Annual Delivery Plan

April 2022 - March 2023

Working **together** to achieve the healthiest life possible for everyone in Ayrshire and Arran

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Completion of the following signature blocks signifies the approver has read, understands, and agrees with the content of this document.

		Version	Date
Approval	Scottish Government	1.06	22.09.22
	NHS Ayrshire & Arran Board Meeting	1.06	03.10.22
	East Ayrshire Integration Joint Board	1.06	19.10.22
	North Ayrshire Integration Joint Board	1.06	20.10.22
	South Ayrshire Integration Joint Board	1.06	12.10.22

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1.0   Introduction

The Annual Delivery Plan (ADP) has been prepared collaboratively with our partners, to provide Scottish Government with confirmation that we have plans in place to demonstrate how our health and care system will stabilise and improve as we recover from the Covid-19 pandemic. It will focus on a set of priorities for 2022/23 to enable our system and workforce to recover from the incredible pressure experienced over the past two years, whilst we start to take forward improvement work that will strengthen our services for any future Covid-19 waves and the demands of winter.

Building on the previous two year's Remobilisation Plans, the ADP sets out our key priorities for 2022/23 as we seek to build back stronger as part of medium to longer term recovery and stabilisation.

This plan sits alongside our 10 year strategic ambition, Caring for Ayrshire, which is our whole system health and care redesign and reform ambition. The Caring for Ayrshire vision will deliver care as close to home as possible, supported by a network of community services with safe, effective and timely access to high quality specialist services for those whose needs cannot be met in the community. Partnership working with local communities, third sector, voluntary and independent organisations will be essential in delivering the right care, in the right place, at the right time for people in Ayrshire and Arran.

NHS Ayrshire and Arran Realistic Medicine priorities aim to embed Realistic Medicine and it's principles in to the redesign of Caring for Ayrshire. We want it to become second nature within Ayrshire and Arran to support people using healthcare services, and their families, to feel empowered to discuss their treatment. That is why the promotion of shared decision making is high on NHS Ayrshire and Arran Realistic Medicine Team's agenda. We strive to facilitate a move away from the "clinician knows best" culture and encourage the professional and the patient to have more meaningful discussions about the treatment options available as well as their risks and benefits. This move requires a strong Realistic Medicine Network. We have established and are continuing to grow our network of Realistic Medicine champions to help us spread the message and to gain feedback from them also. We will continue to develop our local Realistic Medicine Network by encouraging Champions to join us from each department and by embedding education around Realistic Medicine into training junior clinical staff when they join the board.

This plan closely aligns with the NHS Recovery Plan 2021/26 and offers opportunities with regard to the proposed National Care Service to ensure right care in the right place at the right time by the right person.

Detailed actions for the recovery and stabilisation of our services are included in Delivery Plan Appendix 2 and align with our four agreed Organisational Priorities for 2022/23:

- **Right Sizing the Bed Footprint**
  To deliver safe, effective and quality care within agreed funded footprint

- **Right Sizing the Workforce**
  Aligned to the right sizing of the acute bed footprint

- **Electronic Patient Record (EPR) and Records Management**
  Digital Services activities contributing to the EPR and Records Management Programme

- **Distributed Working and Estate Rationalisation**
  Right-sizing the estate through rationalisation of non-acute support accommodation in line with new Distributed Working Policy

2.0   Workforce

The deliverables set out in the Annual Delivery plan mirror those that are included within the NHS Ayrshire and Arran Workforce Plan. This plan, when taken in conjunction with the three Health & Social Care Partnership Workforce Plans, provides a composite health and social care economy view for Ayrshire. This narrative sets an overview of what is articulated within the NHS Ayrshire and Arran workforce plan.

NHS Ayrshire and Arran has a pre-existing People Strategy which directly informs our Workforce Plan and is thematically built around four pillars – Attract, Retain, Develop, Support. These local pillars effectively encompass the thematic content and intent of the five pillars detailed within the National Health & Social Care Workforce Strategy and reflect the direct read across between our People Strategy and Workforce Plan.

2.1   Recruitment and Retention of Our Health and Social Care Workforce

A key workforce issue relates to the supply and capacity of our registrant workforce. As set out in our Workforce Plan the Board has a corporate risk relating to this issue and our actions thematically aligned to our four pillars all materially contribute to ongoing efforts to mitigate and control the level of risk associated with this. Fundamentally, in common with other Boards we have a perfect storm of wicked problems – latent and emerging vacancies with associated national supply limitations; increased demand for clinical registrants from all health providers both regionally and at wider Scottish, UK and indeed international contexts; having additional beds on our Acute sites in excess of baseline bed complement due to demand and flow requirements; and the residual ongoing impact of both Covid-19 and Non-Covid sickness absence materially impacting upon workforce capacity.

Against this challenging operating backdrop, as a system, we recognise the need to stabilise and reset post pandemic in order to provide a strong foundation on which to base our strategic service reform agenda articulated by Caring for Ayrshire. In the context of our workforce this, as a basic principle, means we need to right size our workforce in year and forward plan in terms of sustained delivery, and encompasses:

- Reducing our reliance on high cost supplemental staffing solutions in medical and nursing job families;
- Transitioning staff aligned with unfunded beds into funded roles as we right size our bed complement;
- Recommencing our routine application of nursing and midwifery workforce and workload planning tools; and
- Supporting our staff health and wellbeing to improve our unplanned absence rates, and encouraging wider access and uptake of wellbeing services that have successfully been deployed during the pandemic.

Successful delivery of these stabilising actions are essential as we seek to progress wider innovation in terms of longer term workforce supply and capacity, namely using international recruitment as a lever, development of complementary clinical roles – including Medical Associate Professions (MAPs) roles but also our advanced practice roles, consideration of skill mix e.g. Band 4 nursing roles, and implementing our Employability Strategy which will directly support those from disadvantaged backgrounds and far from the workplace and strengthen our role as an Anchor Institution and contribute to community wealth building.

All of these actions materially contribute to ensuring the 'best care every time' which ergo can only be achieved by ensuring the quality of our staff experience is high and we are able to attract and retain staff.

2.2 Staff Wellbeing

We are committed to valuing, supporting and retaining our current workforce, as such we are embedding our current Staff Wellbeing Programme through this next stabilising stage and into the winter period, encouraging staff to take time to rest and recover and to access the local and national resources that are available.

We have made capital investment in creating three Staff Wellbeing Hubs, at our Acute sites and on the Ayrshire Central Hospital Site, and these were delivered over the summer / early autumn. During 2022/23 we will commence work in developing a Health & Social Care Wellbeing programme and this will be underpinned by a staff wellbeing needs assessment. We have organisationally communicated the importance of all staff utilising their annual leave entitlement for rest and recuperation at regular intervals throughout the year.

3.0 Recovery and Protection of Planned Care

Planned care recovery is being approached through a process of Protect, Stabilise and Recover. The Covid-19 pandemic has resulted not only in significant backlogs of patients awaiting assessment and treatment, but also a number of practical constraints which are restricting our ability to return to pre-pandemic levels. All services are now re-mobilised and are working towards the targets set out in the National Clinical Prioritisation Framework.

On 6 July, the Cabinet Secretary announced a set of ambitious targets aimed at addressing the long waiting times that have arisen during the pandemic. The targets are to eliminate:

- two year waits for outpatients in most specialities by the end of August 2022;
- 18 month waits for outpatients in most specialities by the end of December 2022;
- one year waits for outpatients in most specialities by the end of March 2023;
- two year waits for inpatient/day cases in most specialities by September 2022;
- 18 month waits for inpatient/day cases in most specialities by September 2023; and
- one year for inpatient/day cases in most specialities by September 2024

We are working closely with the new National Elective Coordination Unit (NECU) and Centre for Sustainable Delivery (CfSD) developing a targeted action plan which will look to deliver the new targets, including opportunities for insourcing, outsourcing and accelerating planned improvements. Insourcing is in place for Neurology, Dermatology, Respiratory Medicine and Ophthalmology, and is being explored for gastroenterology and ENT/Audiology. Outsourcing is currently being explored for ENT.

In addition, to reduce backlogs of care specifically longest waiting patients the NHS will work together through the provision of mutual aid, and that will mean some patients will be offered appointments out with their local health board area to provide treatment more quickly – for example the Golden Jubilee University National Hospital or at National Treatment Centres as they become operational over the next year.

3.1 Funding

The Scottish Government have recently provided clarity regarding the financial allocation process, to support NHS Board plans to deliver planned care and specifically reduce the number of long waiting patients. NHS Ayrshire and Arran have submitted plans setting out the impact on long waiting patients by specialty and the overall cost and await confirmation of funding allocation. It is expected that activity will increase as new initiatives are embedded. However, it should be noted that this will fund many existing initiatives which have repeatedly been funded non-recurringly and are already incorporated into existing activity.

May require further input once confirmation of funding received.

3.2 Planned Care Recovery

NHS Ayrshire and Arran are working through the updated National Clinical Prioritisation Framework to guide clinical prioritisation, with the revised guidance being fully implemented by 31 August 2022. This guidance supports a change in prioritisation to include how long a patient has already waited as one of the factors influencing the relative priority for each patient. We will initiate this process firstly in those services where this re-prioritisation can be absorbed with least impact on other clinically urgent pathways, whilst we continue to pursue other options to create additional routine

capacity in other more challenged specialties. We will also use information on the volume of long waiting patients in each specialty to inform decisions on the allocation of operating theatre capacity.

As we make progress towards tackling long waits, a number of service changes designed to support and protect service provision through the pandemic have already been implemented. These include the reconfiguration of trauma and elective orthopaedics onto separate hospital sites, relocation of day case chemotherapy and outpatient breast cancer clinics services to a non-acute site and focussing of Covid-19 critical care on one site. In addition, we increased the use of Digital technologies, including the use of NHS NearMe, video calls and telephone consultations to allow appointments to continue to be provided during the pandemic. The learning from this change in working practice, in particular, telephone consultations, has been accepted as good practice across many specialties and will continue to be embedded to provide an alternative to 'face to face' consultations, where appropriate.

Other potential service changes to some of our surgical specialties which would further separate emergency and elective care, are being considered. However further understanding of capacity and impact is required and we are working on a series of recovery modelling scenarios with our colleagues at Cap Gemini to develop a resource modelling tool. We anticipate that this resourcing tool, when used in conjunction with the Regional Planned Care Modelling Tool, will allow us to better plan the allocation of beds, operating theatres and other resources. It should be noted that although this work continues to progress, the Cap Gemini tool still requires some work before it will be ready to deliver this. Meanwhile, there will be a close focus on utilisation of capacity and redesign opportunities in order to maximise activity.

Working alongside the NECU to support and plan further remobilisation, whilst refocusing our current activity to urgent and long waits:

NHSScotland Approach to Delivery	NHS Ayrshire and Arran Actions
Working across boundaries - regionally and nationally	We are working actively with other Health Boards and NECU to access mutual aid, in particular around Neurology, General Surgery and Urology. Further options are being explored for Trauma and Orthopaedics and Gastroenterology
Maximising theatres sessions and evening and weekends	We are focussing significant attention on maximising theatre utilisation, and have demonstrated good improvement in this regard since June 2022. We are seeking additional capacity by opening evening and weekend sessions where possible, although this is limited by staff availability.
Adopting robust waiting list validation	We are undertaking robust waiting list validation for both outpatients and inpatients/daycases and have put in place some additional administrative resource to support this. As a minimum we are following a 2-stage validation process, and where clinical capacity allows we are adopting 3-stage clinical validation of waiting lists.
Accelerating high impact changes such as ACRT and PIR	ACRT and PIR are implemented in some specialties, and further roll out as part of our Bringing it Together programme continues to be a priority. We are monitoring this in

	conjunction with CfSD colleagues using a HEAT map approach
Accelerating roll out of national initiatives such as the NECU	We are working closely with NECU to maximise opportunities to benefit from national approaches, including clinical validation support
Increasing activity to pre-Covid levels by March 2023	We monitor activity against pre-Covid levels on a continual basis, and are progressively implementing initiatives to increase this. As at July 2022 the current re-mobilisation rates are : Outpatients : 74% Inpatients and Daycases : 68% Endoscopy : 68% We are exploring further opportunities to work to achieving pre-Covid levels by March 2023, including the potential acquisition of mobile theatre units (staffed)

3.3 Outpatients

Outpatient activity has remobilised to 74% as at July 2022 of pre Covid activity levels. The table below details expected remobilisation by end of March 2023.

	Access Plan Target 22/23	July Activity as % pre-Covid-19
Outpatients	93%	74%

Sustained high referral rates in some areas still pose some challenges to reducing overall waiting lists. Workforce capacity is a significant contributing factor with a high level of vacancies existing as referred to in the 3 year Workforce Plan. Additional actions across most specialities which will contribute further improvement in 2022/23 include:

- Outpatient redesign through the Bringing it Together programme and implementation of High Impact Changes such as ACRT;
- The reinstatement of an outpatient clinic suite which had been re-purposed during the earlier pandemic waves; and
- Expansion of 3-Stage waiting list validation

3.4 Inpatients and Daycases

Inpatient and Daycase activity has remobilised to 68% as at July 2022 of pre Covid activity. The table below details expected remobilisation by end of March 2023.

	Access Plan Target 22/23	July Activity as % pre-Covid-19
Elective Surgery	75%	68%

The challenge to achieving the waiting time targets for Inpatient and Daycase is multi-faceted and relates to workforce capacity with a high level of vacancies existing as referred to in the 3 year Workforce Plan and constraint on access to recovery space. The day surgery recovery area at University Hospital Crosshouse, continues to be re-provisioned for use by Critical Care Service. The use of this space, and other alternative options to address this are under review along with the progression of recruitment to vacancies. Additional actions across most specialities which will contribute further improvement in 2022/23 include:

- Maximise operating theatre productivity - NTIG Theatre utilisation data (April – June 2022) indicates an average overall theatre utilisation of 89.5% for this period which is close to the Scottish average but affords room for further improved utilisation as we work towards a local target of 95%;
- Weekly theatre utilisation meetings are giving further focus and scrutiny through a new Theatre Utilisation and Governance group;
- Maximising Daycase rates as part of the CfSD improvement work and HEAT map monitoring. Daycase rate in June 2022 is reported as 96.7% against a target of 96.4%, demonstrating a high BADS performance during the remobilisation process;
- Review approach to ensuring that surgical procedures planned are in line with the Effective and Quality Interventions Pathways guidance (EQuIP);
- Additional operating theatre sessions run as 'Super-Saturdays' or similar will be targeted at the longest waiting patients;
- Embed a clinical validation step into the current administration validation process; and
- Trial a prehabilitation screening approach for the longest waiting patients and we expect this to complement waiting list validation processes.

3.5   Diagnostic

3.5.1 Endoscopy

To reduce the number of patients waiting for an Endoscopy, a 4th Endoscopy Room at University Hospital Ayr will be created by the end of 2022. In addition, the following developments have been implemented and work continues to further embed them in practice:

- Waiting list validation, focused around the use of qFIT as a risk screening tool with an initial trial of qFIT validation of the longest waiting patients awaiting colonoscopy undertaken in May 2022, and will be scaled up through 2022/23; and
- Colon Capsule Endoscopy (CCE) and Cytosponge continue to be delivered with the aim of 28 and 25 procedures per month respectively. Work is ongoing to further embed these new methods of care with the clinical teams, and it is hoped that a national clinical guideline for Cytosponge will be developed to provide some added governance and assurance to clinical staff.

3.5.2 Medical Imaging

Additional capacity for MRI, CT and Ultrasound is being progressed to reduce the level of patients waiting long periods to access. Improvements include a mobile MRI scanner being located at University Hospital Ayr for 12 months with a 2nd mobile scanner for 3 months currently being sourced and the progression of extended 7 day working for CT and MR scans.

3.6 Cancer

A prehabilitation service for cancer patients is currently in national discussion although cancer patients can access existing rehab services within NHS Ayrshire and Arran.

Early Cancer Diagnostic Centre has now been in place for 12 months and is working well. An additional ANP has been recruited to support with patient care, assist with education and expansion of the service for secondary care referrals.

3.7 National Treatment Centre

NHS Ayrshire and Arran will host one of ten National Treatment Centres (NTC) across Scotland. Within the Ayrshire and Arran National Treatment Centre the focus will be on Orthopaedics. The new Centre will plan to treat 800 patients per year who need hip or knee replacements, 1200 patients who require a Daycase orthopaedic procedure and 700 orthopaedic patients who need minor procedures requiring local anaesthetic. There is capacity in addition to this for local anaesthetic procedures from other specialties. The NTC will be operational by 2025. It is expected that recruitment will be phased over the next 18 months to allow time for training and education.

4.0 Stabilising and Improving Urgent and Unscheduled Care

4.1 Primary Care

As primary care services recover from the Covid-19 pandemic, a framework of measures is underway to support remobilisation and continued safe and effective delivery of services to patients. General Practice is currently facing national workforce and recruitment challenges which is being experienced locally. Going forward local oversight will be monitored through the Practices Sustainability Oversight Group to look at focussed options for any Practice experiencing difficulty from workforce gaps. Specific dedicated support is being provided to those Practices struggling to fill GP posts as well as working with the local GP community to promote the benefits of working within Ayrshire and Arran to attract new recruits. A review of Enhanced Service provision will also support sustainability of General Practice and ascertain how potential changes could improve service delivery models for practices and patients.

Work continues to implement the new GMS Contract 2018 via the Primary Care Improvement Plans. Scoping is ongoing to provide an urgent care service within General Practice and consideration being given to how this could align to the Redesign of Urgent Care (RUC) programme. The Community Treatment and Care service is embedding well with most GP practices having access to the service. Further roll-out of staff is ongoing though accommodation continues to prove challenging as additional MDT roles are incorporated into General Practice. Various models are being considered for further implementation of the Primary Care Improvement Programme, including the use of community monitoring and investigation hubs to enable transfer of care into a community setting which would increase accessibility for patients. Focussed work is ongoing with all practices and the pharmacy team to achieve full task transfer for Level 1 Pharmacotherapy Service by end of 2022/23, although there are risks to achieving this in every practice. The position of this will be more understood in October 2022. Pharmacotherapy has recruited a significant proportion of their workforce from community pharmacy and acute services with recruitment now becoming more of a challenge. Various innovative actions are being progressed through the Workforce Plan to maximise skill mix.

Various digital programmes are ongoing across primary care to enhance patient pathways and increase access to services. Further roll-out of E-Consult across General Practice is being encouraged as well as community pharmacy and optometry having access to the digital clinical portal to support decision making. Community Optometry is working closely with Acute to increase shared care which will support additional eye conditions being screened or managed by Community Optometrists and thus reduce waiting times for treatment or the need for urgent referrals.

Since the easing of infection control measures, General Dental Practitioners have increased activity to an average of 90% of pre-pandemic levels facilitating more patients to receive routine care. There is still a significant backlog for dental practices to work through as they re-introduce routine care. Dental practices are facing challenges to fill Dentist vacancies therefore ongoing national workforce initiatives will be essential in recovering the dental sector further. An increase in Dental Body Corporates could also create additional challenges with recruitment and retention of dentists within General Dental Practices which can impact on the availability of routine NHS dental care. Additional recruitment is underway within the Public Dental Service to increase provision of emergency dental services and care to non-registered patients whilst General Dental Practices continue to recover.

Further recruitment will sustain our 7 day delivery of the Covid-19 Therapeutic service. This provides assessment and treatment for a specific cohort of patients deemed as very high risk of progression to severe disease and/or death if they develop Covid-19 symptoms and test positive for the virus.

4.2 Redesign of Urgent Care

Phase 2 of the Redesign of Urgent Care programme will further enhance the pathways implemented during Phase 1. The Flow Navigation Centre (FNC) will continue to be developed as a single point of access for many services across the whole system. One of the most successful introductions to date is the joint working with Scottish Ambulance Service (SAS) to support patients by a GP within the FNC or be supported to alternative pathways. NHS Ayrshire and Arran were also a pathfinder for a mental health pathway. The first phase has been to implement a direct pathway via the FNC for Emergency Services (Police Scotland and SAS) with direct access to specialist practitioners within the Emergency Mental Health Teams, avoiding unnecessary attendance at Emergency Departments, and provision of interventions from the right services as quickly as possible for these patients.

Scoping and analysis of demand will define all available pathways across the system to ensure patients can access the most appropriate urgent care pathway suited to their condition. A MSK urgent care pathway is being scoped which would optimise self and community care and allow direct referral. A communication strategy will be developed to engage with the general public and inform of available health services and professionals accessible for urgent care. This will support signposting patients to access appropriate care to prevent conditions worsening or as an alternative to presenting at Emergency Departments. This pathway is also linked to the Primary Care Improvement Plans within general practice for MSK. Additionally there is a Community Pharmacy pathfinder in development based on access via the FNC, into and out of Emergency Departments. This will ensure that patients accessing Pharmacy First, who should be attending Minor Injury Unit or Emergency Department will do so via the FNC and be provided with an appropriate appointment, and will also support redirection pathways out of Emergency Department back into Community Pharmacy.

4.3 Unscheduled Care

As Covid-19 restrictions have lifted urgent and emergency attendances and admissions have returned to pre pandemic levels. This increase in attendances, combined with high levels of delayed discharges, recruitment gaps in allied health professionals and community-based care professional impacted patient flow. As the bed base increased to accommodate demand, infection control measures and staff absence was added to the complexity of managing patient flow our acute care settings became congested, with occupancy being >96% consistently. The existing Unscheduled Care Programme including Discharge without delay, Interface Care, Virtual Capacity and Redesign of Urgent Care are delivering internal improvements, however more is needed. We have completed a whole system Urgent & Unscheduled Care self-assessment, in response to the SG relaunch of Urgent & Unscheduled Care Collaborative and we have system support to progress with our High Impact Changes, as highlighted through our Self-Assessment.

NHS Ayrshire and Arran will work with the national Urgent & Unscheduled Care teams with an initial focus on the top three High Impact Changes:-

High Impact Change   Virtual Capacity
High Impact Change   Urgent & Emergency Assessment
High Impact change   Community Focused Integrated Care

In addition to this we will be continuing our Discharge without Delay (DwD) programme started through our pre, intra and post hospital groups and amalgamate this with the newly launched collaborative high impact changes.

NHS Ayrshire and Arran are committed to increase Hospital at Home capacity from 6 to 28 virtual beds by January 2023. In addition, we will scope and analyse the demand for our outpatient antibiotic therapy service, which will inform and enable a business case to help reduce in patient bed days and create an alternative to in-patient stays. Further scoping of remote health monitoring, near patient testing and community diagnostics will be undertaken through a directed programme of work with three distinct Delivery Programmes each with their own area of focused work which will tie in with the Urgent & Unscheduled Care Collaborative work high impact changes.

In addition NHS Ayrshire and Arran will hold a programme of focused Full System discharge without delay events throughout the summer months with the ambition of achieving the lowest bed base possible throughout the winter to ensure our remaining areas are as well-resourced as possible. We will run a full system event for three days monthly and in addition hold a 7 day event in September. These events are multi agency and multidisciplinary events with senior sponsorship from across the Health Board and its partners – these events will be held at executive level to support real time problem solving for patients stranded in the acute setting. These events will be additional to the "business as usual" DwD work which will be led by x 2 senior appointed members of staff and a team of DwD "Home First" practitioners.

4.4   Mental Health and Wellbeing

It is the vision to create a Mental Health and Wellbeing service for Primary Care that is consistent across Ayrshire and Arran. Work will continue over the next few years to develop detailed plans. It is our ambition that by March 2026, the service will comprise a multi-disciplinary team composed of Mental Health Practitioners, Community Link Workers and Occupational Therapists. Self-help Workers, Enhanced Psychological Practitioners (EPPs), Administration and other roles will also be under consideration as detailed planning is completed.

At present, the multi-disciplinary team offers a triage and assessment service predominantly for adults (although younger age ranges are available within some areas). At present there is limited scope for treatments. It is the anticipation that as staff levels rise, the age range and treatments offered will expand to all ages and a limited range of short treatments. Online treatment options and group sessions are areas that will be explored alongside more traditional psychological therapies.

There are great benefits to having these roles working directly in GP Practices, however, as the team grows in numbers so too will the space requirements.

The first year of funding (2022/23) for the Mental Health and Wellbeing in Primary Care Service will focus on the recruitment of Mental Health Practitioners whilst taking time to scope subsequent years of funding and actions in greater detail.

The transition and recovery plans for mental health continue to deliver targeted actions to ensure a whole system response to the challenges presented, addressing backlog management as we continue to innovate; adapting our offer, providing new pathways to services, redesigning services and using digital delivery to retain and maximise as much support as possible as services increase face to face activity and group therapy.

Within North, South and East Ayrshire Health and Social Care Partnerships there are specific Drug Related Death (DRD) Prevention Groups with identified Improvement/Action Plans in place to prevent DRD's. Working in partnership with local Alcohol and Drug Partnerships there has been a focus on specific actions to prevent DRD's which include, but is not limited to, the following:

- Implementation of new Medication Assisted Treatment (MAT) standards;
- New responses and pathway of support for individuals following a Non-Fatal Overdose;
- Delivering on a new Substance Use Treatment target;
- Improving the multi-agency pathways of support for individuals with a 'Dual Diagnosis'; and
- Identification of pathways to support individuals to access residential rehabilitation support

4.5   Tackling Health Inequalities

Health inequalities have been compounded by the socio-economic impact of the Covid-19 pandemic and are likely to have a disproportionate impact on people living in areas of multiple deprivation; those who were not in a good position prior to the pandemic and those from ethnic minority groups.

Tackling inequalities is a key priority and we believe by helping to reduce the impact of inequalities locally, we can improve the long-term economic, social and health outcomes for the people of Ayrshire and Arran. However, we recognise that addressing local inequalities is not something we can do alone and it will take a collaborative effort. As such, we will continue to work closely with our partners and the people of Ayrshire and Arran to help tackle inequalities together.

