

Subject: **Allied Health Professions Highlight Report 2020**

Purpose: To present the Allied Health Professions Highlight report for 2020.

Recommendation: It is recommended that the IJB note the content of the AHP Highlight report (Appendix 1) and endorse the AHP Service objectives for 2021/22 outlined within the attached report.

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

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| 1. | EXECUTIVE SUMMARY |
| 1.1 | The attached report provides detail on the activity of Allied Health Professions (AHPs) in North Ayrshire Health and Social Care Partnership (HSCP) during 2020 and the first half of 2021 |
| 1.2 | <p>The 2020 AHP Highlight report further sets out collective objectives for AHP services in North Ayrshire for 2021/22, aligned to the North Ayrshire Health and Social Care Partnership bridging strategic plan as follows :</p> <ul style="list-style-type: none"> • Progress the remobilisation of Allied Health Professional services, • Adopt key pandemic learning to improve patient access and treatment • Maintain staff well being |
| 2. | BACKGROUND |
| 2.1 | In North Ayrshire, AHPs encompass several different professional groups – Dietetics Occupational Therapy, Physiotherapy, Podiatry, and Speech and Language Therapy - working as part of multi disciplinary teams across health and social care, hospital and community settings, and across all stages of the life curve. |
| 2.2 | <p>The 2019 AHP Highlight report was brought to the Integration Joint Board in July 2020. It set out the following priority areas for AHPs in 2020 - AHPs will :</p> <ul style="list-style-type: none"> • Continue to maximise the AHP contribution to Multi Disciplinary working; • Progress a Quality Improvement and Risk Management approach to waiting times; • Implement access to quality supervision for all AHPs; • Continue to prioritise the wellbeing of AHP staff; |

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| | <ul style="list-style-type: none"> Progress the collation of simple, consistent, and robust service performance data, to ensure planning decisions are informed; Continue to embrace any opportunities presented by advancement in digital technology. |
| 2.3 | <p>The attached 2020/21 Highlight Report provides update against each of these priority areas. It reinforces the ongoing contribution that AHPs make to enhance the lives of the people of North Ayrshire, the improvement culture that has been embraced among team members, and the ways in which AHPs continue to work alongside a wide range of partners; to support recovery, wellbeing, self management and promote independence.</p> <p>The report highlights the flexible way that AHP services adapted to meet emerging demand through the COVID-19 pandemic, and provides example of the ways in which AHP activity supports achievement of the North Ayrshire health and social care partnership strategic ambitions.</p> |
| 2.4 | <p>The 2020 AHP Highlight report further sets out collective objectives for AHP services in North Ayrshire for 2021/22 as follows :</p> <ul style="list-style-type: none"> Progress the remobilisation of Allied Health Professional services, Adopt key pandemic learning to improve patient access and treatment Maintain staff well being |
| 3. | PROPOSALS |
| 3.1 | <u>Anticipated Outcomes</u> |
| | The attached Highlight report seeks to assist the IJB in understanding the contribution that AHPs make for the people of North Ayrshire, as part of multi disciplinary teams, and provide assurance around future direction of service focus. |
| 3.2 | <u>Measuring Impact</u> |
| | Systems to record AHP performance and impact will continue to be refined, with regular reports to the Director of North Ayrshire HSCP, and the North Ayrshire Health and Care Governance group. |
| 4. | IMPLICATIONS |

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| Financial: | Nil |
| Human Resources: | Nil |
| Legal: | Nil . |
| Equality: | Nil |
| Children and Young People | The attached report highlights the contribution of AHPs for the people North Ayrshire, including children and young people. |
| Environmental & Sustainability: | Nil |

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| Key Priorities: | The attached report outlines the contribution of AHPs in North Ayrshire to the priorities articulated in the HSCP's Strategic Plan |
| Risk Implications: | Nil |
| Community Benefits: | Nil |

