywhere will enable a range of consultations with Arran residents, reducing their need to travel to the mainland. This will also support the discharge of patients from Redburn, following stroke, who would not be able to receive weekly speech and language therapy on Arran, but will be able to have a consultation via Attend Anywhere.
 - » Occupational therapy Attend Anywhere work initiated for people with MS experiencing fatigue, again to facilitate access to therapy from within people's own homes, reducing the need to travel.
- Constraint based therapy – measureable outcomes on ability to improve function in arm after a stroke.
- Opportunities realised to access grants from non-statutory organisations that improve people's quality of life in line with 'Living not enduring' programme from the Royal College of Occupational Therapy (RCOT).
- Extensive involvement with Scottish Government Assisted Communications Team on work streams to underpin development of guidance and procurement to support legislation on provision of communication equipment and support to use that equipment.
- Supervision and support to the Individual Placement Support (IPS)

practitioner working for the Scottish Association of Mental Health based in Three Towns Resource Centre. Occupational therapy staff have supported the development of this service that assists people to directly access employment opportunities.

- AHP input to the service redesign work on the Isle of Cumbrae on-going.
- Attainment project on Arran providing on-island access to universal/targeted and additional specialist speech and language therapy support. This project focuses on building staff capacity and ensuring that approaches are sustainable – provision of Ican Training, Talk Boost, Learning Language and Loving It for early years and primary staff, supporting promotion of language and communication skills across communities via drop in sessions, BookBug and community activities.
- Speech and language therapy in the Professional Learning Academy delivering extensive training and targeted interventions in North Ayrshire schools with highest SIMD index. Outcomes have proved positive with interventions evaluating well, for example, Talk Boost is targeted intervention, which builds capacity to ensure sustainability. Evaluated example, storytelling and narrative skills:

	pre-intervention	post intervention
Children achieving appropriate level of skill	9%	76%
Social interaction	50%	91%

Engaging communities

- A greater diversity of work being undertaken with schools and desire expressed by schools to have greater occupational therapy involvement, leading to mindfulness work on Arran. Sessions provided at annual health and wellbeing week on Arran leading to established links within the school. This has also begun to raise the profile of mindfulness. A number of education staff are booked to attend the next 8-week course in January 2019. This programme aims to support a longer term vision of having education staff who can take forward the mindfulness agenda within the school.
- In February 2018 the musculoskeletal project team (MSK) identified that waiting times in Ayrshire and Arran were above the national average. The project team had support from the Scottish Health Council (SHC), including independent patient engagement within the MSK sites leading to themed feedback and identified areas for further improvement – mainly around waiting times, and parking/signage.

- Occupational therapist working within ADP supporting capacity building via Cafe Solace and wider partnership working.
- Recovery focussed work within addictions – group programme, self management. Occupational therapist facilitating ‘Moving on Together’ groups with peer practitioners. This includes support to training of peer workers.
- Self-management work with Chest Heart & Stroke Scotland
- Falls prevention drop in event held at Brooksby in November, linking with seasonal flu clinic
- Active Kilwinning – multi agency, multi professional group developed collated infographic to support access to physical activity opportunities within Kilwinning locality.

Bringing services together

- Since the opening of Woodland View, AHP services are co-located in the Beehive hub, including dietetics, occupational therapy and physiotherapy. Staff work in a supportive and multi disciplinary manner to provide care and support in a co-ordinated way to people who access services in Woodland View.
- A major focus in 2018 was the development of the new model of enhanced intermediate care and rehabilitation. North Ayrshire component of this included bringing together referral management and professional triage of several, previously separate, community rehabilitation services. As well as reducing duplication, and supporting a ‘right person, right place’ approach, the progression of this takes community rehabilitation closer to NAHSCP ambition around locality based multi disciplinary working and is demonstrating impact by avoiding unnecessary hospital admission and keeping people at home.
- Health and social care occupational therapy – continued focus on the integration of approaches with a poster on best use of resource and skills displayed at NHS Conference June 2018.
- Arran locality complex care pilot
- Shared post OT main service and ICT for North Coast locality with one occupational therapy post working across traditional service boundaries in the locality
- Shared staff training opportunities across health and social care partnership.
- Occupational therapist in Woodland View in-patient mental health working with voluntary partners across Ayrshire.
- Additional speech and language therapy post focussed on adults

in North Ayrshire has focussed on delivering increased speech and language therapy input for families to support early discharge from wards in Ayrshire Central Hospital and north residents in University Hospital Crosshouse. Team are now able to respond to acute dysphagia community requests, therefore minimising the risk of hospital admission. A new pathway has also been developed for patients who have communication difficulties following a stroke.