5.0 Supporting and Improving Social Care

Whilst we are optimistic that we may be over the worst of the direct impact of the pandemic, its long-term impact is not as well understood. We expect our services to face on-going challenges, including supporting those who have not been able to access, a health and social care professional due to demands and restrictions, and addressing the rise in poor mental wellbeing in our communities. We have learned much from our pandemic experience, such as recognising the strength and resilience within our communities, discovering how truly determined and hard-working our workforce is and finding greater ways to work in collaboration with our partners. One consequence of the Covid-19 restrictions has been the increasing deployment of digital technology; both for providing flexible services to those we support and in enabling HSCP staff to operate in a dynamic way using a range of remote access technologies. We will ensure our future way of working embraces the opportunities that digital platforms provide. Our collective ambition is for strong engagement with service users and carers, driven by quality data and information and committed to continuous service improvement.

Across Ayrshire and Arran we continue to find new and innovative ways to shift the balance of care, ensuring people are supported within the community where possible rather than in a hospital or institutional setting to improve outcomes for people, with a focus on bringing down delayed transfers of care to ensure capacity for those patients that require acute hospital care.

6.0   Sustainability and Value

Cash Releasing Efficiency Savings

The CRES we were able to achieve in 2021/2022 was c£10 million and in 2020/2021 it was about c£11 million.

Below is a table showing planned CRES for 2022/2023:

Service Level Agreements	£2,000,000
Acute prescribing	£1,561,000
Primary Care prescribing	£2,000,000
National services	£350,000
Energy efficiency	£69,000
Corporate	£600,000
Acute	£1,600,000
Total	**£8,180,000**

Corporate schemes for estate rationalisation, reducing energy consumption and clinical waste are being scoped therefore there is a higher degree of risk regarding delivery of these.

Excluding IJBs and New Medicines Fund, 68% of budgets for acute and corporate services are pay for workforce. During 2021/2022, securing enough workforce has been a challenge therefore very little CRES in 2022/2023 is targeted against workforce. This restricts the scope for savings to about 32%, or £254 million of budget, therefore the savings of £8.2 million shown above represent about 3.2% of this restricted scope.

COVID-19 Costs in 2022/23

Scottish Government will not receive any Barnett Consequential funding in 2022/2023 in relation to Covid costs. The projected Covid costs for 2022/2023 require to be reduced as far as possible. The contact tracing staff have fixed term contracts until the end of September 2022 but will be redeployed where possible from May or June.

After three months of 2022/23 Covid related expenditure was around £8.0 million across the health economy and this is likely to grow to c £36 million. A Covid-19 envelope of £16.5 million for non-delegated services has been advised by Scottish Government.

The Health Board is actively engaging with IJBs and Scottish Government in order to minimise Covid-19 costs incurred during the year.

The table below shows the Health Board projected Covid-19 costs for 2022/23.

£000s	2022/23 fund £000
Additional PPE	600
Covid-19 & Flu Vaccination	8,000
Scale up of Public Health Measures	400
Additional Bed Capacity/Change in Usage	5,910
Cleaning	665
Other Additional Staff Costs	8,827
Digital/ IT costs	200
Patient Transport	200
Sub-Total Covid-19 Costs - NHS Board	**24,802**
Additional Beds	545
Additional Staff Costs	3,145
PPE	981
Social Care Provider Sustainability Payments	3,147
Social Care Support Fund Claims	410
Children and Family Services	2,340
Additonal FHS Contractor Costs	75
Primary Care	68
Loss of Income	571
Other	31
Total Covid-19 Costs- HSCP	**11,313**
Total planned spend in 2022/23	**36,115**
Availabe Reserves	**36,332**
Reserves c/f to 2023/24	**217**

The above estimated costs exclude Test and Protect, Point of Care Testing, Laboratory Capacity, and Contact Tracing. These are expected to be funded separately by Scottish Government.

Contents

Region	Board	Priority Area select from drop down list	Service Area	Reference	Jun'22 status	Key Deliverable - Name and Description	Key milestones	Progress against deliverables end June 22	Lead delivery body	Key Risks	Controls/Actions	Outcome(s)	Major strategies/ programmes the deliverable relates to	Impact of deliverable on health inequalities
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Outpatients	2021-AA123	Green	To reduce waiting list size and waiting times for Outpatients by increasing clinic capacity and reducing referral demand	Pain Service Redesign Ref Template 2 : Activity projections Ref Template 3 : Wait List Trajectory	Phase 1 recruitment complete and service established. Evaluation of success against deliverables to be undertaken Phase 2 recruitment to be undertaken once Access funding confirmation is received from SG		Recruitment		PC1	Pain Management Recovery Framework NHS Recovery Plan	This initiative positively benefits patients with a level of disability (due to chronic pain), this also being more prevalent in higher deprivation populations
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Outpatients	2021-AA123.1	Suspended	To reduce waiting list size and waiting times for Outpatients by increasing clinic capacity and reducing referral demand	Ophthalmology Clinic Redesign (Ophthalmology Improvement Programme) Ref Template 2 : Activity projections Ref Template 3 : Wait List Trajectory	This remains a risk and priority area for NHS Ayrshire and Arran, but has not been funded in the 2022/23 Access funding and so is paused.		Not funded	Interim non-recurring insourcing initiative in place instead	PC1	NHS Recovery Plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Outpatients	2021-AA123.2	Green	To reduce waiting list size and waiting times for Outpatients by increasing clinic capacity and reducing referral demand	Create additional clinic capacity through Insourcing contracts and WLIs	Insourcing contracts awarded WLIs being scheduled as available		Delivery of Insourcing contract activity Staff availability for overtime		PC1	NHS Recovery Plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Outpatients	2021-AA123.3	Green	To reduce waiting list size and waiting times for Outpatients by increasing clinic capacity and reducing referral demand	Roll out clinical validation	3 stage validation being rolled out. 5 specialties completed and other specialties underway		Clinician time / capacity	Seeking mutual aid from other Boards	PC1	NHS Recovery Plan	Has potential to disadvantage those with lower health literacy who fail to respond to communications from NHS
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Outpatients	2021-AA123.4	Amber	To reduce waiting list size and waiting times for Outpatients by increasing clinic capacity and reducing referral demand	HEAT map / Bringing it Together Reduction in referral demand through use of Active Clinical Referral Triage (ACRT) (numbers to be agreed with CfSD in July 22) ACRT Top 9 specialties : ACRT T&O : Reduction in clinic demand through use of Patient Initiated Review (PIR) PIR Top 9 Specialities : PIR T&O : Reduction in referral demand through use of national pathways for gastroenterology - coeliac disease pathway, IBS Pathway, community nurse IBD follow up	Centre for Sustainable Delivery (CfSD) have prepared new HEAT map template. Workshop attended and revised HEAT map to be submitted end June 22 Progressing with individual projects and quarterly Steering Group meetings to coordinate overall programme.		Clinician & Management time / capacity Clinician engagement	Dashboard in development Shared learning with other Boards	PC1	CfSD HEAT map	Has potential to disadvantage those with lower health literacy who fail to respond to communications from NHS
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Outpatients	2021-AA123.5	Suspended	To reduce waiting list size and waiting times for Outpatients by increasing clinic capacity and reducing referral demand	Rapid Access Speciality Unit Development of new service/facility for management of urgent outpatient referrals same week, and focus on rapid Active Clinical Referral Triage (ACRT) of non-urgent referrals. Based on successful model of care implemented in Cardiology, but rolled out to other medical specialities Roll out service model in new facility July 22	This remains a risk and priority area for NHS Ayrshire and Arran, but has not been funded in the 2022/23 Access funding Where possible, some small local changes will continue to be progressed within existing resources		Lack of revenue funding Lack of capital funding Recruitment Clinician time to progress changes	Where possible, some small local changes will continue to be progressed within existing resources	PC1	NHS Recovery Plan Redesign of Urgent Care (RUC)	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Elective Surgery	2021-AA124	Amber	To reduce waiting list size and waiting times by increasing elective surgical activity and creating an Orthopaedic elective centre of excellence (UHA) to create sustainable orthopaedic elective capacity and a National Treatment Centre within Ayrshire and Arran	Elective Surgery Introduce extended operating days Create additional planned care beds to support additional throughout. By September 21	Failed to recruit additional theatre nursing and so unable to implement as a permanent feature at present, but additional extended day sessions being delivered on an adhoc basis as WLI Additional 17 beds for planned care at UHA to be available from August 2022 on redesign of WoS vascular service		Further slippage in dates for vascular service reconfiguration Theatre Nursing Recruitment Surgeon / Anaesthetist capacity	International recruitment Introduction of Allocate system to assist with job planning	PC1	NHS Recovery Plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Elective Surgery	2021-AA124.1	Green	To reduce waiting list size and waiting times by increasing elective surgical activity and creating an Orthopaedic elective centre of excellence (UHA) to create sustainable orthopaedic elective capacity and a National Treatment Centre within Ayrshire and Arran	Elective Surgery - Ortho Elective Centre for Excellence (UHA) All in-patient elective surgery delivered at UHA Roll-out of 4 joint day Creation of additional arthroplasty theatre, linked to vascular reconfiguration	Elective inpatient orthopaedics remobilised in May 22 4-joint days underway where possible		Urgent care pressures may result in further pausing of elective orthopaedics Further slippage in dates for vascular service reconfiguration may delay access to additional theatre Patient deconditioning during pandemic will mean that many patients required longer in operating theatre, impacting deliverability of 4-joint days	Risk balance analysis undertaken to support re-start of elective orthopaedics Realistic Medicine funded project re. pre-operative screening and pre hab for longest waiting patients	PC1	NHS Recovery Plan Trauma and Orthopaedic Recovery Plan Reconfiguration of vascular services WoS Trauma Service Redesign	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Elective Surgery	2021-AA124.2	Green	To reduce waiting list size and waiting times by increasing elective surgical activity and creating an Orthopaedic elective centre of excellence (UHA) to create sustainable orthopaedic elective capacity and a National Treatment Centre within Ayrshire and Arran	Elective Surgery - National Treatment Centre NHSAA Planning Work FBC submission by December 22 Capital works estimated to commence June 23 Projected completion date December 23	Design and FBC work is progressing as per plan		Cost drift on capital project FBC approval not granted Failure to recruit Clinician /managers time & capacity to contribute	Risk Register being maintained for programme	PC1	National Treatment Centres Trauma and Orthopaedic Recovery Plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Medical Imaging	2021-AA125	Proposal	Reduce waiting list and waiting times by creating additional capacity for MRI, CT and Ultrasound	Secure capital funding for CT/MRI hub at ACH Capital build programme Procurement of MRI scanner Staff Recruitment	CMT support in principle pending identification of capital funding Awaiting confirmation from SG re capital funding availability		This is dependent on Access Funding being confirmed	Mobile scanner remains in place	PC1	SG Radiology 5-Year plan	Will improve access to MR/CT service particularly in North Ayrshire, with less travel for patients from this area
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Medical Imaging	2021-AA125.1	Green	Reduce waiting list and waiting times by creating additional capacity for MRI, CT and Ultrasound	Mobile MRI scanner at UHA for 12 months 2nd mobile MRI scanner for 3 months	Mobile scanner contract finalised and scanner in place Still seeking availability of 2nd mobile scanner		Availability of scanner Cost increase due to demand and availability	NHS Scotland national framework	PC1	SG Radiology 5-Year plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Medical Imaging	2021-AA125.2	Amber	Reduce waiting list and waiting times by creating additional capacity for MRI, CT and Ultrasound	Extended Working day/7 day working for CT and MRI scans	Recruitment of various grades of staff still to be undertaken		This is dependent on Access Funding being confirmed		PC1	SG Radiology 5-Year plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Medical Imaging	2021-AA125.3	Amber	Reduce waiting list and waiting times by creating additional capacity for MRI, CT and Ultrasound	Train / Appoint 3.46WTE sonographers	Awaiting confirmation of funding to progress recruitment		Staff recruitment	Interim use of locums where available	PC1	SG Radiology 5-Year plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Medical Imaging	2021-AA125.4	Amber	Reduce waiting list and waiting times by creating additional capacity for MRI, CT and Ultrasound	Train 3 Assistant Practitioners	Awaiting confirmation of funding to progress recruitment		Staff recruitment Free up staff time to deliver training		PC1	SG Radiology 5-Year plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Endoscopy	2021-AA126	Amber	Additional endoscopy capacity. Reduction in Endoscopy waiting list. Reduction in Endoscopy waiting times. Cancer pathway - improved performance against 62 day target for colorectal & upper GI pathways	Re-divert ring-fenced funding for mobile endoscopy unit to create 4th Endoscopy Room at UHA and staff with agency team Completion of works by end 2022	Design work completed Capital work to commence June 22 Equipment ordered Funding for staffing confirmed, recruitment in June 22		This is dependent on Access Funding being confirmed	Funding for agency staffing as contingency for any delays in permanent staff recruitment	PC1	NHS Recovery Plan Recovery and redesign: Cancer Services Framework for Effective Cancer Management	Reduction in waiting times for investigation Positive benefit for more deprived populations where incidence of cancer / later stage cancer is higher

West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Endoscopy	2021-AA126.1	Green	Additional endoscopy capacity. Reduction in Endoscopy waiting list. Reduction in Endoscopy waiting times. Cancer pathway - improved performance against 62 day target for colorectal & upper GI pathways Endoscopy Remobilisation	Establish funded/staffed Cytosponge Service Further roll out CCE usage 300 Cytosponge procedures in 2022/23 336 Colon Capsule Endoscopy (CCE) procedures in 2022/23	Continuing to engage actively with national programme to support increased usage		Clinician engagement		PC1	CfSD HEAT map	Reduction in waiting times for investigation Positive benefit for more deprived populations where incidence of cancer / later stage cancer is higher
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Endoscopy	2021-AA126.2	Amber	Additional endoscopy capacity. Reduction in Endoscopy waiting list. Reduction in Endoscopy waiting times. Cancer pathway - improved performance against 62 day target for colorectal & upper GI pathways	Roll out of qFIT to routine waiting list/ referrals Establish qFIT as primary care based test Establish qFIT testing capacity & results which are accessible to GPs	Initial test of change qFIT of cohort of longest waiting routine patients Paper to GP sub committee in June 22 re. primary care issuing of test kits		GP engagement Laboratory space / staffing System access		PC1	NHS Recovery Plan Recovery and redesign: Cancer Services	Reduction in waiting times for investigation Positive benefit for more deprived populations where incidence of cancer / later stage cancer is higher
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Cancer	2021-AA127	Amber	Improved performance against 31 & 62 day cancer target. Improved pathway and experience for patients	Develop and implement Vague Symptoms Pathway Progress implementation of Cancer Management Framework June 21	Vague Symptom pathway in place and undergoing academic evaluation Updated action plan for Cancer Management Framework submitted in May 22		Significant increase in cancer referral demand Constraints in remobilising investigation capacity (endoscopy) Staff recruitment (breast radiologist)	Implement Cancer Management Framework action plan	PC1	Recovery and redesign: Cancer Services Framework for Effective Cancer Management	Reduction in waiting times for investigation Positive benefit for more deprived populations where incidence of cancer / later stage cancer is higher
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care	2021-AA128	Green	Workforce HEAT Map ADEPt Additional capacity across various areas - endoscopy, elective surgery, outpatients	Work with CfSD and Workforce Academy to progress planning and implementation of new roles. Bring forward funding proposals for these new posts	Progress being made across a number of ADEPt areas including Anaesthetic Associates, Theatre Practitioners, Endoscopy Assistants, Peri-operative and Anaesthetic Assistant Nurse training via NHS Academy		Staff Recruitment Challenges releasing staff for training		PC1	CfSD HEAT map	
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA31	Amber	Workforce Planning and Recruitment Delivery of AHP Rehabilitation Services to achieve safe, high quality care and support for the people of Ayrshire and Arran.	Creation of workstreams to plan and deliver on future workforce requirements. Submit proposal for Investment in AHP Services. Creation of Quality Assurance Measures dashboard. Rehabilitation Commission work to continue into phase 2 including, service reform, capacity/ demand/ quality analysis and stakeholder engagement planning.	Work continues to focus investment on key areas of service delivery risk in line with Caring for Ayrshire objectives for reform. This work was further delayed by service demand pressures but will now commence. Work continues on Quality Assurance dashboard. Phase 2 of the Rehabilitation Commission commenced in May 22. This will focus on service reform and job planning for AHPs in line with the Healthcare Staffing Programme. Proposal for investment in AHP Services submitted.	North Ayrshire HSCP South Ayrshire HSCP East Ayrshire HSCP	Potential of requirement for investment. Potential of variable funding from the 3 HSCPs leading to inequity across Ayrshire. If investment is non-recurring there is potential for recruitment challenges. If funding is not available future service reform may be unable to be delivered as planned.	The need to identify a funding stream from national investment for rehabilitation services pending the work of the National Rehabilitation Advisory Board linked to Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020) remains. Reduction in service delivery and further prioritisation of services using business continuity plans is ongoing.	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine	The impact of AHP services on health inequalities is widely documented nationally and internationally. This has obvious implications for patient safety and personal outcomes for our population. It also has a significant impact on staff health and wellbeing due to stress, burnout and widely reported challenges with the quality of care we can provide. Provision of services for those in the lower SIMD index levels are more at risk of being unable to access appropriate levels of support and care.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA32	Red	Transforming Roles Increased development of non-medical models of care to deliver the right care in the right place by the right person whilst improving performance on national 12 hour wait target	Mapping exercise of current roles. Educational needs analysis. Scoping of funding required for education and development of workforce. By June 22 Scoping of reformed services to deliver future models of care.	There is a National Advanced Practice SLWG which will meet to progress this work in line with the national AHP education review. Locally we will work to implement the plans that come from this work. We are looking to identify training and education funds for AHPs to develop their skills at all levels of practice including advanced practice, funding is required to enable our ability to progress this work. NES currently re-starting this work nationally with no agreed timescales in place.	NHS Ayrshire & Arran North Ayrshire HSCP South Ayrshire HSCP East Ayrshire HSCP	Scale of requirement for mapping and potential investment. Potential of variable funding leading to inequity across Ayrshire. Timescales for the planning of these roles to allow for training to be undertaken by staff and subsequent academy model supervision completion. If investment in training is not available or funding for recruitment is non-recurring there is potential for recruitment challenges. If funding is not available future service reform may be unable to be delivered as planned.	Identify funding stream from NES as this is a National Programme. Unable to provide reformed service if funding and skill development are not achievable.	PC1	NHS Recovery Plan Pain Management Recovery Framework Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). Scottish Government Modernising Patient Pathways Programme	By creating new and transformed roles AHP would be able to deliver reformed services and reach our population earlier in their life curve using realistic medicine principles and deliver safe care closer to their home. AHPs in transformed roles have a greater ability to reach the wider population and make a tangible impact on health inequalities.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA33	Proposal	Adult Acute Rehab Services Facilitation of faster discharge and reduced length of stay to improve patient outcomes and deliver the right care in the right place by the right person.	Submit proposal for Investment in AHP Services to address the staffing levels identified through the AHP Rehabilitation Commission Workforce Review. Rehabilitation Commission work to continue into phase 2 including, service reform, capacity/ demand/ quality analysis and stakeholder engagement planning.	This work remains at proposal stage. No progress has been made in terms of improving safe staffing levels to reduce patient safety risks. Proposal for investment in AHP Services submitted.	NHS Ayrshire & Arran South Ayrshire HSCP East Ayrshire HSCP	Scale of requirement for investment. Potential of variable funding response from the 3 HSCPs leading to inequity across Ayrshire. If investment is non-recurring there is potential for recruitment challenges. If funding is not available future service reform may be unable to be delivered as planned.	AHP Rehabilitation Commission report highlighted to SPOG and CMT prioritisation of need and highest risk areas.	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine	Missed care and omissions of care have the greatest impact on those in the lower SIMD index levels are more at risk of being unable to access appropriate levels of support and care.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA34	Green	ICU Delivery of AHP services as per FICM guidelines.	Respond to the Scottish Government scoping which identified additional capacity of 2 beds. Progress recruitment in response to the AHP Rehabilitation Commission Workforce Review which identified deficit in current safe staffing levels to meet FCIM guidelines.	Additional AHP funding secured non recurring for 2 further ICU beds. Planning to identify permanent funding to make all posts permanent is ongoing.	NHS Ayrshire & Arran South Ayrshire HSCP East Ayrshire HSCP	Non recurring funding for UHA posts may result in recruitment and sustainability challenges. Reconfiguration of posts to ensure recruitment has been required.	Additional funding was secured for a skill mix of roles to create a sustainable model for succession planning and future reform planning. Further planning to extend the reach of the InSPIRE programme.	PC1	NHS Recovery Plan Pain Management Recovery Framework Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). Scottish Government Modernising Patient Pathways Programme FCIM Guidelines	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA35	Red	Ensure timely AHP intervention and transition of care to community.	Delivery of Home First Model at Front Door and CAU	Scottish Government funding secured on non recurring basis for AHP team at front door and CAU. Unable to recruit to non-recurring roles. SLT and Dietetic roles have been funded for 9 months via EAHSCP, these have been recruited to. Proposal submitted to CMT to request recurring monies, no funding secured as yet however planning is ongoing.	NHS Ayrshire & Arran South Ayrshire HSCP East Ayrshire HSCP	Funding for these posts from the Scottish Government was non-recurring - this has an impact on AHP recruitment and retention. AHP Rehabilitation Commission workforce review identified high risk related to recruitment to short term funded posts. Posts are advance practice and require training budget to enable development of staff. Current funding covers staff pay costs.	Secure further funding (£907 K per annum) to extend the length of time for posts to test and implement a sustainable AHP model at front door.	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA36	Amber	Trauma and Orthopaedics Delivery of AHP services as part of trauma and orthopaedic redesign.	Occupational Therapy and Physiotherapy posts to be approved and recruited to in response to the recent AHP workforce review.	Successful completion of recruitment to OT post. Currently working on Quality Improvements and patient safety standards in relation to the National Hip Fracture audit data.	NHS Ayrshire & Arran East Ayrshire HSCP	Lack of investment for dietician and orthotics demand that may delay discharge. The QI work on the hip fracture audit has highlighted a need to review OT staffing levels.	Identify funding for 1 WTE dietician and orthotics 1 session per week to meet demand and safe staffing. This was included in the AHP rehabilitation commission workforce review but no funding has been allocated.	PC1	NHS Recovery Plan Pain Management Recovery Framework Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21).	
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA37	Amber	Stroke Services Transform roles in stroke to enable a flexible approach to the Acute and Community needs.	Progress recruitment to posts Complete	East Ayrshire HSCP have secured recurring money for the stroke posts identified in RMP3 and linked to University Hospital Crosshouse. OT, Dietetics, SLT and Physio posts have now been recruited to. Clinical staff in this area have submitted an SBAR to the Senior Management team highlighting the gap that still remains within stroke services.	NHS Ayrshire & Arran South Ayrshire HSCP East Ayrshire HSCP	Finance secured for additional bed capacity at UHC. AHP Rehabilitation Commission Workforce Review has identified deficits in safe staffing levels across stroke services.	Finance secured for AHP workforce identified for safe staffing of stroke services (4.5 WTE experienced practitioners and 4 additional HCSW for UHC and Rehabilitation ward). This was included in the AHP rehabilitation commission workforce review but no funding	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness	
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA38	Red	Adult Community Hospital Inpatient Services Facilitation of faster discharge and reduced length of stay to improve patient outcomes and deliver the right care in the right place by the right person.	Respond to the AHP rehabilitation workforce review which identified resources required. Rehabilitation Commission work to continue into phase 2 including, service reform, capacity/ demand/ quality analysis and stakeholder engagement planning.	Investment in AHP Services submitted. Investment achieved does not mitigate the risks identified within these areas of service delivery. Different models of care are being explored however the risk remains.	NHS Ayrshire & Arran North Ayrshire HSCP East Ayrshire HSCP	Scale of requirement for investment. Potential of variable funding response from the 3 HSCPs leading to inequity across Ayrshire. If investment is non-recurring there is potential for recruitment challenges. If funding is not available future service reform may be unable to be delivered as planned.	AHP Rehabilitation Commission report highlighted to SPOG Criteria led referral process and prioritisation of need	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness	