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

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| 5. | CONSULTATION |
| 5.1 | The attached report has been developed in consultation with the AHP Leadership team in North Ayrshire. The HSCP senior management team, and North Ayrshire HSCP Health and Care Governance Group have been consulted in the collation of the attached report. |
| 6. | CONCLUSION |
| 6.1 | <p>The attached AHP Highlight Report</p> <ul style="list-style-type: none"> • Provides highlight of the contribution of AHP services for the people of North Ayrshire • Provides a summary of the challenges faced in 2020 • Outlines the objectives for North Ayrshire AHP services for 2021/22 <p>The IJB are asked to :</p> <ul style="list-style-type: none"> • Note the content of the attached 2020 AHP Highlight report • Endorse the AHP Service objectives for 2021/22 as outlined within the attached report |

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ALLIED HEALTH PROFESSIONS

HIGHLIGHT REPORT 2020



NORTH AYRSHIRE
Health and Social Care
Partnership

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Introduction

In North Ayrshire, the Allied Health Professions (AHPs) encompass several different professional groups – Dietetics, Physiotherapy, Podiatry, Occupational Therapy and Speech and Language Therapy – working as part of multi-disciplinary teams across health and social care; hospital and community settings, and across all stages of the life curve.

AHPs provide services across the North Ayrshire mainland, Arran and Cumbrae; within the Ayrshire Central Hospital campus – including inpatient and outpatient services at Douglas Grant Rehab Centre and Woodland View – and within communities, including day centres, care homes, people's own homes, social service premises, primary care, education premises and community facilities.

Last year, as with all services, the Allied Health Professions (AHPs) in North Ayrshire Health and Social Care Partnership faced the challenges of the Covid 19 pandemic. This report provides an update on the professional groups led under the umbrella term of AHP and highlights the contribution and achievements of these professional groups in 2020, as well as some of the key challenges and service aims moving forwards.

The priority areas set out for focus in 2020 were agreed as:

- **Continue to maximise the AHP contribution to multi- disciplinary working**
- **Progress a Quality improvement and Risk Management approach to waiting times**
- **Implement access to quality supervision for all AHPs**
- **Continue to prioritise the well -being of AHP staff**
- **Progress the collation of simple, consistent and robust service performance data, to ensure planning and decisions are informed**

This year, the 2020 AHP Highlight Report provides an update against those priority areas. It highlights progress and successes over the last year, and summarises the key challenges faced in 2020.

Despite the restrictions of the pandemic, AHP services worked tirelessly to ensure services were maintained to meet the needs of our population. The effects of shielding and increased demand as a result of this are still being realised well into 2021.

In line with the North Ayrshire Bridging Plan, we have categorised and themed our achievements over

2020 around the following areas:

- Transformation and Service Improvement
- Effective Partnership
- Covid 19 Pandemic Impact

This report will provide a brief update against each of the priority areas set for AHP services in 2020, before going through each of the above in turn.

Update on 2020 AHP Service objectives and achievements

Continue to maximise the AHP contribution to multi- disciplinary working:

Work is ongoing around working closer together between health and social care services. The use of Microsoft Teams has created more opportunities for staff to liaise online and removed barriers of arranging face to face meetings.

As part of the early response to the pandemic there was a greater requirement for AHP staff to collaborate with local partners. This has fostered stronger positive relationships which has developed and utilised the strengths of local communities.

Progress a Quality Improvement and Risk Management approach to waiting times:

Work has continued to improve access to AHP services with specific quality improvement approaches progressed around access to occupational therapy services and to speech and language therapy for children and young people.

While the pandemic has undoubtedly increased the challenge around this, there are strong plans in place to continue to progress this approach.

Implement access to quality supervision for all AHPs:

Access to quality supervision continued to be a priority for AHP services during 2020/21, particularly in light of rapid changes to pause some services, and alongside the need for redeployment to areas of greatest need within the system.

In addition to continued input to national work on AHP supervision, work has continued locally to spread an approach which ensures every AHP has access to quality supervision with a focus on well-being, performance, quality and continuous professional development. A staff survey undertaken in late 2020 highlighted that 83 per cent of AHPs working in North Ayrshire regularly participated in supervision. A targeted action plan is under development to raise this position further.