- Engagement with Ayrshire College to support in-patient learning.
- Falls pathway test of change at Brooksby, linking with wide range of stakeholders, on-going.
- Test of closer working between occupational therapy colleagues across the system; health occupational therapist and social care colleagues undertaking joint visits to support grant process for some adaptations to reduce delays.

Prevention and early intervention

- Dietetics are working with pharmacists and GPs to review the prescribing of nutritional supplements to ensure the patients who need these most receive them and efficient spend. A test of change is underway in Irvine – testing dietitians prescribing supplements directly to free up GPs and ensuring appropriate patients receive what they need. This also involves training nursing staff at GP practices to help identify patients at risk of malnutrition to enable them to be seen early and prevent hospital admission.
- Buckreddan Project enables senior support staff in Buckreddan Care Home, Kilwinning to have increased skills and knowledge, to optimise use of walking aids, increase activity and exercise for residents, and to understand the importance of care to prevent respiratory complications. It is hoped to link up some of this work with the Care inspectorate's Care About Physical Activity (CAPA) programme. This work seeks to reduce unnecessary referrals to physiotherapy and to maximise activity and wellbeing for residents of Buckreddan, and to increase the skills and confidence of the care staff.
- Occupational therapists working within the Assessment and Reablement Teams (ART) have continued to deliver positive outcomes for the people of North Ayrshire and North Ayrshire Health and Social Care Partnership. Following investment through the Challenge Fund, there are now eight occupational therapists working as key

components of the Care at Home Service, alongside service users, their families and carers; to promote independence and reduce long term requirements for care at home. This approach has the dual benefit of supporting capacity within our Care at Home Service, whilst also supporting people's recovery and independence.

- Tests have continued, utilising advanced practice physiotherapists as first point of contact within GP practices to support early intervention for people with MSK issues. In North Ayrshire, the pilot sites have been South Beach, Ardrossan, and Largs Medical Practice. Across Ayrshire, this approach has continued to prove a success.
 - » 66% of people are seen by the physiotherapist as first point of contact, saving GP time and appointments.
 - » Only 1.3% of those who saw the physiotherapist have required to see a GP linked to the same complaint.
 - » 72% of those seen have been able to self manage their condition after brief physiotherapy advice and intervention, with a 20% reduction in referral to core MSK Services.

Following a successful recruitment campaign, plans are progressing to spread this approach across Ayrshire, with 4 WTE posts in place by May 2019.

- Anticipatory care planning – increased completion of plans collaboratively.
- Work on-going related to early diagnosis and intervention for people diagnosed with dementia.
- Dietetics thickener usage change implemented across organisation, further work will continue as new international descriptors to be in place April 2019.
- Universal and targeted work within child health and education services.
- Set up and evaluate circuits class for learning disability population – promoting physical activity and wellbeing
- Podiatry high risk/diabetes joint initiative and development of "CPR for Feet" training for Home Care staff
- Podiatry enablement to provide diabetes annual foot screening training to prison healthcare staff
- Podiatry MSK continue to develop and promote self-management phone apps/tools
- Successful collaboration with Centrestage, 'AHPs on the bus', six week programme where AHPs attended Centrestage sessions to provide informal advice, signposting and guidance to promote health and wellbeing. Over 60 individuals benefitted from this approach to early intervention, which evaluated positively by all stakeholders. Further collaboration planned for 2019.