West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA39	Green	EACH (East Ayrshire Community Hospital) Facilitation of faster discharge and reduced length of stay to improve patient outcomes and deliver the right care in the right place by the right person.	Respond to the AHP workforce review of current service at EACH which identified deficit in staffing level.	Funding secured from EACH to invest in AHP resource required to meet staffing requirements. All registered clinical posts have been filled in this area.	East Ayrshire HSCP	Focus is on AHP cover for the specialist dementia unit at EACH. Further development of the model is required.	Work is ongoing to develop the HCSW roles.	PC1	East Ayrshire Strategic Plan NHS Recovery Plan Pain Management Recovery Framework Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). Scottish Government Modernising Patient Pathways Programme.	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA40	Amber	Intermediate care and community rehabilitation Avoidance of unnecessary acute hospital admission, and delivery of high quality rehabilitation and recovery.	Respond to the AHP rehabilitation workforce review which identified resources required. Rehabilitation Commission work to continue into phase 2 including, service reform, capacity/ demand/ quality analysis and stakeholder engagement planning.	Proposal for Investment in AHP Services submitted. Varied levels of investment has been secured across the three HSCP's with further opportunities being explored.	NHS Ayrshire & Arran North Ayrshire HSCP South Ayrshire HSCP East Ayrshire HSCP	Scale of requirement for investment. Potential of variable funding response from the 3 HSCPs leading to inequity across Ayrshire. If investment is non-recurring there is potential for recruitment challenges. If funding is not available future service reform may be unable to be delivered as planned.	AHP Rehabilitation Commission report highlighted to SPOG Clinical triage and prioritisation of referrals	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness	
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA41	Green	Pain Services Delivery of AHP pain services through MSK to support patients through self management and prevention approach	Develop a 5 week Pain Association Programme that will support the further enhancement of service for patients to reduce GP, OOH and Front door attendances.	Additional physiotherapy post has been advertised as part of service development plan. Recruitment to posts has been completed	NHS Ayrshire & Arran North Ayrshire HSCP South Ayrshire HSCP East Ayrshire HSCP	Difficulty recruiting to 15 hrs physiotherapy vacancy within core staffing leading to increased waiting times and variation in service delivery. Digital inclusion for patients who struggle to access online resources.	Physiotherapy post has been increased to 18.75 hours to attract candidates. HR process underway. Development of pain management service resources that reduce digital divide.	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC) Six Essential Actions (6EA) Primary Care Improvement Plans (PCIPs) Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine. Pain Management Recovery Framework	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey. Reducing digital divide through the use of face to face and audio podcasts versus all online offer.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA42	Amber	Long Covid Delivery of a safe clinical pathway suitable for implementing the management of Long Covid ensuring that the person is cared for by the right clinician at the right time.	Implement the SIGN161 Guideline released on 18/12/20 to meet the needs of people with Long Covid without significant loss or impact on existing service recovery.	At present attempting to meet these needs impacts on resource allocated for recovery for both urgent and routine health care. The process of a benchmarking exercise with a multi-disciplinary attendance to gain expert knowledge on the status of the Board's current response to Long Covid management and also determine next steps has been completed. We have now secured non-recurring funding for a small Long Covid service within Ayrshire and Arran. This service will focus on long term condition management and holistic assessment and onward signposting for people with long Covid symptoms.	North Ayrshire HSCP South Ayrshire HSCP East Ayrshire HSCP	Funding for these posts from the Scottish Government is non-recurring - this has an impact on AHP recruitment and retention. Current funding covers staff pay costs and not the digital components within the bid. A Once for Scotland approach is being used for this which may cause delays in implementation and delivery.	Recruitment is underway and the service will be hosted within HARP to increase sustainability and reduce risk.	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). NHS Recovery Plan. Primary Care Improvement Plans (PCIPs) Winter Preparedness Realistic Medicine, SIGN 161 Managing the long-term effects of Covid-19. Cossette Report 2020.	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey.
West of Scotland	Ayrshire and Arran	Recovering planned care	Rehabilitation	2021-AA43	Proposal	Prehabilitation Prehabilitation, delivered as a considered part of the rehabilitation continuum, could have significant positive impact on the systems and services which are currently trying to deal with many of the issues/conditions that could be otherwise prevented or at least minimised if a pro-active approach was applied.	Progress initial discussions on the scoping of prehabilitation services. Review of previous test of change data and mapping of future reformed service needs. Planning and creation of relevant business case. Complete	The proposal was submitted to the NTC team writing the business case for Scottish Government funding for this model, no update has been received to date.	NHS Ayrshire & Arran North Ayrshire HSCP South Ayrshire HSCP East Ayrshire HSCP	Scale of requirement for investment. Potential of variable funding response from the 3 HSCPs leading to inequity across Ayrshire. If investment is non-recurring there is potential for recruitment challenges. If funding is not available future service reform may be unable to be delivered as planned.	Funding stream from national investment for rehabilitation services from the work of the National Rehabilitation Advisory Board linked to Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020) has been agreed.	PC1	Framework for Supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic (2020). Caring for Ayrshire. North, East and South HSCP Strategic Plans (2020/21). NHS Recovery Plan. Redesign of Urgent Care (RUC). Six Essential Actions (6EA). Primary Care Improvement Plans (PCIPs). Trauma and Orthopaedic Recovery Plan Winter Preparedness National Treatment Centres Realistic Medicine. Care and Wellbeing Programmes. Recovery and redesign: Cancer Services. Framework for Effective Cancer Management. Centre for Sustainable Delivery Heat Targets.	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey.
West of Scotland	Ayrshire and Arran	Recovering planned care	Estates and Capital Planning	2022-AA1	Green	Delivery of National Treatment Centre for Orthopaedics	New national treatment centre for elective orthopaedic care operational and treating patients by 2025.	Strategic Initial Agreement and Economic Case approved. Progress on work to complete Full Business Case proceeding to programme. Property acquired and under NHS Ayrshire and Arran control.		Professional team appointed and in place. Adopted programme being driven at pace. Ongoing project scrutiny and engagement via programme board.	Professional team appointed and in place. Adopted programme being driven at pace. Ongoing project scrutiny and engagement via programme board.	PC1	Caring for Ayrshire Strategy. Reducing elective care waiting lists.	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care	2022-AA2	Amber	Provision of sustainable safe head and neck service	Redesign/relocation of Ward 5A to support Head and Neck (H&N) inpatients; ensure staff training for airway care and emergencies Full recruitment to OMFs consultant team (3 of 4 posts filled) Continue discussions with D&G ENT team to ensure mutual aid is maximised Increase ENT core weekly theatre and consideration of weekend working including cochlear	Internal consultation underway regarding 3 options for protection of dedicated H&N beds. Further feasibility requires to be assessed with a decision expected by August 2022 Plan being worked up for additional evening / weekend cochlear implant theatre lists		Urgent care impact on bed availability Staff capacity / willingness to work overtime Consultant recruitment		PC1	NHS Recovery Plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care	2022-AA3	Red	Provision of sustainable safe Systemic Anti Cancer Therapy (SACT) service	Build on future service delivery model work already undertaken by the SACT Executive and WoSCAN Investment in Nursing, Pharmacy workforce to increase Non-Medical Prescribing Continue with local delivery plans for SACT provision including identified option for community T3 in North, East Ayrshire	This remains a risk and priority area for NHS Ayrshire and Arran, but has not been funded in the 2022/23 WoSCAN recurring funding however non-recurring funding through cancer access funding will provide some continuation of this work. Recruitment for medical and nursing is complete. Community support for this is still being sourced.		This is dependent on Access Funding being confirmed		PC1	Cancer Strategy - national SACT investment	Low risk chemo will be delivered in communities and therefore reducing health miles.
West of Scotland	Ayrshire and Arran	Recovering planned care	Planned Care Outpatients	2022-AA4	Amber	To reduce waiting list size and waiting times for Outpatients by increasing clinic capacity and reducing referral demand	Dermatology Initiate photo triage service Employ GPwSI / locum	Staff recruitment underway		This is dependent on Access Funding being confirmed		PC1	NHS Recovery Plan	
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5	Green	Improve waiting times within Gynaecology Services	Implementation of Active Clinical Referral Triage / Enhanced vetting March 23 Develop Education & Relationships with Primary Care December 23 Improve Digital Resources September 23	Team identified to take work forward		Lack of available IT resources to support	Appointment of 2 new Consultants	PC1	Waiting Times Modernising Patient Pathways Bringing it Together Caring for Ayrshire	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5.1	Green	Improve waiting times within Gynaecology Services	Implementation of Patient Initiated Review September 22	Team identified to take work forward				PC1	Waiting Times Modernising Patient Pathways Bringing it Together Caring for Ayrshire	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5.2	Green	Improve waiting times within Gynaecology Services	Consultant job planning to meet service needs September 22	Team Service Planning in progress				PC1	Waiting Times	Improve access to meet National Waiting Times Standards and reduce waits for patients

West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5.3	Green	Improve waiting times within Gynaecology Services	Waiting List Initiatives June 22	WLI rolling programme in place		Volume of WLI's required becomes unsustainable	Potential use of Consultant Retire & Return to mitigate demands on Consultant establishment	PC1	Waiting Times	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5.4	Proposal	Improve waiting times within Gynaecology Services	Consultant Retire & Return for additional capacity October 22	Consultant requests in progress		Funding not available		PC1	Waiting Times	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5.5	Proposal	Improve waiting times within Gynaecology Services	Develop Business case for nurse specialist roles June 22 Recruit to Train - courses start October 22 Service Delivery - start October 23	Business case complete		Funding not available		PC1	Waiting Times Modernising Patient Pathways Bringing it Together Caring for Ayrshire	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5.6	Proposal	Improve waiting times within Gynaecology Services	Establish feasibility in estate footprint July 22 Establish suitable patient cohort July 22 Establish equipment / training required July 22 Deliver unit dependant on outcome of feasibility study	New deliverable		Unit is not feasible due to lack of estate / funding Funding for second ultrasound machine		PC1	Waiting Times Modernising Patient Pathways Bringing it Together Caring for Ayrshire	Positive impact on IP/DC waiting times
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA5.7	Green	Improve waiting times within Gynaecology Services	Develop use of Robot Assisted Surgery March 24	Team identified to take work forward		Funding not available Consultant training time		PC1	Waiting Times Modernising Patient Pathways Bringing it Together Caring for Ayrshire	Positive impact on IP/DC waiting times
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA6	Proposal	Ensure robust Termination of Pregnancy (TOP) service	Assess needs of TOP Service, identifying capacity gaps in light of increasing demand Identify additional estate to support increase in demand September 22	New deliverable		inappropriate current accommodations		PC1	Women's Health Plan	Improve health outcomes and health services for all women and girls in Scotland
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA7	Green	Develop robust MDT Pelvic Pain Endometriosis Service	Development of MDT Pelvic Pain Endometriosis Service / Pathway December 22 Endometriosis nurse business case July 23	Team identified to take work forward		availability of nursing and medical time for service provision		PC1	Women's Health Plan	Improve health outcomes and health services for all women and girls in Scotland
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA8	Green	Enhance service for women with acute menopause symptoms	Enhancement of service for women with acute menopause symptoms December 22 Primary care education March 22 Workplace wellbeing August 22	Team identified to take work forward				PC1	Women's Health Plan	Improve health outcomes and health services for all women and girls in Scotland
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Gynaecology	2022-AA9	Green	Sexual Health Standards Assess and deliver services to meet standards - whole system	Completion of Baseline Analysis - Ayrshire System September 22 Development and delivery of Improvement Plan - Ayrshire System (TBC)	Baseline data gathering in progress				PC1	Sexual Health Standards	Improve Sexual Health Services for young people and adults of Ayrshire
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA10	Green	Best Start Implementation of the Best Start Recommendations and Sustainability of Service.	Complete Gap Analysis of progress and scope remaining requirements June 22	Gap Analysis and Scoping completed				PC1	Best Start	Improving access to and quality of services in line with Best Start recommendations
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA10.1	Green	Best Start Implementation of the Best Start Recommendations and Sustainability of Service.	Develop business case for sustainability of model of care December 22	New deliverable				PC1	Best Start	Improving access to and quality of services in line with Best Start recommendations
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA10.2	Green	Best Start Implementation of the Best Start Recommendations and Sustainability of Service.	Conclude delivery of implementation of Best Start recommendations 2025	New deliverable, milestones pending outcomes of gap analysis.				PC1	Best Start	Improving access to and quality of services in line with Best Start recommendations
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA11	Green	Complex Care Meeting the needs of complex and high risk pregnancies	Consultant job planning to meet service needs commence September 22	Team Service Planning in progress				PC1		
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA11.1	Proposal	Complex Care Meeting the needs of complex and high risk pregnancies	Development of Rainbow Clinics feasibility and capacity review November 22	New deliverable				PC1		Improve access to specialist care
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA12	Green	Early Pregnancy / Pregnancy Loss Support for Women experiencing early pregnancy loss	Develop 7 day scanning service in EPAS utilising midwife sonographers. March 23	Midwife enrolled on training to start October 22				PC1		
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA12.1	Proposal	Early Pregnancy / Pregnancy Loss Support for Women experiencing early pregnancy loss	Implement Bereavement Liaison pathway / clinics March 23	New deliverable				PC1		
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA13	Proposal	Outpatient Services Care available closer to home	Establish Outpatient Induction of Labour Clinics November 22	New deliverable				PC1	Caring for Ayrshire	
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA13.1	Proposal	Outpatient Services Care available closer to home	GTT / Health Education to be available in Community settings December 22	New deliverable				PC1	Caring for Ayrshire	
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA13.2	Proposal	Outpatient Services Care available closer to home	Suitable Community Accommodation to be identified in all localities progress update March 23	New deliverable		Lack of suitable available clinic space in community settings in any or all areas.		PC1	Caring for Ayrshire	
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Maternity	2022-AA14	Green	Service Quality Access to readily available quality data	Develop Maternity data Dashboard March 23	New deliverable		Lack of Business Intelligence Resource		PC1	Best Start MCQIC	
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Paediatrics	2022-AA15	Proposal	Improve waiting times within Paediatric Service	Plan & Costing of refurbishments to accommodate OP clinic rooms July 22 Agreement to Proceed with works TBC	Scoping in progress		Funding not available		PC1	Waiting Times Caring for Ayrshire	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Paediatrics	2022-AA15.1	Green	Improve waiting times within Paediatric Service	Implementation of Active Clinical Referral Triage / Enhanced vetting October 22 Develop paediatric handbook for primary care March 23 Improve Digital Resources March 23	Team identified to take work forward		Lack of available IT resources to support		PC1	Waiting Times Modernising Patient Pathways Bringing it Together Caring for Ayrshire	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Paediatrics	2022-AA15.2	Green	Improve waiting times within Paediatric Service	Implementation of Patient Initiated Review November 22	Team identified to take work forward				PC1	Waiting Times Modernising Patient Pathways Bringing it Together Caring for Ayrshire	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recovering planned care	Women and Children Paediatrics	2022-AA15.3	Green	Improve waiting times within Paediatric Service	Consultant job planning to meet service needs October 22	New deliverable				PC1	Waiting Times	Improve access to meet National Waiting Times Standards and reduce waits for patients
West of Scotland	Ayrshire and Arran	Recruitment and retention	Workforce	2022-AA16	Amber	Improve supply of registrant clinical staff (ATTRACT)	(1) Latent vacancies within registrant workforce reduced Ongoing (2) Reduction in the level of high cost supplemental staffing being utilised i.e. agency - by end of Q2 and sustained (3) Compliance with the forthcoming Health & Care Staffing (Scotland) Bill - in line with national direction	(1) NQN recruitment, for those graduating in September 22, has been completed with candidates matched to funded vacancies (2) Right sizing workforce group have set targets for reduction in agency spend for both nursing and medical. Work underway in Acute Services to strengthen authorisation of agency usage (3) Work underway in completing H&C Staffing Bill self assessment template. Application of nursing tools re-commenced with timetable across organisation for the use of the tools.		Corporate risk 764 relates to registrant workforce supply and capacity and directly impacts on all 3 deliverables	International recruitment used as a lever Planned exit programme for high cost locums in Acute Services In keeping with WoS colleagues unified approach to the recruitment of NQNs	RR1	Right Sizing Workforce Workforce Plan Financial Plan National Treatment Centre Plan People Strategy National Health & Social Care Workforce Strategy	

West of Scotland	Ayrshire and Arran	Recruitment and retention	Workforce	2022-AA17	Green	Introduce new complementary roles/support development of existing staff (RETAIN)	(1) Strengthened multidisciplinary team working and development March 23 (2) New career pathways and opportunities for both existing staff and those new to the NHS March 23 (3) Staff enabled through support and development to work to the top of their roles March 23	(1) New role development underway. Anaesthetic Associate roles for NTC have been advertised. Advanced Critical Care Practitioners also in progress. Agreement on WoS basis to proceed with Physician Associates for the West region with effect from FY 2023. (2) Linked to 1 but also work underway looking at Advanced and Extended Scope practitioners across nursing and AHPs. (3) Steering Group established to progress the work for Band 2/3 review of HSCWs		(1) New role development and ongoing supervision and support to those in training impacts on clinician time further impacting on wider service recovery capacity (2) staff moving into new roles creates domino effect of vacancies in wider workforce (3) Lead in time associated with new roles (MAP roles 2-3 years) before staff can bring capacity to services (3) Staff willingness to expand practice	(1) Buy in from clinical teams set out early and seek opportunities of scale locally / regionally which could mitigate capacity issues. (2) Early planning for introduction of roles and clear messaging of associated lead in times so no false expectation. Lack of pump priming from SG could create an inhibiting factor (3) Engagement with staff to encourage working to top of role	RR1	Right Sizing Workforce Workforce Plan Financial Plan National Treatment Centre Plan People Strategy National Health & Social Care Workforce Strategy	
West of Scotland	Ayrshire and Arran	Recruitment and retention	Workforce	2022-AA18	Green	Deliver the ambitions of our Employability Strategy (DEVELOP)	(1) Opportunities for those far from employment March 23 (2) Growing our own staff, offering non-linear career routes and pathways March 23 (3) Improving the visibility of the range of NHS careers and opportunities, particularly for those in education March 23	(1) Kickstart programme in place (2) Agreement to proceed with modern apprenticeship programme at larger scale than undertaken in Ayrshire before - target of approx. 50 (3) Employability Strategy approved by Corporate Management Team and work now underway to develop action plan to underpin strategy. Intent to take strategy to NHS Board in October along with Workforce Plan		(1) Funding to support employability programmes and ensuring that those undertaking programmes can move into roles once have completed programme (2) Capacity of services to support employability programmes	(1) Access available funding routes and consideration of employability at scale as opposed to smaller numbers (2) Engagement with wider colleagues across Scotland to take learning from approaches and models and look for potential economies of scale.	RR1	Employability Strategy Workforce Plan Financial Plan People Plan National Health & Social Care Workforce Strategy Anchor Institution Fair Work	Employability
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA11	Green	To continue to meet increased service demand, and to facilitate timely hospital discharges and increased pressures over winter, including weekends and public holidays	Complete Re-design of Ayrshire and Arran unscheduled care service	Recruitment of RN to support complex hospital discharge and assessment and Store Technician Community Equipment Store. Improvement Area - Hospital Discharge Locality and Community Care Service Update: Over the past year there has been additional investment in Hospital based assessment teams to support a multi-disciplinary approach to discharge. Roles with teams now include: MHOs, Occupational Therapy Assistants, and additional SW and Management capacity. Weekend and public holiday working continues to be facilitated by the assessment teams. Community Care Senior Managers are part of the 'Discharge without Delay' programme, including the post hospital and planned data of discharge workstreams.	North Ayrshire HSCP	Unable to recruit or recruit fully due to temporary nature and non-recurring budget. Hospital delays will increase into the winter period putting additional pressure on staff and the system Challenge of continued unmet need in community due to resource focus on hospital discharge.	Ongoing recruitment activity, including fairs and events. Workforce Planning Discharge without Delay programme	SC1	NAHSCP Strategic Plan Caring for Ayrshire Winter Preparedness	A faster facilitation of discharge from hospital will address health inequalities by supporting people back to health in a community setting. Evidence suggests that there is a detrimental impact to people staying in a hospital setting or longer than necessary. A more effective discharge process will support people to leave hospital care as soon as is medically possible to allow them to recover more effectively in their own home.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA12	Amber	To continue to support Care Homes within North Ayrshire with the training and supervision of staff	Undertake a review of the North Ayrshire Care Home Commissioning Process - including (1) Needs Assessment (2) Market Analysis (3) Provider engagement (4) Commissioning modelling March 23	Progess has been slow to date due to Covid and other competing priorities. However, new base dataset has been sourced looking at Care Home data from March 2022. This will now be analysed for trend information to support a new commissioning strategy.	North Ayrshire HSCP	Unable to offer additional support to Care Homes	Care Home Oversight Group still in place, meeting weekly to provide support to local care home sector.	SC1	NAHSCP Strategic Plan Caring for Ayrshire	People living in care homes are perhaps among the most vulnerable in our communities, by supporting care homes to provide the most effective care will positively impact on residents. By providing overarching support to all care homes, we can help ensure a high-level of care is available in all North Ayrshire establishments, this should positively impact on those service users living in Care Homes.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA13	Amber	Increase dementia Post Diagnostic Service (PDS) capacity in localities	Recruitment of three band 5 community psychiatric nurses to deliver increased support for patients diagnosed with a dementia. Gather data on compliance against standards including numbers of patients referred, numbers offered an appointment within 7 days and uptake up the offer of post diagnostic support.	As a service the service has advertised for 3 x 30 hour band 5 RNs without success. The advert has been reviewed and the service readvertise for 2 x 37.5 hour staff with a view to increasing interest. The service continues to deliver PDS to all patients with a diagnosis of dementia however as we have been unable to recruit we cannot at this time expand or develop and implement other supports.	North Ayrshire HSCP	If unable to recruit we will be unable to release experienced CPNs to focus solely on PDS Service may not meet key targets in line with standards and PDS commitments	Staff within the team will continue to offer PDS in line with standards Monitor compliance with standards and data provided to Scottish Government	SC1	NAHSCP Strategic Plan Caring for Ayrshire National Dementia Strategy 2017-2020 Scottish Government Covid-19 Dementia Recovery Plan Commitment 4 - Post-Diagnostic Support	Through enhancement of this service, those identified with dementia and their family/carers will be provided with much needed early support. This service will support families at the early stages of their journey, ensuring that they are provided with adequate information, guidance and support and are better prepared to cope with the dementia diagnosis. Failure of this service can impact negatively on patients, families and carers as they may face challenges to identify suitable support.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA15	Amber	To meet the ongoing demands of the Occupational Therapist service and assist with winter planning & Covid recovery	Improvement Area - Community waits for assessment and review	Recruitment to posts has been delayed due to review of scheme of delegation. This has now been completed and recruitment process will now start.	North Ayrshire HSCP	Additional risk to service delivery if funding not available after March 2022 Further risks to service delivery with other vacancies in the team.	If funding not continued may have to meet within existing resources which not sustainable within the current service Recruitment to vacant posts is underway however if unable to fill posts risks will remain	SC1	NAHSCP Strategic Plan Caring for Ayrshire Winter Preparedness	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA16	Amber	Continue to meet the ongoing demands of the ICT service and assist with winter planning	Improvement Area - Hospital Discharge/Admission Avoidance Enhance role of enhanced ICT - following review of service. Plan to be developed - to incorporate tasks not undertaken and ensure capacity to support 'Hospital at Home' Model	Posts have been recruited to - 2 practitioners and the assistant post on hold	North Ayrshire HSCP	Due to the temporary nature of the posts and the non-recurring monies the posts may not be recruited Ongoing risk of demands of service delivery and increased acuity of patients treated	Continual prioritisation of workloads and review of service	SC1	NAHSCP Strategic Plan Caring for Ayrshire Winter Preparedness	Delivery of this model will reduce health inequalities as people will receive the correct care at the right point in their journey.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA17	Amber	Develop an Integrated Hub on Arran, including effective review of care bed provision on the island and implementation of a sustainable 24/7 care service.	Continue to support the additional GP role for AWMH to enable the transition to the new model of nursing care and support the Covid response on Arran Progress the New Models of Care work building on from the complex frailty MDT work and Frailty collaborative Progress Single Point of Contact and patient flow via care navigation and introduction of Netcall.	Need to make the GP flex funding permanent to align with the 2 ED posts to ensure service delivery for urgent care. Netcall is going live 15th June 22 as key infrastructure for delivery of SPOC on Arran. Project Team to take forward Initial Agreement to OBC and FBC being reinstated in July 22.	North Ayrshire HSCP	Unable to continue posts in 2022/23 due to the temporary nature of the posts and non-recurring budget Critical and Essential services and 24/7 rotas cannot be sustained due to workforce challenges and multi-site delivery model.	Re-submit the Initial Agreement to Scottish Government for an Integrated Hub on Arran to progress to Outline Business Case and Full Business Case in line with Caring for Ayrshire Continue to recruit into all current vacancies – rolling advert, recruitment fairs. Continue to use bank and agency staff in interim to ensure safe services.	SC1	NAHSCP Strategic Plan Caring for Ayrshire Winter Preparedness	Establishment of the Integrated Hub will provide a more effective service to the people of Arran. In particular, the additional development of a 24/7 care service on the island will bring particular benefits to many of the islands vulnerable and at risk people. Many frail or infirm people are often at risk during the night, leading to high levels of emergency admissions to AWMH or residential care. With a 24/7 care service, effective OOH or overnight care can be provided in a patients own home, reducing the need for hospital admissions. This service will also provide a similar approach to what is available on the mainland.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA18	Green	To enhance resilience with the care at home service to improve hospital discharges and reduce the waiting list for Care at Home Services	Reduce the number of people waiting for assessment Reduce the number of people on the waiting list for a Care at Home service in the Community Winter investment funding – Care at Home Capacity Plan Enhance in-house care at home service Enhance workforce Plus 2 TEC workers	A number of newly funded posts as part of the winter investment fund have now been filled. This remains under constant review with on-going recruitment activity.	North Ayrshire HSCP	Recruitment is unsuccessful and unable to fill vacant posts. Retention of existing workforce. External care at home providers capacity for care delivery and ongoing sustainability.	Robust recruitment and advertising campaign. Promote health and wellbeing initiatives for existing workforce. Ongoing contract management with External Providers.	SC1	Winter preparedness	Enhancing resilience within the care at home service will have the benefit of ensuring people awaiting community care packages will receive the needed support faster. It will also ensure Care at Home workers are adequately supported to fulfil their role, reduce burnout and ensure they are able to deliver effective services over the long term.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2021-AA27	Amber	Ensuring people are supported within the community where possible rather than in a hospital or institutional setting to improve outcomes and reduce delayed transfers of care	Provide additional capacity in the CAH service to enable flow from reablement, minimise DTOCs and prevent unnecessary admissions	Deteriorated Commissioned CAH -20% compared to June 21 (9900hrs). - 22.5% in house capacity compared to June 21.	South Ayrshire HSCP			SC1	Adult & Older People Service Plan Home First Frailty Winter Preparedness	
West of Scotland	Ayrshire and Arran	Social care	Care Home Professional Support Team	2021-AA44	Green	Establish Care Home Professional Support Team (CHPST) to increase support for Care Homes, improve professional and IPC standards and improve standards of care	(1) Establish Care Home Professional Support Team (CHPST) June 22 (2) Develop an improvement plan September 22 (3) Develop an evaluation plan March 23	Team appointed with the exception of AHP and Clinical Psychologist. AHP recruitment progressing. Alternatives being considered for the Clinical Psychologist as recruitment has been unsuccessful to date. Improvement Plan being scoped.		Risk to continuation of programme if no funding identified for non-recurring element	Scoping options for alternative source of recurring funding	SC1	Enhanced Care Home Professional Oversight Arrangements - Scottish Government Directive Care Home Framework Healthcare Quality Strategy for NHSScotland Independent Review of Adult Social Care in Scotland Caring for Ayrshire NHS Recovery Plan	The support from the CHPST will help to address educational needs and support staff in care homes to provide good quality care. In doing so, residents will have optional choice to remain in their place of care with care home staff recognising deterioration more timeously.
West of Scotland	Ayrshire and Arran	Social care	Children's Health Care and Justice	2021-AA8	Green	Prison Health Care Review of and investment in the mental health / addictions workforce within HMP Kilmarnock to address waiting times and ongoing provision of timely interventions to the prison population in line with mental healthcare, Hep C Elimination and Medicated Assisted Treatment Standards (MATS)	Completion of Health Needs Assessment for HMP Kilmarnock October 22 MAT standards to be implemented in early adopter custodial settings April 23	Stakeholder reference group established. Work of core data gathering is in progress with patient and staff engagement planned for the summer period. Local mapping work on current levels of need and identification of issues to MAP implementation. Nationally pilot work planned in HMP Perth September 22. Engagement with the MIST implementation team There are continued vacancies in the addiction and mental health teams. Caseloads have been triaged to prioritise service delivery. Successful general nurse recruitment will ease pressure on these teams to support core duties	East Ayrshire HSCP	High levels of staffing turnover, interdependencies with the adult nursing workforce, risks through unplanned staffing absence, limited training packages being delivered. These pressures and mitigating actions remain in place.	Workforce planning lead supporting with workforce review. Supported to advertise and recruit to vacancies at the earliest opportunities. Close links with workforce solution. Profiling of prison healthcare services. Priority area for recruitment through for newly qualifying nurses which have identified successful candidates. Highlighted for candidates from foreign nurse recruitment.	SC1	Mental Health Transition and Recovery Plan; Medicated Assisted Treatment Standards (MATS); Hepatitis C Elimination in Scotland; BBV/Sexual Health	