Continue to prioritise the well-being of AHP staff:

Within North Ayrshire, local AHP staff were instrumental in establishing and running a well-being hub on the ACH site for all NAHSCP and health staff. The hub has provided support, solace and space with over 1500 visits from staff from across North Ayrshire during the pandemic, many of which were AHPs.

This work and the focus across the organisation has highlighted the importance of looking after our staff, resulting in permanent funding for further development of hubs across Ayrshire and Arran including Ayrshire Central.

Progress the collation of simple, consistent and robust service performance data to ensure planning and decisions are informed:

In readiness for the implementation of the Health and Care Staffing (Scotland) legislation, and aligned with the local Caring for Ayrshire focus, AHP services undertook a significant piece of work in early 2021, with the aim of reaching a better understanding of the relationship between demand and capacity in eight priority areas of service delivery.

Working in conjunction with the National AHP Workforce Lead at Healthcare Improvement Scotland, and the AHP Specialist Workforce Lead at NHS Education Scotland, the common staffing methodology was used. This work has provided useful local information on AHP workforce which is currently being explored within the Health and Social Care Partnership.

The learning from this approach will also contribute to the shape of future national AHP workload measurement methodologies.



Continue to embrace any opportunities presented by advancement in digital technology:

The requirement from the Covid 19 pandemic to revert to online and telephone consultations for service users has resulted in the rapid implementation of new digital solutions and processes. AHP staff have embraced these changes and utilised the opportunities this has brought.

This paper will now provide highlights of achievement over the last 18 months under the headings used within the NAHSCP strategic bridging plan. IoRN 2 (Indicator of Relative Need) data has been used across intermediate care and rehabilitation – demonstrating the impact of service on people's levels of independence.

1. AHP transformation and service improvement

There has been a requirement to undertake and develop new ways of working. The following are relevant examples of work undertaken:

Children and Young People

- The Speech and Language Therapy (SLT) team embarked on a quality improvement project in September 2020 with the aim being that by August 1, 2021, 80 per cent of those children seeking support from the NAHSCP Children and Young People (CYP) SLT service will be offered the appropriate intervention within 18 weeks of request for assistance. The primary drivers included early access to service, providing a range of interventions at Universal, Targeted and Specialist level, collaborating with health and education colleagues and a focus on team capacity and throughput. The project is ongoing and will continue into 2022. Progress has been supported by an uplift in staffing; two permanent Band 5 posts and 1 Band 6 post have joined the team.
- In line with Ready to Act, the SLT team has been developing targeted interventions in order to ensure families have access to the right intervention at the right time. These include:
 - Weekly, virtual drop-in sessions which can be accessed by parents, health and education staff
 - Programme for parents of children with language difficulties titled ICAN Make Language Fun, where four sessions of intervention are delivered over a six-week period
 - Trial of virtual webinars for parents who have a concern regarding the development of their child's speech, language and communication skills. Topics included Early Language Strategies, Stammering and Speech Sound Development
- Several members of the SLT team undertook training in January and February 2021 which allows staff to use the various training packages to train education staff on strategies and approaches to use to support participation and inclusion for CYP with various speech, language and communication needs. This will be delivered in schools to build capacity and support for the pupils.
- EMIS has been adopted as a referral management system within the CYP SLT team. All team members have received training and on-going support as required from the AHP Business Unit. It is hoped this system will generate robust statistics on referral and discharge rates and wait times.