- A number of initiatives have been introduced, focussed upon and scaled up during 2018 to reduce waiting times. This example sought to improve access to speech and language therapy for children and young people in North Ayrshire:
 - » Telephone helpline established to support open access
 - » All staff trained in 'initial conversations' to support personal outcomes for families/practitioners
 - » Increase in universal and targeted approaches offered from the core team
 - » Increased capacity building opportunities for parents, (Makaton workshops delivered flexibly in evenings and at weekends to maximise attendance and access for families and practitioners, therefore supporting self-management)
 - » Supporting a colleague from Education through Makaton tutor training to ensure increased responsibility /self management within Education
 - » Developed social media presence to improve engagement, share information and signpost families to community and national assets
 - » Maximised clinical time available by introducing opt in appointments and implementing a new system of triage/ assessment and intervention to maximize parental understanding and engagement with the service.

Improving mental health and wellbeing

- Ayrshire College has long standing links with in-patient mental health services through the delivery of group work; an in-patient art group has been running for over 10 years with tutors from Ayrshire College. Ayrshire College began collaborating NHS Ayrshire & Arran to initiate a group in November 2018 that supported in-patients to recognise their learning in health and wellbeing while in hospital and evidence this with the support of occupational therapy staff and Ayrshire College tutor. All participants are registered as students of Ayrshire College and are completing personal learning journeys. The first cohort will finish end of January 2019 with an award ceremony February 2019. The aim is to repeat this work and grow the joint working opportunities.
- Support to local response around Action 15 Mental Health strategy monies with funding for speech and language therapist and

occupational therapist posts at HMP Kilmarnock. These posts are new opportunities and work is ongoing to develop links locally and nationally to support a planned model of intervention with benchmarking and joined up working that supports people coming to HMP Kilmarnock and returning to their home locality in Scotland.



- KA Leisure project is a collaborative project between staff in Ward 5, Woodland View, physiotherapy and KA Leisure. The project seeks to ensure that people who engage with activity within Woodland View are supported to carry on with activity in the community, once discharged from hospital. Currently people who attend Ward 5 as an inpatient, have a program of exercise offered by the physiotherapy TI. Exercise often stops when

people are discharged from Ward 5, before they are able to engage with community services.

This project enables staff from KA Leisure to meet and get to know people while still in Ward 5, discuss the range of exercise available in their local community, and ensure people continue to exercise once discharged, maximising both physical and mental health.

- New occupational therapist (Band 6) fixed term post confirmed for low secure and IPCU in Woodland View.
- Podiatry Service clinical development – Neurology presented by advanced practitioners. In addition includes dementia level 1 training for all staff.
- CMHTA – Involved in triage testing, skills development: CBT qualification, Behavioural Activation.
- Carers – pilot work with Chest Heart & Stroke Scotland.
- Support to local response around Action 15 Mental Health strategy monies with funding for speech and language therapist and occupational therapist posts at HMP Kilmarnock.
- Engagement with adult literacy – North, South, East Ayrshire to support in-patients in Woodland View.
- Commenced carers support group for those under 65 diagnosed with dementia.
- Collaborative working with AHP and nursing staff in Woodland View implementing an observation pilot – Scottish Patient Safety Programme.
- Mental Welfare Commission reports for visits to Woodland View in spring 2018, positive feedback on collaborative work with occupational therapy and interdisciplinary teams re activity, structure and person centred care planning.

- Speech and language and occupational therapy assistants at Ayrshire Central have been running a weekly music and communication group since early September. The aim of the group is to enhance mood, promote movement and stimulate speech and activity through interactive music group. Evaluations from participants and staff have been positive with plans to spread approach. Similarly, a relative / carer group was established with family members of those patients who have recently had a stroke and were on Redburn Ward invited to attend weekly information sessions on stroke and its effects on communication delivered by speech and language therapists. Feedback has been excellent with plans to provide these sessions on a rolling basis.



AHP priorities for 2019

- Maximise the AHP contribution to multi-disciplinary working
- Continue workforce planning to maximise AHP workforce available in North Ayrshire, within resources available
- Continue work that promotes early access to AHPs and preventative approaches
- Continue to prioritise the wellbeing of AHP staff
- Continue to build on progress around digital agendas
- Ensure progress supports consistent and robust performance data

Conclusion

This report underlines the valuable contribution that AHPs make to the people of North Ayrshire, the improvement culture embraced by team members, and the ways AHPs work alongside a wide range of partners, as critical components of multi-disciplinary teams to support wellbeing, self-management and promote independence.