West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA19	Green	Reduce the Waiting list for Social Work Assessment and Review	Use of Scottish Govt Winter Pressures Funding Recruit 2 Social Workers plus 3 Social Work Assistants - to be in place by April 22 Impact on Waiting list by Q3 October 22	Additional social work posts (SW & SWAs) aligned to locality Social Work teams to support complex assessment to support discharge, review, AWI and support ICT social care requirements. Improvement Area - Community waits for assessment and review 5 additional posts have been identified through Scottish Government funding. Posts include 2 SW and 3 SW Assistants. Posts have now been subject to interview, and appointments have been made. Anticipated that all posts will be in place from July 22	North Ayrshire HSCP	Increase in local demand outstrips worker capacity. Knock on impact on other service areas in the HCC system.	Ongoing review by Team Managers. Existing risk management protocols in teams. Workforce Planning.	SC1		People who require care must receive it as soon as possible following the presentation of need. Any delays in this process may result in the need becoming more complex, more difficult to manage and may require critical intervention. By ensuring our SW assessments are completed quickly, and reviews are routinely carried out, we can support local people to effectively manage their identified needs supporting them to live a healthier life for longer.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA20	Amber	Review local models of respite provision	Review use of respite with Anam Cara (reflecting on current step down status) Review current respite use (planned vs unplanned) Create working group to review/consider models Scoping exercise across private Care homes to review capacity for respite opportunities	Programme of review has stalled. No decisions on the review of respite models have been made. No indication that low respite opportunities is negatively impacting on families. This has been since advent of Pandemic.	North Ayrshire HSCP	Lack of respite provision negatively impacts on Carers and Families	Planned Respite is still available to support demand for those assessed as most critical.	SC1		The value that local carers bring is widely recognised. Without the support of local carers, the demand placed on statutory health and social care services would increase significantly. However, it is recognised that role of carer can be both physically and mentally challenging with the long term risk of negative health impacts. Through provision of appropriate respite opportunities, carers can receive a break from there caring duties and hopefully be able to continue in their caring role for longer.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA21	Green	Explore opportunities and extend model to implement a range of effective palliative care and end of life care models through joint working, including with carers	Establish contracting requirements of service provider Develop agreement with Ayrshire Hospice for 2 Palliative Care Beds / Day Cases for EA	Clarification sought from Primary Care Contracting Team whether Primary Care provider must deliver services or whether this can be delivered by Advanced Practice Nurses. Have agreement with the Hospice in relation to Hospice Legacy Plans within EA to provide additional 2 Palliative Care Beds/Day Cases supported by the Ayrshire Hospice.	East Ayrshire HSCP	There is a risk of delayed commission for medical services to the Care Home Palliative Care beds due to other demands on these services	Explore viability of ANP provision instead of GP provision	SC1	Palliative Care Strategy	
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA22	Green	As part of Caring for Ayrshire, review and implement recommendations for Front Door Services.	Seek approval to appoint Support Assistants March 22	Approval to progress recruitment of support assistants is underway. Approval awaited for other implementation	East Ayrshire HSCP	Recruitment delays may occur which risk delay in implementation of the new integrated model	A leadership group has been established to ensure protected time for this key area	SC1	Caring for East Ayrshire Caring for Ayrshire Technology Enabled Care Programme Digital Health & Care Strategy	Providing a wider range of services closer to people's homes may reduce health inequalities within the geographic area and make more accessible services available within EA.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA23	Green	As part of Caring for Ayrshire, review and implement recommendations for Community Nursing as part of MDTs.	Progress recruitment to Community Nursing March 22	~Senior ANP in recruitment process - 4 x DN Specialist Nurses appointed - Community Nursing Clinical Governance established. EA representatives in attendance - 10+ HCSWs appointed - AND has provided feedback sessions to EA Community Nurses on next steps in implementation - Capacity constraints remain due to absence of 2 x CNMs - Set of meetings planned to determine further implementation priorities	East Ayrshire HSCP	Training, development, competencies and skills require to be defined and actively supported as implementation progresses. The risk of staff absence and capacity may affect programme milestones and deliverables.	A leadership group has been established to ensure protected time for this key area	SC1	Caring for East Ayrshire Caring for Ayrshire Realistic Medicine Quality Strategy Technology Enabled Care Programme Digital Health & Care Strategy	Providing a wider range of services closer to people's homes may reduce health inequalities within the geographic area and make more accessible services available within EA.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA24	Green	As part of Caring for Ayrshire, implement the new model of care for East Ayrshire Community Hospital (EACH) to receive re-design, redesign of place-based models of care in Cumnock and Irvine Valley	Explore alternative models of medical staff provision Develop specification and carryout consultation Establish Micro-board to re-engage and consult on future model of clinical care March 22	~Explore 2 x alternative models of medical staff provision - Specification for medical services out for consultation - Micro-board established to re-engage and refresh previous consultation around future model of clinical care at EACH - Regular meetings with Senior Manager AHPs regarding new models of care - Ayrshire Hospice currently using the spare ward capacity. This has a material impact on implementation	East Ayrshire HSCP	Availability of space at EACH is constrained until June 2024. This will limit some implementation of new models of care within those areas.	Implementation will be prioritised for recommendations which do not require reconfiguration, refurbishment or the temporary current unavailable space.	SC1	Caring for East Ayrshire Caring for Ayrshire Realistic Medicine Quality Strategy Dementia Strategy Technology Enabled Care Programme Digital Health & Care Strategy	Providing a wider range of services closer to people's homes may reduce health inequalities within the geographic area and make more accessible services available within EA.
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA25	Green	Focus on ongoing and intensive rehabilitation support for people to recover from the effects of Covid19 and lockdown	Implement the recommendations of the 2020-21 review of older people's mental health following completion of final agreement March 22	EMH Clinical Governance Meeting/Clinical Director have advised that clinical services should be in a safe position to re-open the review implementation from late August 22. This will be confirmed July 22.	East Ayrshire HSCP	Further Covid absences within the clinical teams will risk the capacity of the teams to engage and implement the recommendations.	To prioritise recommendations and plan delivery of these over an extended period.	SC1	People at the heart of what we do Dementia Strategy Mental Health Strategy MDT Programme	People living with mental illness/disorder are subject to greater inequalities than the general population. The implementation of this review has deliverables which focus on addressing health inequalities, health improvement and enablement for the older person .
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA25.1	Green	Focus on ongoing and intensive rehabilitation support for people to recover from the effects of Covid19 and lockdown	Develop frailty initiatives, including Hospital at Home approaches, across multi-disciplinary teams to reduce hospital admission and length of stay March 22	Hospital @ Home "soft launch" in East Ayrshire Apr 22 - collaborative approach to roll out and alignment of models ongoing Frailty - awareness raising major focus of learning & development agenda for all staff; pending release of elearning modules from NES by end August 22	East Ayrshire HSCP	Frontline staff & organisational capacity to drive forward changes and release from duties to undertake learning	Programme oversight via NHSA&A Urgent & Unscheduled Care Collaborative/ DwD Advisory groups	SC1	People at the heart of what we do Caring for East Ayrshire	Improve access to treatment, care & support for frailest in society
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA25.2	Green	Focus on ongoing and intensive rehabilitation support for people to recover from the effects of Covid19 and lockdown	Widen enablement approaches across the range of Locality Health and Care Services March 22	Establishment of Social Care Learning Hub - Enablement a key focus of learning & development priorities for social care staff; will be progressed alongside other critical L&D needs Reablement service to be established - high level framework for progressing establishment of new service by end July, with commencement of detailed planning thereafter	East Ayrshire HSCP	Lack of sufficient recruitment to permanent posts to deliver new model Covid spikes Organisational & staffing capacity to progress changes	Oversight of progress via Pentana reporting/ SCLUB Implementation	SC1	Caring for East Ayrshire	Improve physical, social and emotional health through improved focus on achieving outcomes with intensive support
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA26	Green	Implementing effective multidisciplinary teams and models around Localities, Learning Communities, GP Clusters and community assets through investment in service redesign	Delivery of development programme for Multi Disciplinary Team working in Locality Health and Care March 22	Constituted a transformation programme for the establishment of integrated multi-disciplinary teams within 5 geographic localities of EA. Using Scottish Approach to Service Design Methodology at design phase	East Ayrshire HSCP	Milestone dates and programme deliverables have been adapted due to Covid demands	Focussing on recruitment of key leadership posts and through the winter planning investment recruiting additional frontline staff across Health & Social Care	SC1	Caring for East Ayrshire People at the heart of what we do	Ensuring there is capacity within locality and place based teams to address health improvement and health inequalities as well as service delivery
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA26.1	Green	Implementing effective multidisciplinary teams and models around Localities, Learning Communities, GP Clusters and community assets through investment in service redesign	Implement Phase II of the Best Value Review Improvement Action Plan in care at home with a focus on assessment, care planning and review in the context of personalisation and choice October 22	Progress delayed due to Covid pressures; planning underway with plans to implement new model of oversight & review for SDS Option 3 cases transferring to Option 2 following people being offered "Choices" of care provider.	East Ayrshire HSCP	Organisational & staffing capacity to progress changes External provider viability	Regular planning meetings & clear timescales Regular monitoring meetings with providers as part of Quality assurance/ Contract & commissioning framework	SC1	People at the heart of what we do	Improve physical, social and emotional health through improved focus on achieving outcomes with intensive support
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA27	Green	Developing aligned service redesign in day opportunities for older people, local residential services for adults and across our prevention and early intervention programmes and initiatives	Carry out re-phased Best Value Service Review Programme in Locality Health and Care Services	Older People's Day Care services reopened on all appropriate sites by end August 22. Stages 1 through 6 of rapid review of Older Peoples' Day Care Services complete with final implementation plan to be ratified at SCB and IJB August 22. Parallel development of wider day opportunities for older people - early discussions of strengthening collaboration with partners.	East Ayrshire HSCP	Lack of sufficient recruitment to permanent posts to deliver new model Covid spikes	Regular planning meetings & clear timescales Clear Health & Safety guidance and practices in place with regular reviews	SC1	People at the heart of what we do	Improve physical, social and emotional health through improved focus on achieving outcomes with tailored support
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA28	Green	Build on the learning over the Covid19 pandemic to improve interventions to protect people through our multi-agency public protection arrangements	Implement any improvement actions arising from the multi-agency inspection of Adult Support and Protection (expected publication date August 2021) March 22	ASP Improvement Plan established around improvement actions identified. Good progress achieved - 44% complete. Key Actions, Performance Indicators and Risk Register review and updated on an ongoing basis.	East Ayrshire HSCP	Increased service pressures, staff turnover and vacancies leading to increased vulnerability of adults at risk	ASP Multi-Agency reporting data Governance group established to provide oversight	SC1	Safe and protected	
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA29	Green	Ensuring people are supported within the community where possible rather than in a hospital or institutional setting to improve outcomes and reduce delayed transfers of care	Improve our approach to commissioning to ensure we get enhanced quality of care and best value from our contracts. Contract development for Learning Disability September 22 Contract development for Mental Health April 23	A new Quality Assurance framework has been implemented and reports are taken to CSOG for approval and consideration. Regular online forums are held. New Flexible Contract for Care at Home has been implemented effective from 1st April 22 for a period of 4 years. Further ongoing contract development for LD and MH frameworks have been scheduled for September 22 and April 23 respectively.	South Ayrshire HSCP			SC1	South Ayrshire Health & Social Care Partnership Integration Joint Board Strategic Plan 2021 - 31	
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA29.1	Amber	Ensuring people are supported within the community where possible rather than in a hospital or institutional setting to improve outcomes and reduce delayed transfers of care	Invest in and redesign our new Reablement Service to support delayed discharges and optimise service user's independence. Reduce delays to 0 March 23	Recruitment has stalled over the last year. 85% of those requiring a POC from hospital come through reablement. Mainstream CAH hours has reduced from 12,000 to around 10,000. People being reabled is currently 40%.	South Ayrshire HSCP			SC1	South Ayrshire Health & Social Care Partnership Integration Joint Board Strategic Plan 2021 - 31	

West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA29.2	Amber	Ensuring people are supported within the community where possible rather than in a hospital or institutional setting to improve outcomes and reduce delayed transfers of care	Improving our approach to data analysis for delayed discharge and unscheduled care.	Weekly meetings focus on those patients delayed for over 10 days as the operational teams work to identify actions to ascertain capacity across the system. The system remains challenged due to a number of factors and the HSCP remains in a position where demand continues to outstrip capacity. Progress made - - Additional resource has been created within the Planning and Performance Team to support increased delayed discharge recording and reporting - Initial process mapping undertaken - A Test of Change is being implemented to use a Single Point of Contact to administer and monitor delayed transfers of care	South Ayrshire HSCP			SC1	South Ayrshire Health & Social Care Partnership Integration Joint Board Strategic Plan 2021 - 31	
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA29.3	Green	Ensuring people are supported within the community where possible rather than in a hospital or institutional setting to improve outcomes and reduce delayed transfers of care	Increase our mobile attendant service to provide capacity to transport individuals home out of hours from University Hospitals Crosshouse and Ayr.	In March 22, ELT agreed to the creation of permanent 6 posts which have been recruited to. This is having a positive impact on our ability to respond to alarms, support telecare installation and discharges from the hospital. Response times for mobile attendants have reduced significantly. Comparing April data from 2020 and 2021: - There is an average improvement of 37 minutes for personal care (1hr 26mins in 2020 and 49mins in 2021) - 5 minutes for no response (39mins in 2020 and 34 mins in 2021) - 5 minutes for falls (40 mins in 2020 and 35 mins in 2021)	South Ayrshire HSCP			SC1	South Ayrshire Health & Social Care Partnership Integration Joint Board Strategic Plan 2021 - 31	
West of Scotland	Ayrshire and Arran	Social care	Health and Community Care	2022-AA29.4	Green	Ensuring people are supported within the community where possible rather than in a hospital or institutional setting to improve outcomes and reduce delayed transfers of care	Implement a Home First model for complex discharges	Funding was provided from Scottish Government to support the delayed transfers of care. We have focused on this approach and used interim beds in care home facilities to support those individuals who are delayed in hospital due to capacity challenges in care at home services. Going forward we are continuing to work with our care home providers to progress an interim bed approach, this will be done in conjunction with the proposals of utilising the top floor in South Lodge as a "step down" preventative approach.	South Ayrshire HSCP			SC1	South Ayrshire Health & Social Care Partnership Integration Joint Board Strategic Plan 2021 - 31	
West of Scotland	Ayrshire and Arran	Social care	Public Health Health Protection	2022-AA30	New	Manage Health Protection outbreaks and contribute to National Covid Review	Provide a robust response to any outbreaks and produce a review of local Covid activity to meet national deadlines	Planning for review has begun, with training being undertaken		Winter pressures and flu and other potential outbreaks may put considerable strain on the Health Protection capacity to deliver a service and undertake a review	A project co-ordinator will be aligned to support the review process to provide continuity. Should key clinical personnel not be available to contribute to the review due to core Health Protection duties - this will require to be escalated to SG	SC1	Joint Health Protection Plan	Undertaking this review will provide insight into the effect of the pandemic on health inequalities
West of Scotland	Ayrshire and Arran	Social care	Public Health Caring for Ayrshire	2022-AA31	New	Scope and implement programmes that can deliver on the prevention aspects of CfA and contribute to CRES	Plans on a Page to be developed and implemented	Scoping has commenced		Key PH staff taking this work forward have to be redirected to Health Protection work should there be further variants.	Prioritise this work alongside Health Protection activity	SC1	Caring for Ayrshire	Prevention programmes will be targeted towards those populations of greatest need and will have a clear focus on reducing inequalities
West of Scotland	Ayrshire and Arran	Social care	Public Health Screening	2022-AA32	New	Plan and deliver programme of work to reduce screening inequalities across all PH screening programmes	Develop screening inequalities action plan by September 22	Planning has commenced		Many actions require additional resource and screening inequalities funding not yet confirmed	Prioritise this work alongside Health Protection activity	SC1	National screening inequalities strategy currently being developed by NSO	This work aims to improve uptake of screening among deprived and/or vulnerable groups, and therefore reduce inequalities in cancer outcomes.
West of Scotland	Ayrshire and Arran	Social care	Public Health Vaccinations	2022-AA33	New	Pneumococcal and shingles catch-up vaccination programme targeting care homes residents and housebound peoples.	Produce data and make available re care home residents and housebound peoples who are unvaccinated against pneumococcal and/or shingles; develop consent forms for both vaccines; gather consents for vaccination; develop housebound clinic lists; progress staff training. Complete Commence service delivery	Catch-up programme on schedule to commence mid June 22.		Potential side effects following co-administration of vaccines to more vulnerable patients.	Vaccines will be delivered during separate vaccination visits.	SC1	JCVI Guidance, Vaccination Transformation Programme, Scottish Immunisation Programme.	Too early to determine. Demand for new service will be monitored and patient evaluation planned and implemented in future months.
West of Scotland	Ayrshire and Arran	Social care	Public Health Vaccinations	2022-AA34	New	To deliver an extended Vaccination Programme including Mass Vaccination to the peoples of NHS Ayrshire & Arran Covid-19 Vaccination Autumn/Winter Booster Programme	Robust data to support the Vaccination programme Publish JCVI Guidance regarding Autumn/Winter programme; Plan and agree delivery programme with key stakeholders; Recruit sufficient workforce Complete Commencement of service delivery September 22 Completion of programme December 22 With opportunities for mop up available during January/February 23.	JCVI Guidance expected July 22.		Mass vaccination clinic accommodation not available; delays to vaccine supply; issues associated with national scheduling system; vaccination fatigue amongst peoples; request from national programme to enact surge delivery of programme.	Accommodation hire agreed well in advance of Autumn/Winter Programme; contingency start date agreed and expected vaccine supply dates monitored; continue to work closely with NVSS re. national scheduling and increase local resilience re. scheduling; work closely with national programme re. programme messaging; surge plan, highlighting risks and support from national programme submitted to national programme (May 2022).	SC1	JCVI & MHRA Guidance, National Vaccination Transformation Programme, National Covid-19 Pandemic Response, NHS Ayrshire & Arran Policies & Procedures	Too early to determine. Demand for new service will be monitored and patient evaluation planned and implemented in future months.
West of Scotland	Ayrshire and Arran	Staff wellbeing	Workforce	2022-AA35	Amber	Support the health and wellbeing of our staff (SUPPORT)	(1) Staff access and utilise the range of wellbeing services available - ongoing. (2) Sickness absence levels remain below 5% - monthly monitoring. (3) Staff utilise their annual leave entitlement in order to ensure they rest and recuperate - monthly monitoring	(1) Action plan, as per Right Sizing Workforce Group, to do focused work on ASDOM absence including roll out of stress risk assessments (2) Routine monitoring of sickness and Covid absence rates. Work ongoing looking at reviewing long Covid staff in line with recent DL (3) Guidance note being issued to managers in July reminding them of policy context and good practice/principles in managing annual leave		(1) Capacity of OHS services to manage demand for highest reasons for absence - ADSOM and MSK (2) With move to Covid no longer being recorded as special leave from Aug 22 the likelihood is that absence will be in excess of 5% (3) Staff defer taking annual leave to provide capacity to support	(1) Review of OHS underway (2) Monthly monitoring of staff absence on ongoing basis (3) Monthly monitoring of annual	SW1	Right Sizing Workforce Workforce Plan Financial Plan National Health & Social Care Workforce Strategy People Strategy National review of Occupational Health Services	
West of Scotland	Ayrshire and Arran	Sustainability and value	Digital	2022-AA36	Green	Distributed Working and Estate Rationalisation	Identification, procurement and deployment of digital desk booking and management system Q3 2022/23	Limited action completed - target for end of calendar year 2022 (Q3)		Funding for implementation from Capital Investment Plan.	Requirements, specification and scope being developed to establish likely costs.	VS1	NHS A&A key priorities "Distributed Working & Estates Rationalisation" programme and "Caring for Ayrshire" strategy, to deliver a future proofed, service focussed and financially sustainable estate.	Supporting the delivery of a health service to better meet the needs of the people of Ayrshire by improving flexibility and patient centred care and reducing ancillary property costs.
West of Scotland	Ayrshire and Arran	Sustainability and value	Digital	2022-AA37	Green	Electronic Patient Record and Records Management Programme	Transition to Digital Clinical Records and transition to the removal of paper case notes within general hospital settings. Q4 2022/23	Transition complete in some outpatient clinics. Working group established to rollout programme across acute settings.		Funding for implementation from Capital Investment Plan.	Requirements, specification and scope being developed to establish likely costs.	VS1	NHS A&A key priorities Electronic Patient Record and Records Management programme and "Caring for Ayrshire" strategy, to provide a collated digital source of patient information which is accessible by all relevant staff in order to improve patient care.	Provide a collated source of patient information which is accessible by all relevant staff in order to improve patient care.
West of Scotland	Ayrshire and Arran	Sustainability and value	Estates and Capital Planning	2022-AA38	Amber	Delivery of National Secure Adolescent Inpatient Services (NSAIS) "Foxgrove"	New national mental health facility Foxgrove. Operational by Q4 2022/23.	Advance package of work on site. FBC awaiting final approval following NHS Assure "supported status".		FBC approval and supported status by NHS Assure, Construction Inflation and combined delay impact upon programme. Workforce recruitment.	Ongoing engagement with NHS Assure to close out remaining concerns.	VS1	Adolescent mental health - national programme.	Delivery of specialist services for patients within Scotland.
West of Scotland	Ayrshire and Arran	Sustainability and value	Infrastructure Support Services	2022-AA39	Amber	Lead the transition to a full electric NHS AA commercial fleet to support the wider organisation function while ensuring compliance with SG legislative requirements by 2025	Procurement of new NHS AA EV commercial vehicles. Ensure the appropriate infrastructure is in place across the boardwide estate to support the transition of the commercial fleet. Obtain national funding to support these changes in full. The development of business case to support the transition to an EV	Successful in obtaining funding from Transport Scotland via 2021/22 bid with infrastructure being implemented. Awaiting outcome of 2022/23 bid to Transport Scotland for further infrastructure requirements. Working on 2023/24 bid which will be supported by a Business Case.		Affordability. Full details on Project Risk Register.	EV Project transition group set up to review and oversee programme progress	VS1	Full compliance with Scottish Government legislative requirements. The reduction in greenhouse gas CO2 emissions generated by commercial fleet from baseline.	Climate Change & Sustainability. NetZero
West of Scotland	Ayrshire and Arran	Sustainability and value	Organisational and Human Resource Development	2022-AA40	Green	Distributed Working and Estate Rationalisation	Build our approach to distributed working, and any relevant skills development, into recruitment and induction programmes and procedures Q4 2022/23	Limited action completed - note inter-relationship with other distributed working and estates rationalisation workstreams.		Employee engagement to ensure that distributed working is understood and a success.	Programme group responsible for developing programme includes HR and Employee Directors.	VS1	NHS A&A key priorities "Distributed Working & Estates Rationalisation" programme and "Caring for Ayrshire" strategy, to deliver a future proofed, service focussed and financially sustainable estate.	Supporting the delivery of a health service to better meet the needs of the communities of Ayrshire by improving flexibility and patient centred care and reducing ancillary property costs.