The team presented posters at the NHS Ayrshire and Arran QI event in May 2021 and the NHS Scotland Event in June 2021. The titles of these posters were:

- **Collaboration with Classroom Assistants across North Ayrshire**
- **Emergent Role Speech and Language Therapy Student Placements**

- Physiotherapy to align with Ready to Act ambition of Early Intervention and Prevention, where a new model for referral to physiotherapy has been developed in conjunction with Health Visitor (HV) colleagues. This aims to reduce waiting times and offers access to the physiotherapy service to allow appropriate intervention at the optimum stage of the child or young person's development. This supported QI project will be shared with the East and South Health and Social Care Partnerships to facilitate equitable Physiotherapy service provision across Ayrshire. Extended joint working with HV colleagues allows sharing of knowledge and enhances opportunities for cascading universal messages. Children who require targeted and specialist therapy input are identified through this joint working.
- All premature babies were historically routinely followed up by physiotherapy in the community and at the multidisciplinary neurodevelopmental clinic. Now the babies are only seen at the Neuro Developmental Clinic, which offers a single point of contact where the multidisciplinary team can highlight those babies requiring specialised intervention. As a result of this screening, only babies who require ongoing physiotherapy input will be seen in the community. This streamlining of the service allows targeted intervention and prevention to maximise the benefit to the child.
- Paediatric physiotherapy involvement in development of suction guidelines for children with neuro-disability in both acute and community settings.

During the first few months of lockdown, the Children and Young People's Occupational Therapy (CYPOT) service within North Ayrshire identified the potential risk to highly vulnerable CYP who have experienced Adverse Childhood Experiences (ACEs) such as:

- **Abuse (physical, emotional, sexual)**
- **Neglect (physical, emotional)**
- **Household dysfunction (parent/carer with mental health challenges, domestic violence, separation/divorce, incarcerated relative, substance abuse)**

Adult Health and Community Care Services

- The adult Speech and Language Therapy (SLT) Service has extended the skill mix of its staffing resource, with a new SLT Assistant coming into post in March 2020 working with inpatients and outpatients.

- **Work has continued to promote early access to AHPs and preventative approaches:**

- SLT information is available on the NHS Ayrshire and Arran public facing website, including information on accessing SLT services as well as information to support self-management.

- Development of SLT app on NHS A&A app to inform and support self-management and signpost to services/information, with information on augmentative and alternative communication and for adults with acquired communication difficulties.

- Voice information sessions have moved to a digital platform on the A&A YouTube channel and are provided to individuals referred to SLT.

The Dietetic Service has reviewed its GP clinic processes and procedures to ensure all clinic referrals are seen more timeously and in the right place.

There was a rapid move from face to face working and attending GP clinics to digital (telephone or video) consultations in early stage of covid response, using Near Me and a variety of online assessments and consultations. This resulted in reduction in waiting times and easier to access to dietetic clinics for patients.

- Review of ways of working for Dietetic clinics to increase throughput of referrals and spread of workload.

- Significant increases in referrals and caseloads from June 2020 when referral rates began to return to pre covid rates and face to face interventions (where necessary) restarted, coupled with staff isolation/shielding, resulted in challenges to balance capacity and demand.

- Increased use of Microsoft Teams for staff meetings and supervision.

- Deployment of staff to assist in North Ayrshire community hubs as well as retaining substantive roles.

- **Basic Footcare Training is being provided to over 100 + nursing staff at Crosshouse CAU to raise awareness of the importance of good foot health, being able to assess and forward onwards to Podiatry Service where applicable with the key aim of supporting rehabilitation and ultimately improving delayed discharge. Pilot to be rolled across other wards and Ayr Hospital.**



- **Re-launch of Basic Footcare Training for Care Homes pan Ayrshire alongside care home work.**

The Occupational Therapy (OT) team have worked collaboratively with the Multi-Disciplinary Team (MDT) to develop a Sleep Training Package for Professionals.

A successful session was delivered to registrars and Occupational Therapy staff (working within adult services).

Allied Health Professions (AHPs) will make a significant contribution to the implementation of the Major Trauma Network, due to go live in the West of Scotland on August 30, 2021. Through the development of enhanced care pathways across the entire patient journey, AHPs will contribute to improved outcomes for people further to neurological trauma. This will be supported through an increased bed complement within the Douglas Grant Rehabilitation Ward and increases in the AHP/nursing workforce, enabling earlier access to rehabilitation programmes maximising the rehabilitation potential.

- Joint Brooksby and Beechview Health and Therapy Team (HaTT) regular service development meetings have progressed to bring services together to offer a more aligned service. Both teams are working to establish shared MDT initial assessment paper work, shared referral prioritisation framework, a clear falls pathway, and have identified a frailty score indicator tool to use across both teams. HaTT are also trialling IoRN2 as an outcome measure.
- Occupational Therapy within the Older People Service at Woodland View continues to provide personalised, occupations focussed rehabilitation. Introduced gardening sessions to promote social interaction and enable participation in meaningful activity. The use of outdoor space has helped to promote active recovery, rehabilitation and improved health and well-being. Gardening sessions have enabled positive joint working between all members of the MDT in addition to patients and their families who have kindly made donations to the garden.
- A joint approach has been trialled to support the loan of equipment during hospital stay from North Ayrshire Community Stores to Woodland View inpatients following Occupational Therapy assessment of need.
- Occupational Therapy team is supporting a Return to Practice placement.
- Occupational Therapy within neuro team is developing sleep hygiene resources and strategies.
- Application of trauma-informed approaches.
- Occupational Therapy is providing online personalised fatigue management programmes, applying cognitive behavioural and energy effectiveness techniques to lifestyle for people with multiple sclerosis. Aiming to consolidate resources to reduce the impact of fatigue in people with



other neurological and long-term conditions.

- Aiming to embed multidisciplinary goal setting into practice for all stroke patients.
- Occupational Therapy provide 1:1 staff training on Constraint Induced Movement Therapy. Aiming to develop an online learning package for all stroke therapists.
- Within Stroke Occupational Therapists have introduced a new standardised assessment tool, The Box and Block Test, and have completed a successful trial with GRASP (Graded Repetitive Arm Supplementary Programme) and embedded into practice.
- Occupational Therapy has introduced the Train Station Project into Redburn Ward. Wooden place names (using Ayrshire train lines) are spaced along the ward corridor to encourage mobility goals and promote recovery from visual neglect. This encourages continued rehabilitation by ward staff.
- Ongoing roll out of Home-Based Memory Rehabilitation within Occupational Therapy in elderly mental health (EMH).
- Occupational Therapy continues to embrace digital transformation, enabling improved patient experiences and outcomes across the service.
- All outpatient Occupational Therapy records now on EMIS.
- Aiming to consolidate the availability and use of therapeutic apps for physical health conditions within Occupational Therapy.
- Digital Environmental visits are embedded into everyday practice, which positively impacts on therapists' time and has greatly improved the involvement of carers in discharge planning.
- Prioritise staff health, well-being and feedback. Supporting and safeguarding staff members' return to work. Promote daily well-being walks and the use of outdoor space for staff.
- Ongoing physiotherapy service development within the multidisciplinary Beechview and Brooksby Health and Therapy Teams to further align both services, develop mutual documentation and service delivery standards.
- Working with community physiotherapy staff across Ayrshire to develop an online resource for Care

Home staff in Ayrshire. This resource will include advice and basic early interventions in areas such as seating, walking aids, falls prevention and mobility for care home residents.

Podiatry continues to perform a key role across Ayrshire and Arran, providing support and expertise to people with a foot health related matter.

- Devolution of Podiatry Services Project with final approval March 2021. As of April 1, the Podiatry Service pay and non-pays budgets aligned to respective HSCP areas. This new model provides opportunity to support leadership and skill development at all levels within the podiatry staff group skill mix and succession plan for the future workforce needed to deliver on Caring for Ayrshire in the next 10 years. This model aligns with the national Transforming Roles agenda which places specialist, advanced practice and consultant AHP roles at the centre of a modern and realistic medicine driven Health and Social Care Service.
- Podiatry continues to maximise the AHP contribution to MDT working, e.g. all lower limb wounds currently under District Nursing teams transferred to Podiatry.
- Continued to prioritise the well-being of staff; staff feedback and actions prioritised.
- 70 per cent service transferred from Trakcare to EMIS.