Region	Board	Category	Workstream	Reference	Status	Title	Action	Progress	Partner	Risk	Mitigation	Code	Link	Benefit
West of Scotland	Ayrshire and Arran	Sustainability and value	Organisational and Human Resource Development	2022-AA40.1	Green	Distributed Working and Estate Rationalisation	Produce an Ayrshire and Arran Guide for Leaders on Distributed Working that provides a self-management resource Q4 2022/23	Limited action completed - note inter-relationship with other distributed working and estates rationalisation workstreams.		Ensure that guidance is user focussed and positive providing adequate resources to ensure positive and effective deployment of distributed working.	Programme group responsible for developing programme includes HR and Employee Directors.	VS1	NHS A&A key priorities "Distributed Working & Estates Rationalisation" programme and "Caring for Ayrshire" strategy, to deliver a future proofed, service focussed and financially sustainable estate.	Supporting the delivery of a health service to better meet the needs of the communities of Ayrshire by improving flexibility and patient centred care and reducing ancillary property costs.
West of Scotland	Ayrshire and Arran	Sustainability and value	Property & Strategy	2022-AA40.2	Green	Distributed Working and Estate Rationalisation	Formal implementation of "distributed working", "zero desk working" and "corporate landlord property management model" policies Q2 2022/23	Policies have been approved by IPB Advisory Group and Infrastructure Programme Board (IPB). Final approval required from Corporate Management Team (CMT) before implementation.		Integration with HR / OD issues including alignment with national policies.	Programme group responsible for developing programme includes HR and Employee Directors.	VS1	NHS A&A key priorities "Distributed Working & Estates Rationalisation" programme and "Caring for Ayrshire" strategy, to deliver a future proofed, service focussed and financially sustainable estate.	Supporting the delivery of a health service to better meet the needs of the communities of Ayrshire by improving flexibility and patient centred care and reducing ancillary property costs.
West of Scotland	Ayrshire and Arran	Sustainability and value	Property & Strategy	2022-AA40.3	Green	Distributed Working and Estate Rationalisation	Establish Local Authorities common technology requirements for sharing accommodation Q3 2022/23	Limited action completed - target for end of calendar year 2022 (Q3)		Potential difficulties in agreeing common technical standards across all 4 organisations (NHSA&A and NAC, SAC and EAC).	Establish technical forum involving all 4 organisations (NHSA&A and NAC, SAC and EAC).	VS1	NHS A&A key priorities "Distributed Working & Estates Rationalisation" programme and "Caring for Ayrshire" strategy, to deliver a future proofed, service focussed and financially sustainable estate.	Supporting the delivery of a health service to better meet the needs of the communities of Ayrshire by improving flexibility and patient centred care and reducing ancillary property costs.
West of Scotland	Ayrshire and Arran	Sustainability and value	Property & Strategy	2022-AA40.4	Green	Distributed Working and Estate Rationalisation	Complete draft long term Caring for Ayrshire property strategy identifying planned lifespan for existing accommodation, to plan future investment & exit / disposal plan Q4 2022/23	Work underway to update PAMS and to review the demolition plan. Dedicated programme managers have been appointed to work with each of the three partnerships (NAHSCP, SAHSCP & EAHSCP) and acute services to develop future requirements for their respective services. External Healthcare Planners have been appointed to progress Caring for Ayrshire strategy.		Affordability around delivery of output strategy - reliant upon significant SG funding. Conflict around prioritisation of projects.	Ongoing engagement with all stakeholders including CIG leads. Adoption of SG data based modelling and prioritisation tool.	VS1	NHS A&A key priorities "Distributed Working & Estates Rationalisation" programme and "Caring for Ayrshire" strategy, to deliver a future proofed, service focussed and financially sustainable estate.	Supporting the delivery of a health service to better meet the needs of the communities of Ayrshire by improving flexibility and patient centred care and reducing ancillary property costs.
West of Scotland	Ayrshire and Arran	Sustainability and value	Realistic Medicine	2022-AA41	Green	Ensure the Realistic Medicine workstream informs the clinical redesign pathways within the Board	Attend Clinical Senate Ongoing	The Realistic Clinical Leads were invited to the first Clinical Senate, led by the Chief Executive and Medical Director. This will ensure the Realistic Medicine workstream informs the clinical redesign pathways within the Board. RM Team to be included in future meetings.		Service demands/constraints influence the impact and buy-in of Realistic Medicine priorities in the design of clinical pathways	Attendance and representation of RM at Clinical senate	VS2	Realistic Medicine / Value Based Health and Care	RM is at the heart of caring for Ayrshire redesign, and this will deliver person centred care, in the right place at the right time by the right person
West of Scotland	Ayrshire and Arran	Sustainability and value	Realistic Medicine	2022-AA42	Green	Becoming Improvers and Innovators	Realistic Medicine Workstreams and Collaborative Working Ongoing	The RM Team are constantly trying to come up with new ways in which we can highlight RM within the Board, they are also in many sub groups looking at new and progressive ways of working. The RM team support others who approach them with innovative ideas for improvement and try to link them in with the right people to further the ideas.		Staff weary due to current clinical constraints and pandemic fatigue/ weariness.	Bi-annual symposia, quarterly newsletter to stimulate innovation. Value Improvement Fund annual applications	VS2	Realistic Medicine / Value Based Health and Care	
West of Scotland	Ayrshire and Arran	Sustainability and value	Realistic Medicine	2022-AA42.1	Green	Becoming Improvers and Innovators	Progress School Mentoring Programme September 22	Year 1 of pilot with Robert Burns Academy, Cumnock completed. Students wishing to pursue NHS career offered one-to-one mentoring support for applications. Challenges due to ongoing Covid measures in school, and students not comfortable with email as communication method. We hope to expand into the 3 locality areas in 2022-23 academic year with face to face meetings in schools. Schools to be identified and RM Team liaise with Senior CDF.		Requires large amount of input from CDFs who change annually. May lose momentum and engagement due to Covid restrictions.	Maintaining regular contact with CDFs involved	VS2	Realistic Medicine / Value Based Health and Care	This programme aims to empower people from a young age to be involved in their healthcare journey and to learn about shared decision making so that they too can achieve person centred care
West of Scotland	Ayrshire and Arran	Sustainability and value	Realistic Medicine	2022-AA42.3	Green	Becoming Improvers and Innovators	Progress School Outreach Programme August 22	Scripts written, storyboards made, awaiting confirmation of filming date for "It's OK to Ask" videos school campaign. Continual liaison with Senior CDF regarding the mentoring programme and other school outreach events.		Large amount of time and effort to produce. School engagement required. CDF doctors change every year which may thwart momentum	Maintaining regular contact with CDFs involved	VS2	Realistic Medicine / Value Based Health and Care	This programme aims to empower people from a young age to be involved in their healthcare journey and to learn about shared decision making so that they too can achieve person centred care
West of Scotland	Ayrshire and Arran	Sustainability and value	Realistic Medicine	2022-AA42.4	Green	Becoming Improvers and Innovators	Establish Realistic Medicine Network and Champions January 22	A RM champions network has been established and is expanding. A quarterly newsletter has been set up and well received, which communicates info re current work by the RM to champions to allow info and ideas to be disseminated. It also contains a quarterly challenge for the RM Champions. Feedback on this to the RM team is encouraged. Regular meetings with the RM Champions.		Low numbers of RM champions and lack of engagement to promote and share RM aligned work/projects.	Encourage RM champions at every opportunity, quarterly newsletter with open communication to RM team.	VS2	Realistic Medicine / Value Based Health and Care	
West of Scotland	Ayrshire and Arran	Sustainability and value	Realistic Medicine	2022-AA43	Green	Promote and engage with clinicians and GPs on the Realistic Medicine agenda	First Hybrid Realistic Medicine Event June 22	An exciting programme has been pulled together for the event with attendance from both the Chief Executive and Medical Director who are providing presentations. Event has been widely advertised across the Board, including targeted at clinicians and GPs, and on social media. This hybrid event follows an extremely successful virtual event earlier in the year where the feedback suggested there was an appetite for a hybrid event.		Covid infection risk with face-to-face events. Encouraging attendees to register for either face-to-face or virtual attendance. Cancellation of speakers due to Covid.	Covid friendly conference with option for virtual attendance.	VS2	Realistic Medicine / Value Based Health and Care	
West of Scotland	Ayrshire and Arran	Sustainability and value	Realistic Medicine	2022-AA44	Green	Shared Decision Making	Develop/educate clinicians via NES Shared Decision Making training module on TURAS October 22	Further develop/educate clinicians via discussions at Clinical Directors' forum and via new TURAS module.

Liaise with Director of Medical Education to get this module included in FY1 Virtual Induction Passport. FYPD to get back with potential dates for educational programme commencing August. RM Clinical leads have been asked to speak at GP trainee education also. | | Lack of engagement from clinical staff to complete the TURAS module. Staff well-being following pandemic demands may contribute to fatigue and weariness to engage. FY educational programme co-ordinated by FY programme directors | Publicising SDM module via Medical bulletin/ twitter and raising awareness via the CD forum and Daily Digest | VS2 | Realistic Medicine / Value Based Health and Care | Direct promotion of shared decision making to patients allows them to understand how to get involved in the decisions relating to their care. It is hoped this multidirection approach will reach a wider audience of patients |
| West of Scotland | Ayrshire and Arran | Sustainability and value | Realistic Medicine | 2022-AA44.1 | Green | Shared Decision Making | Promote Shared Decision Making via Social Media Feed Ongoing | Shared decision making post previously shared on Twitter. The aim will now be to have monthly posts on Twitter and Facebook to maintain the focus. | | Maintaining momentum, interest and engagement with social media platforms. Low follower engagement. | A programme of regular posts and engaging material whilst sharing RM relevant posts from other HBs | VS2 | Realistic Medicine / Value Based Health and Care | Direct promotion of shared decision making to patients allows them to understand how to get involved in the decisions relating to their care. It is hoped this multidirection approach will reach a wider audience of patients |
| West of Scotland | Ayrshire and Arran | Sustainability and value | Realistic Medicine | 2022-AA44.2 | Green | Shared Decision Making | Promote and raise awareness of BRAN Questions:
(1) inclusion of BRAN questions in out-patient invitation letters September 22
(2) awareness training for clinicians re BRAN October 22
(3) promoting BRAN in waiting rooms and hospital clinics August 22 | Liaise with Head of Health Records to get BRAN (Its OK to ask) questions incorporated in the out-patient invitation letters. Letter has been redesigned and awaiting this to be approved.

Clinical Lead to attend the Clinical Directors' Forum to advise of plans to include BRAN questions in out-patient and posters within clinic areas. Awareness session with clinicians to be arranged. Quote awaited for printing of It's OK to Ask posters for dissemination through NHS Ayrshire & Arran. | | Targeting the public via outpatient letters requires sustainable resources to maintain. Clinical awareness to allow for BRAN conversations during consultations may cost more time and therefore discourage clinicians. Promotional posters require financed/ printed and displayed across health care buildings | Maintaining regular contact with Head of Health Records and relevant staff to maintain success of BRAN addition to outpatient letters. Clinical awareness to be publicised at CD forum. Poster displaying in all public facing clinical areas. | VS2 | Realistic Medicine / Value Based Health and Care | Direct promotion of shared decision making to patients allows them to understand how to get involved in the decisions relating to their care. It is hoped this multidirection approach will reach a wider audience of patients |
| West of Scotland | Ayrshire and Arran | Sustainability and value | Realistic Medicine | 2022-AA45 | Green | Reduce Unwarranted Variation | Develop Atlas Maps to identify and tackle unwarranted variation Ongoing | Clinical Leads liaise with NSD Team re the Atlas and have requested consideration of flash reports for new Primary Care Atlas. GP Atlas was advertised in June Medical Director's Bulletin. | | Atlas of Variation for Primary Care new and awareness currently low amongst GP practices. Secondary Care Atlas of Variation currently not being populated following pandemic redeployment | Examples of use of Atlas of Variation publicised as well as its existence for QIPs. | VS2 | Realistic Medicine / Value Based Health and Care | |
| West of Scotland | Ayrshire and Arran | Sustainability and value | Realistic Medicine | 2022-AA46 | Green | Reduce Harm and Waste | PPE management in line with NHS Ayrshire & Arran Eco Policy Ongoing | Liaising with Energy Manager regarding NHS Ayrshire and Arran Eco Policy. RM Champions have been challenged to look at eco policies within their departments, getting involved with PPE management. | | Lack of engagement due to pandemic apathy | Encourage Reduced Carbon Footprint projects. | VS2 | Realistic Medicine / Value Based Health and Care | |
| West of Scotland | Ayrshire and Arran | Urgent and unscheduled care | Mental Health Community | 2021-AA100 | Green | To increase capacity to undertake statutory Mental Health Officer (MHO) reports. To allow individuals to meet their own personal outcomes and support needs where legal intervention is required. | To provide a Guardianship assessment and reporting function.

Reduction in waiting times for service users. | Recruitment ongoing for MHO coordinator and additional MHOs to create dedicated workforce. | South Ayrshire HSCP | Resource through additional funding

Recruitment to posts | | UC1 | | |

Region	Area	Category	Service	Ref	RAG	Action	Deliverable	Progress	HSCP	Resource	Risk/Mitigation	UC	Programme	Outcome
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA101	Green	Enhance support to care home to enable more people to be supported within care home environment and reduce unnecessary admissions	Recruitment to posts. Reduce unnecessary admission to MH. Support the transfers of people admitted to acute. Work in conjunction with existing CHLNs, ANP and psychiatry colleagues to support patients and staff within the care home setting	Additional care home liaison staff are in post and offering support to care homes across South Ayrshire. Positive feedback received from both care homes and SW staff.	South Ayrshire HSCP	Resource through additional funding. Recruitment to posts. availability of community venues and facilities to see individuals		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA102	Green	Additional Mental Health Practitioners (MHP) to offer assessment and triage within GP practices to enable increased capacity of other MDT staff to focus on wider GMS contract activities.	Recruitment to posts. Assessment and triage of individuals at GP practice level. Developing a Pan Ayrshire model for 2022/23	Confirmation of additional SG funding has been received although not awarded to date. Consolidated PC team to bring together MHPs, CLPs and SHWs. Development of scaled up model to include range of treatment and support options being developed for 22/23.	South Ayrshire HSCP	Recruitment to posts. availability of community venues and facilities to see individuals		UC1	PCIP / Primary Care Urgent Care	Assessment and triage of people with mental health in GP Practices ensuring the right people and provided with the right support/service at the right time.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA105	Amber	To identify and address issues impacting on GMS service delivery / sustainability and understand any potential implications early.	Regular "check ins" with all practices to monitor the impact of Covid across general practice. Best practice shared for learning. 3 monthly review	There are a number of GP practices struggling with recruitment of GP's and workforce capacity issues. The Primary Care Team are meeting with these practices on a weekly basis to review and provide intense support to look at sustainability options. Practices Sustainability Oversight Group being established to provide focussed oversight for those practices in difficulty. This is Chaired by the Head of Service and also includes the Clinical Directors from each HSCP area to provide wider support to the primary care team.		Continued sustainability of GP practices while new GMS Contract is being implemented and practices work to re-mobilise.	Bi-monthly meetings with Practice Managers and PQLs to understand issues and risks to remobilisation. Weekly Welfare Checks to high risk practices. Programme of PLT (one afternoon bi-monthly) for service development and business planning for GP practices.	UC1	NHS Recovery Plan	Supports access and delivery of General Medical Services to patients ensuring the most vulnerable patients with the most urgent need are prioritised.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA106	Amber	Progress a digital programme to support the priorities identified by primary and community services to improve access for community practitioners and peoples of Ayrshire and Arran.	Providing Comm Pharmacy and Optometry access to digital portal March 23	Agreement reached for roll out programme. Current challenges being worked through with information governance and IT Security due to Pharmacies and Optometrists being Independent contractors and not NHS employed. Engagement with Digital Services colleagues to bring this to a resolution.		Dependencies on digital team providing implementation timeline.	Escalation to senior colleagues within Digital services via the Senior Manager for Primary Care Services	UC1	Digital Health & Social Care Strategy	Supports patients to receive improved continuity of care by community primary care providers able to access and share relevant information pertinent to a patient's healthcare needs.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA106.1	Green	Progress a digital programme to support the priorities identified by primary and community services to improve access for community practitioners and peoples of Ayrshire and Arran.	Roll out E-Consult to GP practices Mar 23	18 GP Practices are using this platform to support patient access. 1 Practice chose to close down the use of e-consult due to reduced clinical workforce. All 18 practices have participated in engagement sessions to review the use of e-consult and shared learning across practices. A patient experience questionnaire will also be explored to provide further feedback. Regular engagement sessions continue with practices to encourage the use of this digital platform.		Increased access 24/7 puts more pressure onto the practice, and all requests must be reviewed by a clinician. Until the new system is fully embedded practices may view this is an additional workload for GP Practices whilst running two systems. This has resulted in practices requesting to turn e-consult off periodically which is confusing for the public.	Ability to turn e-consult off when the practice is at a reduced workforce capacity.	UC1	Digital Health & Social Care Strategy	Increased uptake by General Practice will allow more patients to communicate with their GP Practice at a time convenient to them 24/7, for follow up from the practice within an agreed timescale.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA108	Green	Increase shared care, access to services and patient experience within Community Optometry.	Co-Management Service - Support additional eye disease being managed by Community Optometrists in conjunction with the Hospital Eye Service. March 23	Three new Optometric Advisors recruited and progressing various workstreams. The Eyecare Integration Group has been reformed and now has regular scheduled meetings. The group are working on expanding the current shared care model to hopefully include the screening of Juvenile Idiopathic Arthritis in community practices with other potential services being discussed such as Anterior Eye Conditions.		Securing funding to move to implementation. Potential lack of engagement either from acute services or community optometrists to progress	The integration group membership to be reviewed to ensure appropriate representation and leadership to support implementation	UC1	National introduction for co-management by Optometrists for more complex conditions.	Increased Shared care between community optometrists and acute services will support reduced waiting times allowing more eye treatments to be carried out in the community. This will also reduce the need for urgent referrals due to a patient's condition deteriorating whilst awaiting an acute appointment
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA109	Green	Work with General Dental Services to increase service delivery and remobilise following Covid-19.	Supporting Dental Practices to increase activity where possible Ongoing 2022/23	Activity levels since the relaxation of IPC guidance in April shows that Dental Practices in NHS Ayrshire and Arran have increased activity to 90% of pre pandemic income levels. Some practices are struggling to recruit Dentists, and therefore the National Activity as described at 2.1 on the Annual Plan, for Scottish Government to maximise recruitment and retention opportunities for the dental team from UK and international graduates will be essential in recovering the Dental Sector further.		PDS becoming overwhelmed should emergencies continue to increase.	Oral Health Improvement Plan NHSAA Oral Health Strategy 10 year Plan 2013-2023	UC1	Oral Health Improvement Plan NHSAA Oral Health Strategy 10 year Plan 2013-2023	Covid-19 highlighted the health inequalities children and families face, therefore during the pandemic food banks, community groups and schools were given oral health products such as toothbrushes, toothpaste etc. to support home tooth brushing and this will continue whilst dental practices work to recover to pre-Covid activity levels.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA110	Amber	Develop the concept of community monitoring and investigation hubs.	Identify what range of investigations and procedures could transfer from being delivered in GP surgery or a hospital outpatient setting.	Concept is supported due to different ways of working during the pandemic. Development groups are established to take forward by September 22.		Failure to get agreement on services to be delivered as well as identify suitable sites leading to inability to implement community hubs resulting in disparate access to services across Ayrshire.	Discussion required with key colleagues across the wider system to ascertain timescales and agree way forward.	UC1	PCIP / Caring for Ayrshire / Right Care, Right Place, Right Time / Care and Wellbeing Programmes	This will support people to access services closer to home rather than attend an acute setting for specialist care. This will positively impact patients with reduced mobility or multi co-morbidities where travel can be difficult.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA111	Amber	Implementation of contractual elements of the new 2018 GMS Contract	Implement Level 1 Pharmacotherapy Service for full task transfer. March 23	Pharmacotherapy is being delivered to all Practices across Ayrshire & Arran, with all 53 Practices having full or partial access to this service. Full task transfer is difficult to measure which has been recognised across all Health Boards. Work on implementing Level 1 Pharmacotherapy Service for full task transfer will continue be taken forward for completion throughout 2022/23. As at June 2022, a total of 103.3WTE Pharmacotherapy staff have been provided to General Practice through the PCIP.		Ability to identify additional professional staff to fill the new roles within the PCIP. Some GP practices unable to accommodate additional workforce capacity due to infection control guidance and increased appointment times reducing capacity. There are also growing concerns regarding accommodation within GP Premises to be able to accommodate staff.	Work closely with Service Leads to identify recruitment risks. Monitor allocation of resource to practices. Utilise whole system workforce planning to forecast recruitment predictions. Following recent PCIF discussions, measures in place to look at added resilience within the service and introduce new roles to support with the task transfer and aid succession planning to ensure the service is more resilient.	UC1	PCIP / Caring for Ayrshire	The aim through the reformed primary care service is not just to extend life, but aim to reduce the time spent in poor health. Implementing the new GMS contract is an opportunity to mitigate health inequalities where possible. The purpose of the work is to help people access the right person, in the right place, at the right time in line with the Scottish Government Primary Care Vision and Outcomes. Including: • Maintaining and improving access • Introducing a wider range of health and social care professionals to support the Expert Medical Generalist (GP) • Enabling more time with the GP for patients when it's really needed • Providing more information and support for patients.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA111.1	Amber	Implementation of contractual elements of the new 2018 GMS Contract	Roll-out serial prescribing service to support Level 1 Task Transfer. March 23	Practices to participate in a QI project to progress and improve on the current systems and processes in place to ensure we are on target for task transfer. All GP practices across Ayrshire & Arran are 'live' with serial prescribing. In total there are 26,711 patients in Ayrshire and Arran currently receiving serial prescriptions. This is just over 12% of all patients on repeat medicines.		Recruitment to posts for key staff will be vital in order to deliver this additional work. Engagement of some practices to work with the service to implement changes to ensure safe transfer.	Monitor the recruitment of staff within the service. Monitor the engagement of practices and progress of improvements. Identify any GP Practices that require further support at an early stage.	UC1	PCIP / Caring for Ayrshire	The aim through the reformed primary care service is not just to extend life, but aim to reduce the time spent in poor health. Implementing the new GMS contract is an opportunity to mitigate health inequalities where possible. The purpose of the work is to help people access the right person, in the right place, at the right time in line with the Scottish Government Primary Care Vision and Outcomes.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA111.2	Green	Implementation of contractual elements of the new 2018 GMS Contract	Provide all practices with a CTAC service. March 23	52 of the 53 Practices now have access to CTAC resource. Further recruitment is underway to provide resilience within the service. There are some challenges with accommodation which is making it difficult to provide all practices with their full CTAC allocation. A test of change is being explored in the North and South Ayrshire HSCP for CTAC hub model. This test of change will support those practices with accommodation issues. As at June 2022, a total of 45.8WTE CTAC nurses and 19.3 HCSWs have been allocated across 53 GP Practices in Ayrshire. In addition to this there are now 6 Practice Educator's aligned to the CTAC service to support training and development of the nursing workforce. This is split across all 3 HSCP's and are fixed term posts for 2 years.		Lack of accommodation within GP practices due to increased infection control and social distancing leading to practices being unable to access CTAC staff resulting in inequitable patient access to services. Due to the volume of MDT's being allocated to GP Practices, space is becoming a real issue and concern.	Discussions ongoing with practices to identify issues and proposed solutions. Implement locally models where GP practices can't accommodate additional staff. Work to identify community hubs (as per above deliverable) or shared resource as a medium term measure. Wider planning with HSCPs in line with Caring for Ayrshire for new improved premises. Practice Educator role to provide training and support to CTAC staff across all three HSCPs	UC1	PCIP / Caring for Ayrshire	The aim through the reformed primary care service is not just to extend life, but aim to reduce the time spent in poor health. Implementing the new GMS contract is an opportunity to mitigate health inequalities where possible. The purpose of the work is to help people access the right person, in the right place, at the right time in line with the Scottish Government Primary Care Vision and Outcomes. Including: • Maintaining and improving access • Introducing a wider range of health and social care professionals to support the Expert Medical Generalist (GP) • Enabling more time with the GP for patients when it's really needed • Providing more information and support for patients.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA111.3	Green	Implementation of contractual elements of the new 2018 GMS Contract	Provide practices with additional professional roles to provide a MDT approach to care enabling GPs as Expert General Medicalist. March 23	Discussions have take place with HSCPs to understand priorities and recruitment plans for implementation during 2022/23. This includes additionality and resilience for all additional professional roles. As at June 2022, a total of 12.2wte Advanced MSK Physios are in place, 28.9 wte Mental Practitioners and 20.1wte Community Link Workers are in post to support General Practice across Ayrshire and Arran.		Lack of accommodation within GP practices due to increased infection control and social distancing leading to practices being unable to access additional MDT staff resulting in inequitable patient access to services.	Discussions ongoing with practices to identify issues and proposed solutions. Implement locally models where GP practices can't accommodate additional staff. Work to identify community hubs (as per above deliverable) or shared resource as a medium term measure. Wider planning with HSCPs in line with Caring for Ayrshire for new improved premises.	UC1	PCIP / Caring for Ayrshire	The aim through the reformed primary care service is not just to extend life, but aim to reduce the time spent in poor health. Implementing the new GMS contract is an opportunity to mitigate health inequalities where possible. The purpose of the work is to help people access the right person, in the right place, at the right time in line with the Scottish Government Primary Care Vision and Outcomes. Including: • Maintaining and improving access • Introducing a wider range of health and social care professionals to support the Expert Medical Generalist (GP) • Enabling more time with the GP for patients when it's really needed • Providing more information and support for patients.