The Intermediate Care team (ICT) has continued to embrace new ways of working with the majority of staff working from home. This has resulted in a review of ways of working and how referrals are dealt with and an increase in the use of digital platforms.

The ICT Team continues to prevent hospital admissions by responding rapidly to referrals and through enhanced ICT can provide and support to people in their own homes.

Mental Health Services

- Physiotherapy CAMHS secondment – scoping physio role in autism diagnosis pathway and wider CAMHS team. Setting up National CAMHS physio forum. This is already proving effective and the outcomes of this secondment will show need for continued physio staffing within CAMHS. Aspiration to establish physio roles in CAMHS on ongoing basis.
- There is an ongoing review of community eating disorder services in NHS AAA. Physiotherapy currently have no staff in this service, but evidence, including information from the national physio



eating disorders network, shows the benefit of this and we will work to develop the physio role in this area.

- Successful physiotherapy bid for funding for three Covid19 recovery money posts – due to start summer 2021 until March 2022 – to review Physio community adult physical anxiety management services, physio input to elderly long stay wards and scope role of rotational b5 post in learning disabilities.
- Recruited to B3 LD physio TI post to release qualified physio staff time to see patients in LD assessment and treatment ward at Woodland view – PDSA cycles of change regarding input ongoing.
- Successful audit cycles in East LD physio re the introduction of patient management database to improve flow through LD physiotherapy services – now being rolled out through other LD services across Ayrshire.
- MH and LD physiotherapy staff surveyed other physio staff across Ayrshire to gauge staff confidence in working with patients with LD/MH conditions and to identify training needs. Work ongoing to deliver on results.
- Review of team meeting format – introduced bulletin style meeting with more time for targeted discussion and service improvement – being reviewed on regular PDSA cycles.
- Introduction and delivery of regular clinical and line management supervision at all levels within LD/ MH physio services, following group and individual formats dependent on staff need.

The Dietetic mental health service has undergone a rapid move from face to face working to digital (telephone or video) consultations in early stage of covid response, using Near me and a variety of online assessments and consultations. This resulted in reduction in waiting times and easier to access to Dietetic clinics for patients.

- Increased staff absence due to staff isolation and shielding resulting in the remaining staff stretched to meet increased demand.
- Redeployment of Dietetic staff to assist in acute services in conjunction with retaining current roles.
- Funding secured for two posts within Dietetic Mental Health for Woodland View inpatients and adult community mental health, with recruitment under way.

- Dietitian within CAMHS has completed her FBT training (Family Based Treatment) specifically for eating disorder (ED) treatment.
- Learning Disability dietitians co-chairing national Dietetic Learning Disabilities forum.

2. AHPs will ensure effective partnership working

AHPs continue to work collaboratively with partners and service users. Some examples of this are:

Children and Families

- Speech and Language Therapy (SLT) funding secured from education which has allowed for the development of an attainment project with a focus on supporting children and young people with speech, language and communication needs in targeted mainstream schools and ASN provisions. This has been developed in collaboration with colleagues from educational psychology and schools. Funding has been extended to March 2022 and work is supported by SLTs at Band 5, 6 and 7 on a part-time basis.
- The SLT service manager and one team lead have contributed to the Early Years Review in collaboration with health and education colleagues.
- Preliminary discussions have taken place between SLT and Health Visiting Team Leads with a view to establishing a working group focused on collaborative practice.
- One SLT team member has provided information sessions to educational psychologists, teachers and Early Years practitioners on SCERTS (Social Communication, Emotional Regulation, Transactional Support for individuals with Autism Spectrum Disorder). Discussions have taken place with education colleagues on developing a working party to help embed this framework in to practice across North Ayrshire. The same team member has been linking with SLT colleagues in other health board areas to share practice.
- Work undertaken by the SPIN team has been recognised by colleagues in other areas including Educational Psychology in Inverclyde and Speech and Language Therapists in Argyle and Bute. These colleagues are interested in replicating work undertaken with ICAN toolkits and Communication Champions in their own areas.
- SLT from the Professional Learning Academy offered training to students at Ayrshire College on

Speech Sounds and Phonological Awareness which 65 students attended virtually.