West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2021-AA111.4	Amber	Implementation of contractual elements of the new 2018 GMS Contract	Provide an urgent care service to General Practice. March 24	Each HSCP are currently identifying how they will deliver Urgent Care within their HSCP and plans are currently being put forward for spend in 2022/23.		Funding will be key to allow this workstream to grow and develop.	Establish a school of Primary Care model to look at 'grow your own models' for first point of contact practitioners.	UC1	PCIP Caring for Ayrshire RUC	The aim through the reformed primary care service is not just to extend life, but aim to reduce the time spent in poor health. Implementing the new GMS contract is an opportunity to mitigate health inequalities where possible. Changes to how urgent care services are accessed may positively impact patients who have reduced mobility or multi co-morbidities where travel can be difficult as there will not be a need to travel and the infection risk will be reduced.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Unscheduled Care	2021-AA122.6	Suspended	Improve discharges across the site and support the management of patients delayed awaiting a Care Home Place or Care at Home Package	A joint project with Scottish Ambulance Service (SAS) to pilot taking all patient ambulance bookings on site negating the need for ward staff to spend long periods booking transport via the West of Scotland booking line.	This has not been progressed to date - will be picked up at a later date.				UC1	Winter Preparedness	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2021-AA135	Green	Provide a Covid-19 Therapeutic pathway to patients with worsening Covid symptoms in order to prevent deterioration and potential acute admission	Recruit a small team for 12 month period to sustain delivery of a single pathway in A&A June 22	Successfully implemented in December 21. With a total of 539 patients receiving Covid Therapeutics since that time. Only 3% of patients treated have then entered into the acute system. This service will continue to be provided during 2022/23.		Unable to secure workforce.	Working with skillmix of staffing teams to identify sustainable workforce plans and peripatetic support.	UC1	RUC Covid 19 Remobilisation & Recovery	Sustainability of providing treatment to our most vulnerable patients with worsening Covid symptoms reducing the need for secondary care intervention.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Infection Prevention & Control	2021-AA45	Amber	Re-establishment of Core IPCT Service and compliance with national IPC standards, National Infection Prevention and Control Manual and National Standards and Indicators (Reduction in CDI, SABs and ECB's)	Implement the interim planned programme for 2022-23 March 23	IPCT resource continues to support Covid outbreaks within acute and community hospitals. Re-mobilisation of audit and training has progressed. Recruitment continues to prove challenging. The interim planned programme has been developed for the year 2022-23 and will remain a live document with the ability to react to changes in Covid guidance.		Unknown prevalence of Covid. Recruitment due to limited IPC trained workforce nationally	Continue to work collaboratively with external agencies such as ARHAI and SG to highlight the impact of Covid and recruitment challenges on IPC service	UC1	National IPC Standards, National Standards and Indicators and the National Infection Prevention and Control Manual	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Inpatients	2021-AA59	Amber	Sustaining safe inpatient service delivery well in excess of 85% predictor.	Ensuring safe staffing levels to meet service need in excess of planned activity levels and with increased acuity. With exception of Covid-19 related absence maintaining staff absence within 22.5%. No requirement to board persons out of area.	Bed occupancy in admission wards remains in excess of 90%, 95% for Older Adults. As a result waiting lists are required to prioritise admission while retaining some capacity for urgent emergency admissions. Improvement in overall staff absence through month of May and June compared to previous periods, have remained within 22.5% absence rate excluding Covid. Despite bed pressures have not required to board anyone out of area.	North Ayrshire HSCP	Adverse incident of person in community or inappropriate care setting awaiting psychiatric inpatient admission. Risk of poor clinical outcomes, patient experience due to inadequate staffing levels/skill mix. Reputational risk if require to board person out of area, poor care experience	Bed management processes to prioritise admission referrals and identify beds for unavoidable admissions. Focus on discharge from admission and recording of Delayed Discharges for review at Discharge Liaison Groups. Generation of contingency plans including internal boarding to ensure beds available for urgent admissions. Supporting staff via Promoting Attendance Policy to sustain/improve attendance at work. Timeous recruitment to vacant posts. Daily huddle to deploy available staff to best effect - look at next 48 hour demands for early escalation of shortages. Process for reporting escalation when under exceptional pressure -beds and/or staffing. Ensuring responsible rostering practices.	UC1	Caring For Ayrshire, NHS A&A People Strategy, Mental Health Act, Criminal Procedures Act, Mental Health Strategy, Ayrshire and Arran Discharge Planning Agreement, NMC Code of Conduct	Persons requiring psychiatric inpatient assessment/treatment will receive the right care at the right time by a competent workforce as close to home as possible
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Inpatients	2021-AA60	Amber	Managing risk of Covid-19 outbreak within MH inpatient setting.	Regularly reviewed Operational Guidance to support staff to manage persons on admission until Covid-19 status known, symptomatic persons and positive cases. Minimised risk of creating outbreak by uncontrolled mixing of asymptomatic Covid positive person after admission. Effective management/containment of person symptomatic/positive to avoid outbreak. Wards being closed due to outbreaks affecting availability of beds and not being available for admissions.	As with the majority of health care settings there have been outbreaks across inpatient areas and persons identified through on admission screening as being Covid positive. Without exception outbreaks have been well controlled in 2022 with little spread after the initial case was identified - test amount to effective Infection Control practices.	North Ayrshire HSCP	Loss of service provision due to wards closed to admission due to outbreak = increased chance of adverse event if unable to admit someone. Risk of poor clinical outcomes, patient experience due to inadequate staffing levels/skill mix. Service user/staff health impact if acquire Covid in hospital. Longer term inavailability of staff if develop Long Covid. Risk of legal/criminal processes if significant harm due to hospital acquired Covid infection - financial and statutory Increased financial cost of staffing wards to ensure safe numbers of large number of staff are absent.	Asymptomatic testing on admission and at Day 5. Offering longer term patients vaccination as per guidance. Encourage staff uptake of vaccine. Monitoring inpatients for Covid symptoms. Ongoing adherence with Infection Control guidance with regards to hand hygiene practices and use of PPE	UC1	NHS Ayrshire and Arran Infection Control Standards, NHS A&A Covid Testing Strategy	Persons requiring psychiatric inpatient assessment/treatment will receive the right care at the right time by a competent workforce as close to home as possible. Person will not come to harm as a result of inpatient admission.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health CAMHS	2021-AA62	Amber	Development of Unscheduled Care Pathway for Children & Young People (Workforce)	Workforce in place and aligned to roles July 22	Significant proportion of Charge Nurse Workforce recruited and Team Leader in post. Recruitment to Band 5 posts in July in preparation of full 7 day service being on line 7am - 9pm in November 22	North Ayrshire HSCP	Delays in recruitment Accommodation capacity	Accommodation requests being considered	UC1	National Specification for CAMHS 2020 National Specification Neurodevelopment 2021 The Promise GIRFEC	Better access across the 7 days of the week for children and young people presenting with risk or psychological distress.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health CAMHS	2021-AA63	Amber	Development of Unscheduled Care Pathway for Children & Young People (Care Pathways)	Pathways established February 23	Working with Paediatric Services and Adult Services to establish pathways and synergy between services	North Ayrshire HSCP	Pathways between services - No local beds and dependence upon other services, namely Skye House (Regional) Woodland View Adult and Crosshouse Paediatric Services	Full engagement with Paediatric and Adult Services - Request for bed capacity in Woodland View with specific CAMHS ward being sought	UC1	National Referral to Treatment Targets Psychological Therapies National Specification for CAMHS 2020 National Specification Neurodevelopment 2021 The Promise GIRFEC	Better access across the 7 days of the week for children and young people presenting with risk or psychological distress.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health CAMHS	2021-AA64	Amber	Reconfiguration of CAMHS Unscheduled Care Neuro Services Community CAMHS	Workforce in place and aligned to roles February 23	Organisational change processes underway, Team Leaders aligned and Admin function developed to meet needs.	North Ayrshire HSCP	Accommodation capacity HR Function capacity Org Change process and Staff Side contribution	Regular meetings planned with the APF and HR	UC1	National Referral to Treatment Targets Psychological Therapies National Specification for CAMHS 2020 National Specification Neurodevelopment 2021 The Promise GIRFEC	Better access across the 7 days of the week for children and young people presenting with risk or psychological distress.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health CAMHS	2021-AA65	Amber	Reduce waiting times & backlog	Reaching optimum capacity of referrals to providers by August 22	External contract agreed with two key providers to add increased capacity for assessment, diagnosis and treatment	North Ayrshire HSCP	Capacity within external providers and internal systems being able to get enough referrals over to externals. Families preferring to wait for CAMHS	Working with providers and monitoring contract on monthly basis.	UC1	National Specification for CAMHS 2020 National Specification Neurodevelopment 2021 The Promise GIRFEC	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Psychological Therapies	2021-AA66	Green	Provision of Psychological Services to Staff Wellbeing.	Monthly data activity reported to SG regarding number individuals seen, along with alignment and demographic. Increase in provision of group work and tier 1 – 2 level interventions to ensure capacity of the psychology workforce. Provision of reflective practice sessions to staff teams/wards to continue across all sectors.	Reflective practice sessions from within the Psychology component of staff wellbeing, both covering acute, community and Primary Care/HSCP. Recruitment of an assistant psychologist has allowed for research project to commence. Back fill for maternity leave has commenced, meaning limited impact on service. Group work development continues in conjunction with Staffcare colleagues. Wider wellbeing work continues through Consultant supporting the wellbeing and trauma champions within the HSCP. Wellbeing Hubs have been created in the three main hospitals in Ayrshire, with a remit of providing supportive and therapeutic space for staff.	North Ayrshire HSCP	Short term funding of 8a post expires March 23.	Psychology has funded a temporary bd7 post PT to cover extension being discussed to cover loss of 8a role.	UC1	A&A Health, Safety and Wellbeing Everyone matters, 2020; Health Workforce Vision, SG, 2013.	

West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Psychological Therapies	2021-AA67	Green	Maternity and Neonatal Psychological Interventions (MNPI) and Perinatal CMHT service developed from dedicated SG funding.	MNPI recording of national outcomes has commenced with consultation with national Psychology group. Local collaboration with IT and Information Governance to ensure adequate data capture and online case-note taking systems are in place.	Both services have reached full staffing, although vacancies have arisen through natural attrition within nursing and OT. Further developments have occurred in terms of the creation of an Infant Mental Health service, which will sit alongside both teams. Both Psychology and Nursing have recruited, with start dates approximately September 22. OT and admin recruitment is in progress.	North Ayrshire HSCP	OT and nursing vacancies	Both posts will be advertised in the coming weeks; consideration of consolidation of OT post with IMH to increase attractiveness	UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Psychological Therapies	2021-AA68	Green	Intensive Care Unit Psychology Service in line with the national Cossette Report recommendations.	The service will formalise the provision of psychological services to the population who have been admitted to ICU, with initial aims linked to the recommendations of the Cossette Report.	Continued work has ensured that approximately 75% of the hospitalised Covid population have been contacted regarding their experiences and needs, in line with recommendations from the Cossette Report. This has been achieved through the support of a fixed term assistant and dedicated administrative cover. It is hoped this will reach 100% by end of 2022. SG funding is fixed term until March 23 but Lead Partnership has given support to recruit to a permanent contract for the Lead Psychology post.	North Ayrshire HSCP	Loss of assistant due to natural attrition	Funding for assistant will continue to be provided from within core budget for Psychological Services.	UC1	Cossette Report	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Psychological Therapies	2021-AA69	Green	Neurodevelopmental Strategy and Empowerment Team.	To provide a cost-effective Neurodevelopmental Strategy and Empowerment Team coordinating a robust online and physical information service, the Considerate Communities award scheme and pre/post assessment programme. This work will be in partnership with clinical services, 3rd Sector and government agencies.	Service delivery is now underway. Appointments to the Programme Lead and Project Lead posts have been made. Website will be launched imminently. Links with local clinical and 3rd Sector services established and a rolling programme of training will be available in the coming months. Awaiting identification of physical base for team to ensure wide accessibility for the community and to allow the Service to meet all its key performance indicators.	North Ayrshire HSCP	Lack of availability of physical base.	Mitigation of absence of physical base will be made through temporary booking of meeting/ training spaces in the community and working from home for members of the Team. However, this does limit accessibility of the Service for members of the community.	UC1	Scottish Strategy for Autism Ayrshire & Arran Strategy for Autism Scottish Government Learning/Intellectual Disability & Autism: Transformation Plan	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Psychological Therapies	2021-AA70	Green	External service commissioning for neurodevelopmental assessments within Community Paediatrics.	Procure external provider. Create data Protection Impact Assessment. Monthly feedback regarding case completion and impact upon waiting lists within Community Paediatrics	Patients on Community Paediatrics Psychology neurodevelopmental waiting list are now being sent to external providers. Pathways for and processes have been developed and refined and are working well.	North Ayrshire HSCP	Lack of capacity in external providers.	Communication with external providers to ensure capacity is sufficient to meet service needs. Preparation to engage with additional providers if required.	UC1	SG waiting times guarantee for Mental Health Services.	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Psychological Therapies	2021-AA71	Green	To clear waiting time backlogs by March 2023 as specified in the MH Recovery and Renewal Funding with additional Psychological Therapies staffing resource from dedicated allocation.	Appoint to vacancies within established posts. All posts to sit within our established clinical multi-disciplinary teams where there is clarity on the focus of their additionality and where there are established referral criteria and pathways. Local data analysts, with support from SG data analysts, to develop a waiting times trajectory plan to identify requirements to achieve and sustain 90% waiting time compliance for PT by March 23.	The SG funding allocations have been utilised. New postholders will be appointed through 2022. Recruitment to vacancies within established posts is being progressed through local and national recruitment drives and reconfiguration of posts to increase attractiveness in the current competitive context. Awaiting confirmation of further SG funding for PT to progress identified priorities for backlog and unmet need. Trajectory plan, using PHS national model, has been applied to two clinical services. Expansion of the trajectory plan for the whole service is currently being developed. Current waiting time compliance is 90.6% May 22. This additionality is not sufficient to meet unmet need in clinical service areas where demand is managed relative to available capacity.	North Ayrshire HSCP	Inability to recruit to new and vacant posts to develop the required staffing capacity to achieve and sustain waiting time compliance.	Reconfiguration of posts to improve attractiveness - permanent contracts, variation in contracted hours, skill-mix, banding, split-posts	UC1	Psychological Therapies Waiting Times standard. MH Recovery and Renewal Fund.	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2021-AA72	Green	Prioritise recovery from drugs and alcohol to significantly improve outcomes for service users	Comprehensive clinical assessment & recovery focussed treatment support to clients with a range of alcohol and drug problems including mental, sexual and physical health related issues. Involved in alcohol detox, ORT and medication monitoring, RADAR, Duty. General waiting times targets will be met. Implement MAT standards in line with Drug Death Task Force Investment. August 22	RADAR is now operational and has shown a 15% increase in referrals to treatment services.	East Ayrshire HSCP	Recruitment and retention of staff. Infrastructure Lack of suitable premises/infrastructure to support delivery.	Team remodelling to support recovery. Investment in line with Caring for Ayrshire.	UC1	East Ayrshire ADP Strategic Improvement Plan 2020-24 New Treatment Standards (MAT) for Drug Users Everybody Matters - Preventing Drug Related Deaths: A Framework for Ayrshire & Arran 2018-2021 East Ayrshire HSCP Strategic Plan 2021-2030	People affected by drugs and alcohol are some of the most marginalised in society. Supporting them into treatment support services provides early access to the relevant support service enabling change to begin and making recovery possible.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2021-AA73	Green	Provide Trauma Training Addictions Services – Decider Skills.	Purchase external training to provide trauma training for new staff who have and will be joining the team in keeping with MAT Standards. Will be arranged for later in the year November/December 21 when all new staff have joined the team.	Trauma training continues to be delivered as new staff join the team. East Ayrshire HSCP are identifying a key post holder to continue to drive improvements.	East Ayrshire HSCP	Team pressures and vacancies could result in lack of focus.	Dedicated post holder will support on-going key deliverables are met.	UC1	East Ayrshire ADP Strategic Improvement Plan 2020-24 New Treatment Standards (MAT) for Drug Users Everybody Matters - Preventing Drug Related Deaths: A Framework for Ayrshire & Arran 2018-2021 East Ayrshire HSCP Strategic Plan 2021-2030	Many people who have drug and alcohol issues experience multiple complex traumas. This impacts on their ability to manage their lives effectively and so lessens the opportunities available to them in terms of training, employment which contribute towards improved outcomes and less inequalities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA74	Amber	To support people with severe and enduring mental health problems and introduce Physical Health Checks with patients attending Depo clinics.	Support improved physical health for people with severe and enduring mental health problems. Less crisis admissions to acute care.	Job description is going through job evaluation. Recruitment will follow.	East Ayrshire HSCP	Delays in recruitment.	Primary and acute care support till posts holders are in place.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Framework for supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic 2021	The inter-relationship between poor mental health resulting in poor physical health and vice versa is well evidenced. Living with these diagnoses results in reduced opportunities and in some instances premature death. Supporting improved physical health will help to reduce the inequalities gap for this population.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA75	Amber	To provide early intervention for mental health and wellbeing within the community through support to GP Practices.	Rapid access to mental health support. Self- management. Early intervention to prevent deterioration of symptoms.	Mental health practitioners in place in all GP practices. Self help workers are aligned to promote self management approaches.	East Ayrshire HSCP	Short term funding for 3 self help worker posts	Considering other sources of funding to minimise impact on outcomes.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Framework for supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic 2021	Supporting early intervention and prevention in Primary Care reduces stigma often associated with mental health problems. Improving access for new people presenting enables the right support at the right time early in the person's journey.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA76	Red	To increase capacity to undertake statutory Mental Health Officer (MHO) reports. To allow individuals to meet their own personal outcomes and support needs where legal intervention is required.	To provide a Guardianship assessment and reporting function. Reduction in waiting times for service users.	Significant pressures on MHO staffing compliment creating risks in relation to fulfilling statutory responsibilities.	East Ayrshire HSCP	MHO recruitment/retention. Increase in volume and complexity of people requiring support from MHO. Disparity across the country in terms of remuneration leading to attrition.	Chief S/W dedicated focus to support improvement plan. Focussed recruitment drive around qualified S/W posts. Caseload management to free up capacity to support compliance with legislative requirements.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Mental Health (Care and Treatment) (Scotland) Act 2003	Adequate MHO capacity is required to ensure the rights of the individual are protected. Lack of capacity in this area jeopardises this and risks people with mental health, learning disability and addictions being subject to measures which are not person centred or proportionate.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA77	Green	Sustain and further develop the broad range of wellbeing supports and activity established through the Wellbeing Coordinator and associated resources.	Wellbeing Newsletter developed with information on wellbeing support and resources. Wellbeing Learnpro Module developed on workforce wellbeing. Mindfulness Course developed and delivered Lifestyle Medicine Project developed and delivered in partnership with Kilmarnock GP Practice. Training in mindfulness and self-care. Wellbeing Sessions undertaken with Independent Care Home Sector. 70 1:1 workforce wellbeing sessions undertaken since 1 April 2021. Finding Inner Calm Programme developed and extended to include Care Homes, HSCP, Educational Services.	Milestone targets achieved. Continued focus to embed the cross-cutting wellbeing partnership arrangements established during the pandemic to ensure continuity of legacy actions and maximise the opportunities for collaboration. Range of workforce wellbeing supports developed in response to winter and system pressures including: Community Wellbeing Hubs with access to restroom facilities to aid rest and recuperation for primary care and social care staff working in the community; First Aid for Mental Health programme developed targeting the primary care and social care workforce including the 3rd and independent sectors in collaboration with the EAC Health Working Lives Team; communication and promotional materials and resource packs produced and distributed; Finding Inner Calm and Mindfulness wellbeing interventions delivered to ensure workforce has full access to supportive wellbeing options.	East Ayrshire HSCP	Increased demand for wellbeing supports and interventions arising from workforce and system pressures. Impact of work-related stress on wellbeing and absence levels.	Ongoing monitoring and review. Oversight through HSCP SPG	UC1	CPP Wellbeing Delivery Plan 2021-24 East Ayrshire HSCP strategic plan 2021-2030 Covid-19 Recovery and Renewal Framework	Physical and psychological supports firmly focussed on proactive preventative action to support employees deal with workforce and system pressures
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA78	Green	To assist in the introduction of Trakcare within Adult MHS and to maintain the system when in place.	Develop system ensuring all referrals are actioned through E vetting. Develop audit and reporting procedures	All referrals actioned through E vetting and follow up appointments booked on Trak. Audit reports in progress and 18 week reporting progressing using a collation of data from databases and trak. 90 % Complete	North Ayrshire HSCP	Backlogs in getting outcomes and appointments etc onto the system in a timely manner due to staff absence.	Waiting lists are being scrutinised and any queries resolved promptly in conjunction with the project team. Meetings set up with team leaders and data analyst to familiarise them with the reports available.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Adult with Incapacity (Scotland) Act 2000	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health AHP	2021-AA79	Green	Reduction of waiting times to CMHT Occupational Therapy Service- to meet RTT target of 18 weeks.	Provision of OT assessment and interventions to individuals with mental health difficulties that impact on their independence in Activities of Daily Living.	Milestone target has been exceeded and work will continue to maintain	East Ayrshire HSCP	Non-recurring funding for 2 key OT posts which jeopardises the progress made leading to poor outcomes for people.	Consideration of alternative routes of funding to support maintenance of progress.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Framework for supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic 2021	Many people with severe and enduring mental health problems experience a significant impact on their ability to maintain their daily functioning. Lack of a dedicated focus around functional assessment and care planning to support improved outcomes will result in lack of opportunities for this population.

West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA85	Amber	Additional Mental Health Practitioners (MHP) to offer assessment and triage within GP practices to enable increased capacity of other MDT staff to focus on wider GMS contract activities.	Source Funding by 2nd quarter of financial year.\n\nProgress recruitment to ensure resource in place by end of financial year\n\nService that ensures an individual with mental health difficulties presenting at general practice can be seen by a MHP by beginning of new financial year (at latest, ideally within this current financial year).	Funding from Mental Health in Primary Care investment requested to uplift MHP numbers to previous business case, with additionality to cover for absences (akin to other primary care development funding).\n\nAwaiting SG feedback on allocation based on proposal submitted. In anticipation of funding, we have relevant paperwork completed to progress to recruitment ASAP.	North Ayrshire HSCP	Without full business case implementation with appropriate uplift there continues to be exponential demand on GP's for mental health concerns. As such, there is a risk of delay to assessment, duplication of effort, delay to treatment etc, until fully funded.	• Currently there are no mitigations that can be put in place, without having a negative impact on other practices.\n• Where possible, we have spread the MHP resource, primarily based on demand.\n• In partnership with East and South Ayrshire, we plan to recruit together to minimise risk of recruiting from same pool, and hopefully not depleting existing services. A publicised targeted recruitment drive would hopefully bring others from out with area.	UC1	Caring for Ayrshire\nPrimary Care Implementation Plan\nMental Health and Wellbeing in Primary Care	This will ensure that at any time an individual with mental health difficulties presenting at general practice can be seen by a MHP, this will ensure Right person, first time principle.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA86	Amber	To increase capacity to undertake statutory Mental Health Officer (MHO) reports. To allow individuals to meet their own personal outcomes and support needs where legal intervention is required.	(1) Recruit Staff for both parts of the service by 2nd quarter of the year.\n(1.1) Revised MHO Service will include Guardianship reviews across North Ayrshire Partnership, this and guardianship applications will be the initial focus of this Team.\n(1.2) Revised Care Management Team, will review care and care provision of service users and work with care providers to ensure service users are receiving the care they require.	After a successful pilot in North Ayrshire it was agreed that the Mental Health Social Work Team would separate into 2 Teams – Mental Health Officer Team and Social Work Care Management Team.\n\nFunding has now been provided by North Ayrshire Health & Social Care Partnership to ensure the sustainability and deliverability of this new model.\n\nWhilst navigating recruitment processes, Agency Social Work and MHO posts have been implemented (although to varying degrees of success)	North Ayrshire HSCP	Ability to recruit to posts	Adjustments to the MHO payment in North Ayrshire will hopefully attract social workers and MHO's from other areas and from training.\n\nConsideration of MHO training opportunities to ensure quantity, quality, and continuity of training.\n\nUtilisation of agency staff where possible, to plug gap until successful recruitment.	UC1	National Care Service\nMental Welfare Commission (regarding MHA and AWI Legislations)	The implementation of this new model will enable legislative timescales to be achieved and met, including Guardianship applications and Guardianship reviews, which will help delayed discharges and planning of care for the residents of North Ayrshire.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA87	Red	Referrals have increased into the service, additionality will ensure timely assessment and treatment of these individuals. Ability to respond to increased demand of CMH service. As such, there is a requirement to increase nursing staff to meet increase in demand and current deficit in capacity	Requirement to increase nursing staff to meet increase in demand and current deficit in capacity\n\nSubmit pressure bid highlighting shortfall in staff (8 WTE CPN's required to address current shortfall).\nComplete\n\nUpdated papers being submitted to PSMT with new risk mitigations.\nComplete\n\nFurther contingency planning arrangements enacted to ensure safety and wellbeing of staff and service users.\nOngoing	Recruitment still remains a challenge and have been unable to recruit to posts. No further forward in terms of staffing uplift.	North Ayrshire HSCP	1) Patient experience or outcome\n2) Staffing and competence\n3) Service / business interruption\n4) Objectives and projects\n5) Injury (physical and psychological) to patient's staff.\n6) Complaints / claims\n\nRisk is not mitigated fully at this time. Short term control measures have reduced some risk, but not of significance as such, risk has been entered onto risk register. Further control measures required to further mitigate risks without requested investment. Without this, we will be unable to stabilise core service.	Current control measures:\na) Reduced the frequency of assessments clinics. We are now at the point where our clinics just meet demand and these cannot be reduced any further.\nb) Appointment of a short-medium term CPN to carry out all triage activity.\nc) We have implemented 'Live documentation' this is to reduce work pressures in having to return to base and type up all notes.\nd) Reduction of duty hours to 9am-5pm, akin to core hours.\n\nLong Term control measures:\n1) There requires to be investment in CPN in terms of finance of new posts.\n2) There requires to be investment in CPN in terms of training and development.	UC1	The Scottish Government have recently engaged a piece of work regarding secondary mental health service, in which community mental health services will be included.	Parity of esteem is spoken about between, physical and mental health and tackling this Health inequality was paramount in government papers, however we are now seeing an inequity within Mental Health Services themselves, investment in specialist services has been the focus in recent years – however Core Service has not had parity in terms of investment resulting in inequality in care provision across the spectrum of MH care treatment.\n\nIf funding is delivered, these core services will be able to tackle the incoming increase in referrals (40% increase in recent years) that has resulted as we move out of the pandemic.\n\nNorth Ayrshire has extremely high social deprivation and as such inequalities abound. Investment will mean that those who require mental health care and treatment will have access to services at the right time from the right person.\n\nInvestment will also mean that those requiring same day care and intervention from core service will receive this.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Unscheduled Care	2021-AA92	Green	Redesign of Mental Health Urgent (Unscheduled) Care Service	Deliver a 24/7 Emergency Services Mental Health Pathway\nMay 22\n\nDeliver an Alcohol and Drug Liaison Service to operate 7 days\nJune 22\n\nDevelop a Mental Health Unscheduled Care Assessment Hub to be situated within Ward 7B, Woodland View. Awaiting outcome of option proposal. Likely to receive July 22.	Following securing further Action 15 monies all posts are filled.\n\nThe ESMHP went live from the 30th May 24/7.\n\nThe Alcohol and Drug Liaison Team (ADLT) currently delivering a 5 day service	North Ayrshire HSCP	The possibility that referrals to the Pathway may outstrip capacity, especially now that SAS can access the pathway.\n\nAccommodation requested for the Alcohol and Drug Liaison Team within Mental Health Unscheduled Care Service at Lister Street. If this is unsuccessful then service provision will be affected.	Monitor and review the data as well as review current workforce across the whole of Unscheduled Care MH to ensure that staffing is adequate to deliver the pathway.\n\nIf we are unable to secure accommodation we will have to utilise a blended approach for agile working. This could however have an impact on service response times.	UC1	Urgent and Emergency/Unscheduled Care\nRedesign of Urgent Care (Locally & Nationally)\nCaring for Ayrshrie	Parity of esteem between, physical and mental health
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2021-AA94	Green	Responding to increased demand for services and increased caseloads.	Exploring use of remote clinics in non-NHS venues, increasing Near Me uptake.\n\nDevelopment of outreach strategies and increased Naloxone provision	Increased number of clinical venues within the community to see individuals as part of MAT standards roll out.	South Ayrshire HSCP	Recruitment to posts, availability of community venues and facilities to see individuals		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2021-AA96	Green	Meet all 'Access to Treatment Time' Standards.	Service to continue to be adaptable, available and flexible in supporting new clients receive treatment appropriate to their recovery.\n\n90% of clients referred to commence treatment within 3 weeks\n\n100% of clients to commence treatment within 6 weeks	Complete and ongoing	South Ayrshire HSCP	Resource through additional funding\n\nRecruitment to posts		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2021-AA97	Amber	To support Addiction workers to work more agile.	Purchase laptops for community venues /facilities to provide addiction services (rather than in NHS Clinic Space).	Following review of existing equipment and technology it was identified that iphones offered more versatility either as connection option for existing laptop or for telephone/NearMe consultations in alternative community venues.	South Ayrshire HSCP	This equipment was ordered many months ago however supply issues have meant that they have yet to arrive.		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA98	Amber	Reintroduce range of therapeutic options.	Delivery of group based interventions:\nCreative group.\nIncrease number of individuals taking part in therapeutic groups	Group based interventions - some now up and running although roll out has been challenging due to limited community venues and suitable accommodation.	South Ayrshire HSCP	Resource through additional funding\n\nRecruitment to posts. availability of community venues and facilities to see individuals		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2021-AA99	Green	Increase range of treatment options and create capacity for wider service redesign.	Delivery of decider skills. Development and implementation of care pathways. Provide clinical assessment and treatment to people referred to CMHT/PCMHT	First decider skills group planned for September 2022	South Ayrshire HSCP	Resource through additional funding\n\nRecruitment to posts. availability of community venues and facilities to see individuals		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA47	Green	Reduce the number of drug and alcohol related deaths through the implementation of local plans and responses	Implement, evaluate and improve our delivery of the new Medication Assisted Treatment (MAT) Standards\nBy March 23	MAT Standards 1 is partially implemented (Rag status - Amber) whilst Standards 2 to 5 are fully implemented (Rag status - Green). New Improvement Plan to be agreed by August with MIST support team	North Ayrshire HSCP	Full MAT delivery - delays or inability to recruit to key posts since by June 2022, no confirmation received from the Scottish Government regarding MAT funding. Also challenges with HR timescales in job evaluation processes.	Work with the SG to transfer the MAT funding to HB and recruit to essential posts	UC1	Medication Assisted Treatment (MAT) standards: access, choice, support;\nScottish Drug Deaths Taskforce - Forward Plan (2021-2022)\nEvidence-Based Strategies for Preventing Drug-Related Deaths in Scotland - Our Emergency Response;\nImproving Scotland's Health - Rights, Respect and Recovery;\nNorth Ayrshire ADP - Preventing Drug Deaths Action Plan	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA47.1	Green	Reduce the number of drug and alcohol related deaths through the implementation of local plans and responses	Delivery of Alcohol Brief Interventions (ABI) and meet the national standard\nBy March 23	Engagement and processes in place with services across Priority and Wider Settings. Further ABI training made available over the next 3 months	North Ayrshire HSCP			UC1	Medication Assisted Treatment (MAT) standards: access, choice, support;\nScottish Drug Deaths Taskforce - Forward Plan (2021-2022)\nEvidence-Based Strategies for Preventing Drug-Related Deaths in Scotland - Our Emergency Response;\nImproving Scotland's Health - Rights, Respect and Recovery;\nNorth Ayrshire ADP - Preventing Drug Deaths Action Plan	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA47.2	Green	Reduce the number of drug and alcohol related deaths through the implementation of local plans and responses	Implement, evaluate and improve the new Non Fatal Overdose (NFO) response pathway\nBy March 23	NFO response pathway in place. Continuing to work with key partners, including the Scottish Ambulance Service, to improve the overall pathway.	North Ayrshire HSCP			UC1	Medication Assisted Treatment (MAT) standards: access, choice, support;\nScottish Drug Deaths Taskforce - Forward Plan (2021-2022)\nEvidence-Based Strategies for Preventing Drug-Related Deaths in Scotland - Our Emergency Response;\nImproving Scotland's Health - Rights, Respect and Recovery;\nNorth Ayrshire ADP - Preventing Drug Deaths Action Plan	

Region	Board	Category	Service	Ref	RAG	Objective	Action/Target	Progress	HSCP	Risks	Mitigation	Code	Strategy/Standards	Benefits
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA47.3	Green	Reduce the number of drug and alcohol related deaths through the implementation of local plans and responses	Continue to deliver training on Naloxone and continue to supply Naoxone to priority settings By March 23	Detailed Improvement Plan in place identifying key partners who could benefit from the roll out of Naloxone training and supply.	North Ayrshire HSCP			UC1	Medication Assisted Treatment (MAT) standards: access, choice, support; Scottish Drug Deaths Taskforce - Forward Plan (2021-2022) Evidence-Based Strategies for Preventing Drug-Related Deaths in Scotland - Our Emergency Response; Improving Scotland's Health - Rights, Respect and Recovery; North Ayrshire ADP - Preventing Drug Deaths Action Plan	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA47.4	Green	Reduce the number of drug and alcohol related deaths through the implementation of local plans and responses	Work with partner services to increase and improve the support for individuals with a 'Dual Diagnosis' By March 23	Updated 'Dual Diagnosis' Care Pathway is in the process of being signed off by key partner services. Plan is to deliver multi agency awareness sessions over the next year and to re-establish inter team Community Mental Health Team Alcohol and Drug Services clinical and support meetings.	North Ayrshire HSCP			UC1	Medication Assisted Treatment (MAT) standards: access, choice, support; Scottish Drug Deaths Taskforce - Forward Plan (2021-2022) Evidence-Based Strategies for Preventing Drug-Related Deaths in Scotland - Our Emergency Response; Improving Scotland's Health - Rights, Respect and Recovery; North Ayrshire ADP - Preventing Drug Deaths Action Plan	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA47.5	Green	Reduce the number of drug and alcohol related deaths through the implementation of local plans and responses	Deliver and meet the new 'Substance Use Treatment Target' 959 individuals will receive supportive treatment in North Ayrshire By April 24	Measures in place, including access to MAT, to ensure an increase to the number of people in protective treatment.	North Ayrshire HSCP			UC1	Medication Assisted Treatment (MAT) standards: access, choice, support; Scottish Drug Deaths Taskforce - Forward Plan (2021-2022) Evidence-Based Strategies for Preventing Drug-Related Deaths in Scotland - Our Emergency Response; Improving Scotland's Health - Rights, Respect and Recovery; North Ayrshire ADP - Preventing Drug Deaths Action Plan	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA48	Green	Ensure quick access to treatment for individuals with alcohol and drug problems by meeting the national 'Access to Treatment' waiting times Standard	Ensure that 90% of individuals referred for alcohol and/or drug treatment commence treatment within 3 weeks of referral; By March 23 Ensure that 100% of individuals commence treatment within 6 weeks By March 23	Individuals receiving quick access to treatment. Most recent verified data confirms that 99% of individuals were commenced on treatment within 3 weeks and 100% of individuals were commenced on treatment within 6 weeks.	North Ayrshire HSCP			UC1	National 'Access to Treatment' Standards	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA49	Amber	Support implementation of the Alcohol and Drugs Partnership Strategic Plan 2020-24	Early intervention for individuals, families and communities to prevent issues from arising. Promotion of recovery. Reduction in stigma. Reduction in trauma.	Good progress around implementation of MAT Standards 1-5. Further progress being made in relation to progressing MAT 6-10. Key post holder being recruited to support anti-stigma approaches across East Ayrshire HSCP. Scale up of local grass roots funding has supported more people with lived experience being able to lead and direct innovative approaches to recovery. Feedback from lived experience representatives is positive in supporting people to get support early in their journey.	East Ayrshire HSCP	Issues with recruitment and retention jeopardises the progress with MAT 1-5. Additionally further emphasis is required from Primary Care and Justice services to promote compliance with MAT Standards in these settings.	Support from HR and scrutiny to minimise recruitment delays. Strategic groups established to ensure momentum in Primary Care and Justice settings to support MAT delivery.	UC1	East Ayrshire ADP Strategic Improvement Plan 2020-24 New Treatment Standards (MAT) for Drug Users Everybody Matters - Preventing Drug Related Deaths: A Framework for Ayrshire & Arran 2018-2021 East Ayrshire HSCP Strategic Plan 2021-2030	People affected by drugs and alcohol are some of the most marginalised in society. Supporting them into treatment support services provides early access to the relevant support service enabling change to begin and making recovery possible.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Addiction	2022-AA50	Amber	Utilise MDT approach to increase access to residential support for Drugs and Alcohol Services	Ready access to residential rehabilitation places. Targeted,person centred approach to lifestyle change. Retention in residential programme. Improved outcomes for individuals following placement.	S/W post has been recruited to. Referrals are being processed. Contracting agreements are being developed to support placements and demonstrate robust model of support and effective support outcomes.	East Ayrshire HSCP	Small numbers of individuals seeking residential rehab placements. Inability to meet national target, approx 7 per annum.	Supporting staff to consider individuals seeking residential support options. Marketing to support uptake.	UC1	East Ayrshire ADP Strategic Improvement Plan 2020-24 New Treatment Standards (MAT) for Drug Users Everybody Matters - Preventing Drug Related Deaths: A Framework for Ayrshire & Arran 2018-2021 East Ayrshire HSCP Strategic Plan 2021-2030	Access to residential rehabilitation for some people using drugs and alcohol is an essential element to support improved outcomes and recovery some individuals. Lack of access to this type of support has been an inequalities issue recognised by SG hence new, welcomed investment.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health AHP	2022-AA51	Green	To support the vision from the 2018 General Medical Services Contract (Scotland) and recent MOU (2021) for GP Practices to receive additional professional services, GP practices will be supported by an Occupational Therapist. The ambition is to maximise the contribution of Occupational Therapists in providing earlier interventions to people with mental and/or physical health needs. The programme will also enhance the Occupational Therapy Frailty Pathway to identify people in mild to moderate stages of frailty; and to work with individuals proactively to maintain or improve levels of frailty.	Occupational Therapists will be based or closely aligned within practices providing assessment and interventions for individuals with mental and / or physical health and/or frailty needs who are experiencing an impact on their occupational performance to enable independence and prevent further decline for individuals, at the right time and in the right place.	Recruitment supported via the funding of Permanent posts has been successful. Funding was secured via action 15 (3 posts) and the South Ayrshire HSCP (10 posts). Recruitment is ongoing for a further 2 posts. Engagement with practices across Ayrshire is ongoing with sessional work commenced across 11 of the 15 practices within South Ayrshire. Work will continue to provide coverage to all GP Practices within the South Ayrshire partnership.	South Ayrshire HSCP	Recruitment challenges and ability to fill posts Service pressures and ability to meet deliverables	For all areas continue to explore innovative ways to recruit and remobilise services post Covid.	UC1	Mental Health Strategy 2017-2027 South Ayrshire HSCP strategic plan 2021-2030 Framework for supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic 2021 Caring for Ayrshire	AHPs are able to achieve earlier intervention and see patients right place, right time to enable more positive patient outcomes.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health AHP	2022-AA52	Amber	To meet the ongoing demands of the AHP service to improve patient outcomes and deliver the right care in the right place by the right person	Secure funding for permanent posts Complete Progress recruitment Ongoing	Permanent funding received from North Ayrshire HSCP and agreement to recruit to posts on permanent basis which has been successful with the exception of Speech and Language Therapy. Have reviewed role and will go back out to recruit on amended role with greater confidence to recruit.	North Ayrshire HSCP	Recruitment challenges and ability to fill posts Service pressures and ability to meet deliverables	For all areas continue to explore innovative ways to recruit and remobilise services post Covid.	UC1	NAHSCP Strategic Plan Caring for Ayrshire	AHPs are able to achieve earlier intervention and see patients right place, right time to enable more positive patient outcomes.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health CAMHS	2022-AA53	Green	Delivery of National Secure Adolescent Inpatient Services (NSAIS) "Foxgrove"	Pathways agreed Q3 2022/23 Workforce agreed and in place Q4 2022/23 Unit Operational Q4 2022/23	Recruitment delayed due to NSD	North Ayrshire HSCP	Delays in recruitment Referrals NSD Decision making	Regular stakeholder meetings	UC1	Mental Health Strategy 2017-27 Child & Adolescent Mental Health Services: national services specification	Children and adolescents will be provided with the complex mental health care and support services they need within an appropriate environment in Scotland
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health CAMHS	2022-AA54	Green	Prevent admission of under 18s to Intensive Psychiatric Care Unit (IPCU)	Soft Launch in Jul/ Aug - 7 day working	All Band 6 Charge Nurse posts recruited to. Soft launch imminent - staff will work 7 days from 9am -5pm	North Ayrshire HSCP	Recruitment and Retention of staff Accommodation capacity		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health CAMHS	2022-AA55	Green	Develop and implement service to provide an early intervention for people with a first episode of psychosis	Develop Pathway March 23	Initial conversations being had. Operational Responsibility and model to be explored	North Ayrshire HSCP	Clinical Governance framework & accountability yet to be decided		UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2022-AA56	Green	Increase access to diagnostic support for patients with dementia	Recruitment to posts Develop Care Pathway	Post diagnostic support staff in post. CST groups now up and running in Troon, Prestwick and Ayr. Girvan planned for August 2022	South Ayrshire HSCP	Resource through additional funding Recruitment to posts Post Covid delays in patients presenting and therefore further along their illness trajectories consequently may have difficulty with understanding	See families and provide support	UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2022-AA57	Green	To carryout a workforce analysis to ensure the right people are in the right place to meet service need	To provide Link Workers in every GP Practice to link people to voluntary and third sector support Adequate Community Mental Health Team to respond to the new National Mental Health standards for CMHT	Recruitment complete for community link practitioners. Now secured 10 CLPs across South Ayrshire servicing every GP practice as well as offering specific locality based support to the Wallacetown area. Workforce analysis completed in CMHT which identified shortfall in capacity. Additional funding being sought from range of funding options. In interim, clinical activities are being RAG rated and prioritised to ensure risks are reduced as much as is possible.	South Ayrshire HSCP	Resource through additional funding Recruitment to posts		UC1		

West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2022-AA58	Amber	Identify essential infrastructure for service bases and for delivering interventions i.e. group therapy and one to one treatment.	Carry out a scope of accommodation across the NHS and Local Authority estates portfolio so as to be able to provide interventions as close to local communities as possible. By October 22	New key deliverable	North Ayrshire HSCP	Without this essential infrastructure it will be difficult to stabilise and reform.	Utilisation of digital platforms for on-line groups Exhaustions of NHS/ NAC facilities Exhaustions of community resources available Funding of external opportunities Purchase of accommodation appropriate to needs	UC1	Delivering Core Service.	Accommodation will ensure that services, care and treatment is delivered local and as close to the individual requiring this care and treatment as possible. Without appropriate accommodation, waiting lists are likely to increase, with potential for associated risks.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2022-AA59	Green	Deliver key 2021-22 actions and improvements identified in the Suicide Action Plan	Reduce deaths by suicide. Increase staff and community awareness in line with NES training framework. Deliver outcomes in line with national suicide prevention strategy. Review all deaths by suicide to support learning and improvements	Actions included in 21/22 action plan were progressed. Also contributing to the review of national suicide strategy to inform new approach. Seeking to recruit dedicated post holder to support progress in relation to East Ayrshire's action plan.	East Ayrshire HSCP	Lack of dedicated , full-time resource to support this agenda. This important issue becomes subsumed into a range of additional priority areas.	Re-energise the agenda to support key improvements.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030, Every Life Matters 2018	Inequalities is a key issue for those at risk of suicide. Lack of opportunity, trauma, the increase in cost of living, debt and lack of employment each have the capacity to result in people feeling hopeless, helpless and at risk of considering suicide.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2022-AA60	Amber	Implement Distress Brief Interventions pathways	Improved pathways for people in distress	Ayrshire is an associate to the national DBI programme. Pathways are being scaled up in GP practices and ED Ayr. Penumbra is the delivery partner and North Ayrshire leads on contract monitoring.	East Ayrshire HSCP	Lack of progress with scale up across all Ayrshire GP practices. Lack of scale up in ED due to competing pressures. Both could result in disinvestment in DBI programme.	DBI board is operational and scrutinising data. Formal review is scheduled to be undertaken to support scale up.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030, Every Life Matters 2018	Often people present in distress as a result of poor home circumstances, trauma and many of the inequalities that result in poor personal outcomes.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2022-AA61	Amber	Re-design Adult Mental Health Services to simply access pathways	Clearer Access Points for individuals and referrers to mental health services and supports. Better outcomes for individuals with mental health issues. Early intervention and prevention/ self management approaches for people with milder symptoms. Clear treatment pathways for mild and more severe conditions.	Mental Health Practitioner 's, self help workers and community connectors in Primary Care support early assessment and signposting to community support organisations. Additionally guided self-help supports development of self management for lower level symptoms.	East Ayrshire HSCP	Lack of recurring funding for 3 self help worker roles funding via remobilisation funds could result in more reliance on more formal supports.	Consideration being given to alternative funding routes to support retention of staff.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Framework for supporting People through Recovery and Rehabilitation during and after the Covid-19 Pandemic 2021	Focusing on self management, early intervention and prevention helps prevent worsening of symptoms and enables individuals, families and communities to be more mentally well. This in turn promotes better outcomes.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Community	2022-AA62	Green	Undertake a review of the provision of 24 hour packages of community based supports: Right Support in the Right Way at the Right Time	Fewer people reliant on paid supports on an individual 1-1 basis. Sharing of support services across a close geographical area. Use of technological devices in order to reduce in person support where indicated. Robust risk assessments to ensure safety and well being outcomes are maintained. People live more independent lives and develop personal self management skills and confidence.	Numerous responder hubs are operating across East Ayrshire with staff support hubs available for ad hoc supports. Further responder hubs are in the planning stages.	East Ayrshire HSCP	Implications for provider sustainability as formal overnight supports are reduced. Deterioration of people's condition resulting in increased care and support needs.	Providers are made aware of the intention to support individuals to live as independently as they are able. Additional opportunities are available for providers to consider. Careful planning and assessment of individual capabilities is undertaken and very gradual, individualised reduction in support hours are made. If a person requires additional support at any time, this is assessed quickly and facilitated.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Adult with Incapacity (Scotland) Act 2000	Traditional models of support for people with learning disabilities were limiting in terms of independence and created a reliance on formal supports rather than enhancing life skills. This approach goes some significant way to redressing the balance.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Inpatients	2022-AA63	Amber	Consideration of extended response service for those 65 and over, at home	Band 6 secondment for 12 months to scope effectiveness of outreach model to facilitate early discharge and prevention of admission/readmission in association with South CMHT(E). Expect report out at September 23. Recent addition to Elderly Liaison services will be reviewed and considered with outreach model above what preferred new service could be.	Initial agreement given at North PSMT, paper being presented to SPOG for sign off in July 22.	North Ayrshire HSCP	Continued increased demand for inpatient beds beyond capacity. Risk of adverse event in community/inappropriate care setting of person awaiting psychiatric inpatient bed. Risk of admission when community support could/should have been offered. Requirement to place person in out-of-area bed if no capacity in A&A.	Input from CMHT€ Out-of-hours support from unscheduled care services Input from Elderly Liaison services to persons in Acute Hospital and Community Hospital settings Effective discharge planning	UC1	Caring For Ayrshire, Mental Health Act, Dementia Strategy, Mental Health Strategy, Ayrshire and Arran Discharge Planning Agreement, NMC Code of Conduct	Persons requiring psychiatric inpatient assessment/treatment will receive the right care at the right time by a competent workforce as close to home as possible
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Inpatients	2022-AA64	Amber	Re-provision of Forensic Rehabilitation Services within a community setting at Warrix Avenue	To develop outline business case by March 23	Briefing paper to describe request/ambition yet to be tabled at North OSMT, SPOG - presumably IPB for consideration/approval. Will aim to do so by September 22.	North Ayrshire HSCP	Current provision in Ward 7C both benefits from co-location and is hindered by being in a hospital setting. Success of Warrix Avenue has proven this could be done differently and embrace rehabilitation benefit/freedom being in community setting would bring.	Current service being successfully delivered from 7C. Warrix Avenue provision useful to inform this future plan.	UC1	Caring For Ayrshire, Mental Health Act, Criminal Procedures Act, Mental Health Strategy, Ayrshire and Arran Discharge Planning Agreement.	Support destigmatisation of 'Forensic' population by being placed in the community. More effective delivery of service by being in the community. Equitable service for this client group by being placed in the community as are those in Warrix Avenue. Less restrictions as would not be in a Hospital setting
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA65	Amber	Enhance Mental Health and Learning Disability teams to support complex care in the community, avoiding acute admission and supporting timely assessment and review.	Job Descriptions for Nursing Staff (anticipated Band 6 and Band 3) submitted for Job Evaluation - June 22; Set up steering group - June 22 Develop relevant evaluation plans/capacity - September 22 Complete recruitment to ISS - October 22 Establish team and initial ways of working/links to existing services -	First meeting of planning group linked to LD Intensive Support Service took place in June 2022, with a focus on the need to progress job descriptions for various team roles. Job descriptions have now been submitted for job evaluation for Nursing roles in first instance.	North Ayrshire HSCP	The potential challenge of recruiting to the various posts with in the ISS has been highlighted. Roles being secured by internal candidates thus putting a strain on other parts of the service in terms of experienced staff	B road discussions to take place around using existing resource in different ways (e.g. supplementing existing hours), but also careful consideration to variety of forums posts are advertised in, as well as how they are advertised (e.g. showcasing the ISS as an innovative development within a service which is seeing significant investment on a variety of fronts)	UC1	Coming Home Report (Scottish Government, 2018); Coming Home Implementation Report (Scottish Government, 2022); Keys to Life (Scottish Government, 2013); Keys to Life Implementation Framework (Scottish Government, 2019); Caring for Ayrshire; NAHSCP Strategic Commissioning Plan 2022-2030	The ISS will have a key role in supporting individuals with complex needs to link to and benefit from the broad range of supports and opportunities within their communities, as well as skilling up provides and others to better respond to the needs of individuals. In this way, it will act to address inequalities in wellbeing outcomes which can be linked to lack of flexibility/skills/knowledge in services and communities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA66	Amber	Review 7A model of assessment and treatment in order to establish necessary capacity in terms of beds, staffing, and ability to meet client outcomes.	Gather baseline data and present to management team – June 22 Establish ongoing data reporting mechanisms to enable improvement/capacity revision – August 22 Develop proposal around new model (environment, bed numbers, practice) – November 22	7A successfully applied to be part of a learning collaborative led by Healthcare Improvement Scotland, linked to the SPSP agenda in Mental Health services. As part of this, 7A staff are exploring, in partnership with other involved wards and Quality Improvement colleagues, improvement activities which relate to the collaborative aims. 7A has also undertaken some initial data gathering around activity since opening, and will continue to build on this as part of exploring/evolving its practice.	North Ayrshire HSCP	Sickness/absence and the challenges of the ward environment continue to impact on staff availability and create a frequent reliance on bank staff who are not appropriately trained so as to fulfil the full remit of their role within the environment and with the client group.	Address staff welfare as well as broader good practice as part of SPSP collaborative work.	UC1	Keys to Life (2013); Keys to Life Implementation Framework (2019); Caring for Ayrshire; NAHSCP Strategic Commissioning Plan 2022-2030; Scottish Patient Safety Programme	Ward 7A is an in-patient environment. As part of reflecting on seclusion/restraint practice within the HIS collaborative, 7A staff are considering the role of activities and purposeful engagement, and means of further promoting this within the ward. Potentially, any work undertaken in this regard will impact on the ability of individuals to be included within and benefit from a broader range of community opportunities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA67	Amber	Implement new ways of working within Trindlemoss Day Opportunities in order to facilitate a shift from building based to community focused activities, with integration, inclusivity, and the achievement of meaningful outcomes at their core.	Complete organisational/staffing restructure – July 22 Establish effective ongoing methods of engagement with clients, families, and other stakeholders – November 22 Evidence a clear shift in the variety and location of activities clients are linked to, including an increase in the number of collaborations with community partners across North Ayrshire – June 23	As part of this, Trindlemoss has reviewed staffing roles, implemented a new staff structure, and has almost completed a significant programme of staff transition and recruitment. It also continues to work with HIS, in Phase 3 of a learning collaborative focused on redesigning day services for people with learning disabilities	North Ayrshire HSCP	Scale of change being sought has and may in the future meet with resistance from some stakeholders. Should the new ways of working not be fully embraced and embedded, sufficient capacity may not be created to fully meet the needs of younger people in transition.	Trindlemoss is developing a plan for ongoing engagement with stakeholders, and creating new opportunities for involvement such as work to be facilitated by 2 interns from the Glasgow School of Art. It will also benefit from an Engagement post which is to be trialled for 1-year within the Learning Disability Service.	UC1	Keys to Life (2013); Keys to Life Implementation Framework (2019); Caring for Ayrshire; NAHSCP Strategic Commissioning Plan 2022-2030	Greater integration of people with learning disabilities within their communities is core to the aims of Trindlemoss. As part of this, Trindlemoss is linking with a broad range of partners to create and promote greater equality and new opportunities in relation to issues such as physical activity (e.g. partnering with Woodland Wakeup in relation to new outdoor learning opportunities) and employment (e.g. linking into discussions within the Local Employment Partnership around new approaches to promoting employment opportunities for people with disabilities).
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA68	Amber	Undertake needs assessment to identify the future needs of the population of individuals requiring complex care arrangements in North Ayrshire, to meet these needs and identify infrastructure gaps / opportunities.	Baseline scoping exercise to be completed – July 22 Identify models of good practice elsewhere across Scotland/UK and visit/connect as relevant – October 22 Engage with existing clients/families and relevant partners (complex/PMLD) around their experiences of current provision with a view to shaping plans around future provision – January 23 Develop proposal around necessary infrastructure development – March 23	An initial scoping paper has been drafted regarding the current state of play in relation to individuals with complex needs in North Ayrshire, drawing in issues such as Housing and in-patient provision.	North Ayrshire HSCP	Provider economy within North Ayrshire remains fragile; Providers continue to open new facilities within North Ayrshire which draw in clients from other areas, but place additional demands on local services.	Intensive Support Service will enable a new dialogue with providers, focused on developing their existing capacity. Better understanding of local complex needs population and existing resource will help us to work better with providers to help shape the local market appropriately, and continue to foster pro-active discussion about potential future developments on both sides.	UC1	Coming Home Report (Scottish Government, 2018); Coming Home Implementation Report (Scottish Government, 2022); Keys to Life (Scottish Government, 2013); Keys to Life Implementation Framework (Scottish Government, 2019); Caring for Ayrshire; NAHSCP Strategic Commissioning Plan 2022-2030	Complex needs are in part a function of the needs and abilities of individuals, and in part a function of the availability/flexibility (or lack thereof) regarding local services and opportunities. Better understanding the challenges experienced by those who can be considered as presenting with complex support needs will help us to shape services and communities appropriately, and thereby promote greater equality in health and other outcomes.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA69	Green	Implement Phase 2 of New Models of Assisted Living Programme, in line with East Ayrshire Council's Strategic Housing Investment Plan	Individuals with complex needs are supported to live good quality lives as independently as they are able. Additional supported accommodation tenancies are available in line with the Strategic Housing Investment Plan	There were some build delays as a result of the pandemic. This is now back on track with the next supported accommodation, Quarryknowe, on track for opening end August 22. Individuals have been identified for these tenancies and are being supported through the legal process to support the moves.	East Ayrshire HSCP	Unexpected delays with contractor could delay handover of the property. People previously identified for the property could choose not to move. Delays in the legal process at court could delay the move for individuals.	Regular meetings with the contractor to ensure any delays are highlighted. Individuals and families have been involved throughout the planning stages so unlikely that people will withdraw. If someone chooses not to move, there are a number of other individuals who could also be offered a tenancy. In terms of the legal process, staff are being encouraged to process intervention orders quickly in order to expedite.	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Adult with Incapacity (Scotland) Act 2000	People with learning disabilities and complex needs are often subject to stigmatising in their local community. In addition many people with learning disabilities experience poorer health outcomes and have less access to services and supports enabling them to live good quality lives. This approach supports the person to maximise their independence whilst having access to ad hoc support should the need arise.