- Physiotherapy are working closely with HV colleagues. Joint visiting improves communication and offers optimum service for children/YP and families.
- The SPIN team has produced a bump to baby video and developed and delivered a bump to baby webinar, an early years resource pack and a health visitor's resource pack. An abstract regarding this project has been submitted to the CYPIC QI Awards 2021.
- Paediatric physiotherapy continues to maximise the AHP contribution to MDT working as part of the neurodevelopmental clinic.
- Ongoing joint working with paediatric physiotherapy and podiatry to develop pathways to streamline the referral system and improve the CYP journey.
- Close working by Physiotherapy with nursing colleagues for the development of the suctioning guideline.
- The Children and Young People's Occupational Therapy (CYPOT) service are participating within a collaborative working group with the Early Years Inclusion Support Service (EYISS) to improve joint working for pre-school children and young people transferring into Primary One with additional support needs.
- The Occupational Therapy (OT) service have successfully piloted an advice line for professionals. This has ensured allocated time for clinicians to deal with telephone enquiries linked to new Requests for Assistance (RFA).



Adult Health and Community Care Services

- A secondment opportunity has been developed for a new post in Speech and Language Therapy working as part of the MDT on MH wards at Woodland View.
- A new full-time SLT Band 6 inpatient post for neuro rehab and major trauma will allow SLT to be embedded into the MDT in Douglas Grant Rehabilitation Ward.
- Links have been formed with the newly established Care Home Liaison Team in order to maximise

how we cascade information and resources and build stronger working relationships with partners in care homes across North Ayrshire.

- Training has been delivered to AHP colleagues in the use of Talking Mats.
- Ongoing joint working with community occupational therapy (OT) colleagues to allow support with HaTT occupational therapist completing specification request for major housing adaptation for rehab patients.
- Team supporting the induction of new OT staff joining council teams – shadow visits to HaTT.
- HaTT assisted stroke outpatient service at beginning of pandemic by telephone contact establishing contact, raising awareness of situation and identifying needs.
- Occupational Therapy have promoted a rehabilitation culture within Douglas Grant ward. To enable completion of required patient intervention sessions which need assistance from two carers, Occupational Therapy have carried out joint therapy sessions with nursing staff on a regular basis. This has facilitated a greater awareness of the role of the OT, patient challenges within home environment and transition planning.
- Occupational Therapy are aiming to introduce a patient peer support group in conjunction with Chest Heart & Stroke within Redburn ward to reduce social isolation
- Occupational Therapists within EMH are working alongside North Ayrshire Council colleagues to assist in implementation of the LACL's (Allen Cognitive Level Screen) tool when assessing someone with Dementia for stairlift provision.
- Occupational Therapy have worked creatively and collaboratively to continue to provide quality practice placements. Offered shared student placement across health and social care.
- The North Community Physiotherapy Service has been delivering walking aid competency training to selected non-physiotherapy staff from Oct 2020. This competency training was well established for physiotherapy support workers but has been extended to OTs and nurses in the two Health and Therapy Teams. This enables nurses and occupational therapists to issue or replace sticks and wheeled zimmers if they see a need whilst delivering their own clinical interactions. Patients therefore receive their walking aid promptly, are safer sooner and in a few cases need no further involvement with



physiotherapy. This competency training has started to roll out to the North Ayrshire Community OT service too.

- Dietetics continue to work collaboratively with community colleagues both health and social care to ensure service users' needs are met to keep them well in their own homes.