West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA70	Green	Implement the new Day Services Model	Blended model of day service support which is individually tailored to the person's needs. Less reliance on building based supports and more community based activities. Revision of staffing structure to support more autonomous practice.	Day service BSVR has been completed and is fully implemented.	East Ayrshire HSCP	Complete	Complete	UC1	Mental Health Strategy 2017-2027 East Ayrshire HSCP strategic plan 2021-2030 Adult with Incapacity (Scotland) Act 2000	Supporting people with learning disabilities to utilise community based activities supports a reduction in stigma and increases opportunities to challenge the inequalities faced by this group of people.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA71	Green	New South Ayrshire Learning Disability Strategy	IJB Endorsed - Jun 22 Strategy Launch - August 22 Establish SPOC and embed MDT working within LD Services - December 23	Quarterly report to the local government groups on the deliverables and action plans culminating from the strategy	South Ayrshire HSCP			UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA72	Green	Implement a 7 day building based service to develop new ways of working within Day Opportunities in order to consider combining building based services with community focused activities, and the achievement of meaningful outcomes for residents with a LD in South Ayrshire .	Complete consultation on a 7 day building based service with support from SCLD and the league of champions board – August 22 Establish individual with service users, carer, legal proxy's and staff – November 22 Evidence a clear shift in the variety and location of activities clients are linked to, including an increase in the number of collaborations with community partners across North Ayrshire – June 23	Working with HIS, as part of the learning collaborative focussed on redesigning day services for people with learning disabilities	South Ayrshire HSCP			UC1	Keys to Life (2013); Keys to Life Implementation Framework (2019); Caring for Ayrshire	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA73	Green	Undertake needs assessment to identify the future needs of the population of individuals requiring complex care arrangements outwith South Ayrshire, to look at needs and identify opportunities to return home.	ELT paper to be completed requesting a band 6 and social worker to assess and review our South residents who are out of area – July 22 Liaise with establishments in South Ayrshire to identify models of support to replicate the care provided required to bring residents home – March 23 Engage with existing clients/families and relevant partners (complex/PMLD) around their experiences of current provision with a view to shaping plans around future provision – January 23 Develop proposal around necessary infrastructure development – March 23	An ELT paper has been drafted to request use of Coming Home monies from Scottish Government to fully assess and review South Ayrshire residents and ascertain if we can provide the care within South Ayrshire	South Ayrshire HSCP			UC1	Coming Home Report (Scottish Government, 2018); Coming Home Implementation Report (Scottish Government, 2022); Keys to Life (Scottish Government, 2013); Keys to Life Implementation Framework (Scottish Government, 2019); Caring for Ayrshire	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Learning Disability	2022-AA74	Green	Implement 3rd Core and Cluster in Ayr Town centre	Individuals with complex needs are supported to live good quality lives as independently as they are able. There will be a supported accommodation flat to accommodate individuals who are in crisis and no longer able to remain in the family home or community. This will minimise the need for hospital care.	The Core and Cluster will be complete and open in December 22. Individuals have been identified for tenancies, enhanced telecare and provider is being secured.	South Ayrshire HSCP			UC1	Coming Home Report (Scottish Government, 2018); Coming Home Implementation Report (Scottish Government, 2022); Keys to Life (Scottish Government, 2013); Keys to Life Implementation Framework (Scottish Government, 2019); Caring for Ayrshire	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Psychological Therapies	2022-AA75	Green	Develop and Implement Infant Mental Health Service	Pathways developed and service operational March 23	Infant mental health service recruitment has commenced, with both nursing and psychology successful in filling all vacancies. Start dates ca September/October 22. OT and Admin in process of recruitment.	North Ayrshire HSCP	Lack of physical space	Initial plan is to use hot desking within Perinatal services, whilst long term aims are to raise with estates and examine further options.	UC1		
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Mental Health Unscheduled Care	2022-AA76	Green	Elderly Mental Health Liaison Team continue to work at full capacity	To increase the nursing workforce, by end of financial year.	Secured funding for 2 X permanent Band 6 Charge Nurses and 2 X Band 5 staff Nurses. All 4 members of nursing staff are in post.	North Ayrshire HSCP	Demand continues to rise as a result of complex patients being admitted to acute hospitals. The impact of delayed discharges on Elderly Liaison is having patients longer on their case loads.	Test of Change is currently undergoing with MH ANP within the team which will benefit both Nursing staff as well as Medical staff. Also currently reviewing what other disciplines within the team would be advantageous thus allowing a more holistic approach to patients.	UC1	Urgent and Emergency/Unscheduled Care Redesign of Urgent Care (Locally & Nationally) Caring for Ayrshire	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2022-AA77	New	Review the Enhanced Services currently provided by GP practices to ensure fit for purpose and sustainability. 2022/23	Develop and produce a commissioning plan to define all enhanced services including current activity / cost and agree clear specification, audit ownership and assurance plan.	Terms of Reference and Group established with clear aims and outcomes.		Some Enhanced Services have not been reviewed for some time therefore significant input across organisations/partners may be needed to ensure still fit for purpose or service changed / removed from provision. EQIAs may be required for any potential changes impacting on service delivery. Engagement from GPs to continue providing Enhanced Services and additional financial commitment may be required.	Any change to service delivery will be implemented on consultation with LMC / GP Sub and CMT. Reps from appropriate teams will be consulted on content of ES. Consider use of EQIA Assessment for relevance to establish if full EQIA is necessary for any ES being changed.	UC1	PCIP and primary care recovery programmes	Supports access and delivery of General Medical Services
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2022-AA78	New	Delivery of the Recovery of Children's Oral Health and Dentistry	Delivery of the Additional Toothbrushing Packs Implementation of targeted interventions	Recruitment of Additional Dental Health Support Workers in progress Development of programmes of work to identify the children for the targeted interventions				UC1	Oral Health Improvement Plan NHSAA Oral Health Strategy 10 year Plan 2013-2023	The programmes of work associated with this additional funding will increase toothbrushing resources and direct support from Dental Health Support Workers to our most vulnerable families. Ensuring these families are registered with a dentist and are supported to attend appointments regularly. The primary focus of the work will be supporting families from SIMD1 areas and ethnic minorities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Primary Care	2022-AA79	New	Recovery of Public Dental Services	Return to pre-pandemic waiting times Increased provision of Emergency Dental Services while GDS remobilises	Recruitment of additional Dentists, Therapists, Dental Nurses and other support staff in progress Development of new Patient pathways Maximise utilisation of skill mix within the Dental Team		Inability to recruit to key professional roles resulting in decreased access to emergency dental care or increased waiting times for routine treatment for unregistered patients.	Monthly review of Waiting Times	UC1	Oral Health Improvement Plan NHSAA Oral Health Strategy 10 year Plan 2013-2023	Increased sustainability of the PDS will support patients access emergency care or unregistered patients to receive routine care whilst General Dental Practice continues to recover from the pandemic.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA80	Green	Joint pathway between Ayrshire Urgent Care Service and SAS to provide Professional to Professional decision support to avoid unnecessary conveyance of patients to acute hospital sites.	Implement pathway between SAS and AUCS to support advanced paramedic practitioners (APPs) who clinically assess all referrals to support alternatives or a scheduled presentation that doesn't require SAS attendance. June 22	SAS/FNC model in place to avoid unnecessary conveyance. Shared experience and knowledge has aided improvement of pathways. Call volumes: on average 10 calls per day from SAS supported with alternative pathways Pilot initiated to determine a system to encourage information and advice sharing between SAS Advanced Paramedic Practitioner and GP from within AUCS with an aim to support appropriate patients to be redirected to alternative pathways.		Continuation of workforce commitment and co-location arrangements.	Shared learning and reflection of key benefits is being undertaken and co-location of team is well established - any arising risk could be mitigated through discussion between operational managers involved.	UC1	RUC Mental Health Recovery Strategy Unscheduled Care	Creates a more effective patient journey ensuring patients are routed to the most appropriate service for follow up care and potentially prevent an inappropriate acute attendance .
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA81	Green	Enhanced Mental Health Pathway via FNC for Emergency Services (SAS/Police Scotland) to access direct care for patients requiring emergency mental health interventions.	Mental Health pathway into Unscheduled and Urgent Care reviewed and enhanced. Building on established pathways with enhancements based on RUC Workstream aims. June 22	Emergency service (SAS/Police Scotland) pathway in place through FNC to access Urgent Mental Health Services. An average of 25 people per week have been accessing this alternative pathway since going live in May 22. Plans are in place to centralise emergency MH interventions in a community hospital based hub, to facilitate short term admissions up to 72 hours.		Recruitment to posts for key staff will be vital in order to deliver this additional work. Utilisation of Flow Navigation Centre as single point of access to appropriate mental health team response.	Management of recruitment and key initiatives has oversight provided by Service Manager, Pan Ayrshire Unscheduled Care Mental Health. Join working arrangements with AUCS/FNC team members.	UC1	RUC Mental Health Recovery Strategy Unscheduled Care	Supports improved and enhanced patient pathway for patients suffering from mental health crisis ensuring they receive the most appropriate care at the point of contact.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA82	New	Implement Redesigned Community Pharmacy pathways into Urgent and Unscheduled Care, and create pathways for patients to be redirected to pharmacy interventions appropriately out of ED.	Introduce a pathway between Pharmacy and ED via FNC for appropriate scheduled referral to ED. December 22	Scoping work initiated; Analysis of Demand Profile; Linking with Primary and Community Teams in signposting to appropriate primary and community delivered health and care		Ability to schedule appointment in ED is dependant on availability	Scheduling availability informed by USC Demand and Capacity model	UC1	Urgent and Unscheduled Care Collaborative - HI1 Care Closer to Home and HI2 Redesign of Urgent Care	Ensuring patients access the right pathway of care for them at the appropriate time is imperative. Scheduling allows patients with accessibility issues time to arrange transport to the appropriate care if required, or alternatively to access patient transport. This ensures that no patient is disadvantaged in accessing their healthcare needs based on availability of transport, distance travelled, or caring responsibilities.

West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA83	New	Implement Alternative pathways to enable additional Signposting/Redirections to FNC where appropriate	Complement the pathways from ED via FNC for redirection of patients into appropriate other services. Utilising Near Me	Scoping work initiated; Analysis of Demand Profile		Service pressures on ED team may lead to lack of time to signpost patients to appropriate services in future as an alternative to ED attendance. Other pressures on the wider system may reduce the number of alternatives.	HCSW funded by RUC to support redirections/signposting of patients to alternatives	UC1	Urgent and Unscheduled Care Collaborative - HI1 Care Closer to Home; HI2 Redesign of Urgent Care; HI4 - Urgent and Emergency Assessment	Ensuring patients access the right pathway of care for them at the appropriate time is imperative. Scheduling allows patients with accessibility issues time to arrange transport to the appropriate care if required, or alternatively to access patient transport. This ensures that no patient is disadvantaged in accessing their healthcare needs based on availability of transport, distance travelled, or caring responsibilities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA84	Green	Expansion of FNC model to support each patient's journey, from community, through each episode of care, back to the patient returning home.	Building on phase 1 of RUC Programme identify alternative referral pathways for patients to provide the right care, as close to home as is possible and provide this as quickly as possible for each individual patient.	FNC established in November 2020 continues to operate scheduling to ED/MIU and offer doctor advice or onwards referral. Flow Navigation Centre acts as a hub and single point of access but there is considerable potential for further expansion to refer to other pathways.		Current risks include system pressures leading to scheduling being paused due to two service delivery models then in place which creates a two tier service for patients.	Work to commence in developing a more sophisticated model of scheduling to allow appointments to only be given when capacity allows. This will link to, and be informed by wider collaborative work on modelling unscheduled care.	UC1	Urgent and Unscheduled Care Collaborative - HI1 Care Closer to Home and HI2 Redesign of Urgent Care	Ensuring patients access the right pathway of care for them at the appropriate time is imperative. Scheduling allows patients with accessibility issues time to arrange transport to the appropriate care if required, or alternatively to access patient transport. This ensures that no patient is disadvantaged in accessing their healthcare needs based on availability of transport, distance travelled, or caring responsibilities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA85	Green	Musculoskeletal (MSK) - Urgent Care Pathway	(1) Scope Demand (2) Pilot and Embed enhanced triage (3) Pilot and Embed direct referral (4) Optimise Self Care (5) Optimise Community Support (6) Evaluate, review and improve	Scoping work initiated Recruitment to key posts initiated		Ability to recruit to key posts central to the progression of the pathway. Building consensus for service delivery model across a broad spectrum of operational stakeholders	• Detailed Test of Change documentation and project plan • Regular Programme Management Meetings • Regular Performance Monitoring and evaluation	UC1	Urgent and Unscheduled Care Collaborative - HI1 Care Closer to Home; HI2 Redesign of Urgent Care; HI3 - Virtual capacity	Ensuring patients access the right pathway of care for them at the appropriate time is imperative. Scheduling allows patients with accessibility issues time to arrange transport to the appropriate care if required, or alternatively to access patient transport. This ensures that no patient is disadvantaged in accessing their healthcare needs based on availability of transport, distance travelled, or caring responsibilities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA86	New	Integration of FNC as triage route for ambulatory interface care programmes	(1) FNC to facilitate local expansion of remote health monitoring for respiratory patients (2) FNC to expand prof to prof consultation between SAS crews and local services such as RRR and Falls teams	Scoping work initiated; Analysis of Demand Profile; Linking with Primary and Community Teams in signposting to appropriate primary and community delivered health and care		FNC Capacity Effective use of technology	Predict demand based on previous activity and resource FNC appropriately to meet need	UC1	Urgent and Unscheduled Care Collaborative - HI1 Care Closer to Home; HI2 Redesign of Urgent Care; HI3 - Virtual capacity; HI8 - Community Focused Integrated Care	Ensuring patients access the right pathway of care for them at the appropriate time is imperative. Scheduling allows patients with accessibility issues time to arrange transport to the appropriate care if required, or alternatively to access patient transport. This ensures that no patient is disadvantaged in accessing their healthcare needs based on availability of transport, distance travelled, or caring responsibilities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA87	Green	RUC Pathways: Accessible pathways of care for patients based on the Scottish Approach to Service Design (Discover, Define, Develop, Deliver). Clear public Messaging and Comms	(1) Assess and define all available RUC pathways and how they intersect (2) Assess the best and most effective ways to communicate these to the general public, health services and professionals (3) Engage with NHS A&A Comms Team and design and implement a communications strategy	RUC Phase 1 set out the public messaging around accessing urgent care and patients being able to access appointments to MIU/ED. Next steps would be to build on this.		Lack of accessibility to the appropriate pathways to ensure all services help navigate patients to the appropriate service, regardless of entry point	Effective communication channels, agreed service navigation points, adequate knowledge within staffing groups, monitoring and evaluation of patient experience through pathways	UC1	Urgent and Unscheduled Care Collaborative - HI1 Care Closer to Home; HI2 Redesign of Urgent Care; HI4 - Urgent and Emergency Assessment	Ensuring patients access the right pathway of care for them at the appropriate time is imperative. Scheduling allows patients with accessibility issues time to arrange transport to the appropriate care if required, or alternatively to access patient transport. This ensures that no patient is disadvantaged in accessing their healthcare needs based on availability of transport, distance travelled, or caring responsibilities.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Redesign of Urgent Care	2022-AA88	New	Implementation of a Covid/Non-Covid Remote Health Monitoring integrated pathway utilising pulse oximeters, supported by digital services	Implement Respiratory RHM pathway providing pulse oximeters, alongside clinical advice within GP practices, within GPOOH services and at Acute front Door (ED/CAU). July 22 Through provision of pulse oximeter devices alongside clinical advice and support integrate the local pathway approach with the national Covid RHM pathway to expand the inclusion criteria, supporting more people to self manage and escalate to appropriate care as needed.	Development of pathway criteria alongside clinicians to scope additional devices and distribution plan based on data identifying areas of need across Ayrshire and Arran. Development of patient leaflets to advice patients of points of escalation, as advised by their clinician.		Supply of devices to meet all patient need.	Management of demand for devices with registration of patients through a clinical mailbox.	UC1	Covid 19 Remobilisation & Recovery Urgent and Unscheduled Care Collaborative - HI1 Care Closer to Home; HI2 Redesign of Urgent Care; HI3 - Virtual capacity	Sustainability of providing treatment to our most vulnerable patients with worsening Covid symptoms reducing the need for secondary care intervention. Supporting informed self-care when safe and appropriate to do so.
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Unscheduled Care	2022-AA89	Green	Right sizing the bed footprint High Impact Change 3 (Virtual Capacity)	Develop Hospital at Home & increase capacity Scope potential demand to inform business case for expansion of OPAT Rapid Respiratory Home Service Model in place in 3 areas for East Ayrshire Focus on development of Home First & rapid response community & hospital transition teams.	Increase Hospital at Home capacity from 6 to 28 virtual beds by January 23 Expansion from Lower limb cellulitis to further OPAT service not developed as yet Expansion of Rapid Respiratory home service beyond existing East Ayrshire model not in place as yet. Home First Band 6 posts out to advert x 4 in post with an additional 5 required to roll out Home First/DwD work		Inability to recruit & retain adequate workforce		UC1	Urgent & Unscheduled Care Programme & SG Self-Assessment RADAR Pre, intra & post hospital Workstreams as part of the USC Collaborative work including 6 essential actions, Discharge without delay & interface work. 7 Days of Solutions/Perfect week & Full System DwD focus events.	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Unscheduled Care	2022-AA90	Green	Right sizing the bed footprint High Impact Change 3 (Urgent & Emergency Assessment)	Model & develop a data suite to enable us to right size the acute footprint to speciality level which includes projected virtual capacity Review of rapid access to diagnostics Review of time to senior decision maker in ED & CAU Review & development of alternatives to inpatient stays including hot MDT Clinics. Optimise acute care as a speciality with a focus on the first 48 hours of the patient journey.	Information Team working with CapGemini to model acute footprint to enable right sizing the bed footprint. Review of diagnostic waits started through the DwD work & will continue through continuing Full system DwD events Currently we have an acute cardiac clinic in place further scoping of other specialities under review. Acute medicine governance work to be picked up through CAU teams to identify information & enable an informed plan.				UC1	Urgent & Unscheduled Care Programme & SG Self-Assessment RADAR Pre, intra & post hospital Workstreams as part of the USC Collaborative work including 6 essential actions, Discharge without delay & interface work. 7 Days of Solutions/Perfect week & Full System DwD focus events.	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Unscheduled Care	2022-AA91	Green	Right sizing the bed footprint High Impact Change 8 (Community Focused Integrated Care)	Review acute wards LOS & prioritise areas above the Scottish average through the DwD Home First Programme. Review all community rehab wards LOS with a focus on benchmarking comparable H&SCP's & then targeting through DwD "Home First" work Undertake System Wide DwD focus events as per below information 18th 19th and 20th July 18th 19th and 20th August 7th - 14th September 7 days of solutions 5th 6th and 7th October 24th 25th and 26th October 14th 15th and 16th November 28th 29th and 30th November	All acute areas have had focused all system DwD event and a 7 days of solutions event by end June 22 Plan to replicate Full System Event in community hospitals with next full system DwD event.		Inability of teams to participate in Full system events		UC1	Urgent & Unscheduled Care Programme & SG Self-Assessment RADAR Pre, intra & post hospital Workstreams as part of the USC Collaborative work including 6 essential actions, Discharge without delay & interface work. 7 Days of Solutions/Perfect week & Full System DwD focus events.	
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Gynaecology	2022-AA92	Proposal	Ensure a robust Unscheduled Care Service for Emergency Gynaecology	Emergency Gynaecology - formalise model of care, collection of operational data & patient feedback as baseline for future developments scoping 2022 / 23	New deliverable				UC1	Unscheduled Care Model	Improve delivery of USC for Women experiencing Gynaecology concerns
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Paediatrics	2022-AA93	Green	Develop a Paediatric Forensic Medical Suite	Build of Paediatric Forensic Medical Suite July 22 Readiness for facility commencement July 22	Build on track for handover Preparation on track				UC1	CMO Taskforce Rape & Sexual Assault (CYP)	Improve health outcomes for vulnerable CYP Child Protection / Child Sexual Abuse
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Paediatrics	2022-AA94	Green	Neonatal / Best Start Deliver all neonatal requirements of the Best Start Agenda	Fully develop Homecare service November 22	Test of change in progress				UC1	Best Start	Improving access to and quality of services in line with Best Start recommendations
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Paediatrics	2022-AA95	Green	Neonatal / Best Start Deliver all neonatal requirements of the Best Start Agenda	Review of Neonatal ITU / HDU / SCBU Space in light of National Best Start changes March 23	New deliverable				UC1	Best Start	Improving access to and quality of services in line with Best Start recommendations

West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Paediatrics	2022-AA96	Proposal	Ensure a robust Unscheduled Care Pathway for Paediatric Service	Review current USC pathway Ayr / UHC / CAU against relevant standards Jul 22 Develop Action plan as required by review findings (TBC) Engage stakeholders / family participation in any required redesign and deliver redesigned service (TBC)	New deliverable				UC1	Serious Case Review Requirements (Child P)	Improve delivery of USC for Children and Young People to ensure safe, effective service
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Paediatrics	2022-AA97	Proposal	Unscheduled Care Pathway Children's Assessment Unit	Plan & Costing of refurbishments to ensure fit for purpose July 22 Agreement to Proceed with works (TBC)	Scoping in progress		Funding not available		UC1	Serious Case Review Requirements (Child P)	Improve delivery of USC for Children and Young People to ensure safe, effective service
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Paediatrics	2022-AA98	Green	Mental Health Collaborative working with CAMHS Psychiatric Liaison (Acute Care)	(1) Build of YP De-escalation Suite on Paediatric Ward, Planning Phase July 22 (2) Build staff confidence with training to support therapeutic observations - CAMHS to deliver training March 23 (3) Develop sustainable Psychiatric Liaison Model with CAMHS	(1) Funding secured, planning in progress (2) New deliverable (3) New deliverable				UC1	Caring for Ayrshire	Improve outcomes for CYP admitted to Acute Care with associated mental health needs
West of Scotland	Ayrshire and Arran	Urgent and unscheduled care	Women and Children Paediatrics	2022-AA99	Proposal	Mental Health Collaborative working with CAMHS Neurodiversity Shared Care	(1) External review of shared care pathways CAMHS / Community & Acute Paediatrics including family & CYP participation TBC 22 (2) Develop clear integrated pathways as appropriate	(1) Scoping in progress				UC1	Caring for Ayrshire	Improve integrated care for CYP with Neuro developmental needs

NHS Ayrshire & Arran - Annual Delivery Plan 2022 - 2023

Key for status:

Proposal - New Project/funding not yet agreed

New - New project/funding agreed but not yet started

Red - Unlikely to complete on time/meet target

Anber - At risk - requires action

Green - On Track

Complete - Complete/Target met

Suspended - Currently suspended - details of why/how long should be included in