Mental Health Services

- The Mental Physiotherapy service has registered with TURAS learn as suicide skills educator, and working with choose life co-ordinators in Ayrshire, developed and delivered staged training for physio staff in vascular services and MH/LD services.
- DSIL (dementia specialist improvement lead) trained MH physio working with Dementia trainer and providing input to the dementia carers academy. Second physio successfully recruited to DSIL course to support this.
- Learning Disability Physio worked with the CSP to set up a network of hydrotherapy practitioners across Scotland and succeeded in getting national agreement from ARHAI/Scottish Government to accept CSP hydro guidelines to achieve and direct local agreement to reopening of hydrotherapy pool and restarting of hydrotherapy sessions locally. Working group established to continue this.
- Learning Disability Physios working with PAMIS and other postural care providers to influence the national postural care strategy, and leading local rollout of this.
- Dietetics have developed and undertaken a bespoke programme within Ward 5 for clients undergoing addictions rehabilitation, which has evaluated well to date.
- Dietetics have continued with group education sessions for Learning disabilities clients within the assessment and treatment unit.

3. AHPs in North Ayrshire will continue to embrace the challenges and opportunities from the Covid 19 pandemic

Despite continued high demand from the remobilisation of services post pandemic, AHPs will strive to adapt to challenges and embrace new ways of working. During the initial phases of the pandemic, some services were paused allowing staff to focus on supporting colleagues and priority patients.

There was a swift move to the use of Digital Platforms, i.e. Near Me for consultations and Microsoft Teams for staff meetings. Both brought opportunities and challenges, however these practices have now become the 'new normal' and are part of everyday practice.

Some of our achievements through Covid:

- **Redeployment of staff to acute areas to support ITU and respiratory services**
- **Weekend working to support ward nursing staff in hospitals**
- **Continued community visits to support the most vulnerable with ongoing use of PPE**
- **Quick reopening of paused services whilst continuing to sustain service needs**
- **Rapid embracing and ongoing use of digital technologies**

Some examples of this work are as follows:

- Speech and Language services took a snapshot from April to June 2021. 450 Near Me appointments were offered to children and a further 100 were offered to parents.
- In addition to meetings and consultations, training has been offered in many areas for staff and service users.
- The use of Near Me for swallowing assessments through an innovative SLT project partnering with an online training organisation. This has provided free access to online training modules for our partners in Cooriedoon, Montrose House and Arran War Memorial Hospital to support the development of skills in nursing staff. Access to these modules and additional SLT led coaching sessions are upskilling staff to become remote swallow partners, allowing SLT to undertake eating and drinking assessments using Near Me. This work was presented at a national conference in May 2021.
- Provision of stroke self-management and support group via Zoom video platform in conjunction

with Chest Heart & Stroke.

- Working from home for all services and flexible working patterns to support working families whilst continuing to deliver a remote and face to face community service.
- Many staff redeployed to acute services from MH – although challenging in MH/LD wards, this has improved communication between acute services and MH/LD services, enhancing the patient journey.
- Introduction and roll out of new Peoplesafe lone worker system across team from Feb 2021.
- Introduction and ongoing roll-out of Practice Supervision to support staff despite service pressures.
- Regular Team meetings for staff on Teams.
- Many AHP staff training as vaccinators and continue to do this in addition to their core roles.
- The successful ongoing training of student practitioners throughout the pandemic.
- Change of work practice with staff working weekends to assist with accommodation issues due to social distancing.
- Assessment and Treatment service move to Woodland Views involved the training of all ward staff on healthy eating/general well-balanced diet for patients within unit.
- Podiatry staff during crisis situation supported acute sites providing personal care working alongside nurse colleagues.
- Approximately 9 staff completed vaccination modules to support mass vaccination centres pan Ayrshire outwith Podiatry hours.
- A group of SLT Band 5s used quality improvement methodology to develop a Near Me Digital Project for Children with Speech Sound Disorders. Feedback highlighted this was received positively by parents and children. The team are now in Cycle 3 where the focus is on upskilling other staff through a weekly digital drop-in session and skill sharing at staff meetings.



- Introduction of Walk and Talk to provide physical activity, support anxiety management and reduce social isolation.
- The Occupational Therapy team worked in collaboration with the Green Health Partnership to provide purposeful occupation during lockdown through provision of green activities and craft activities via door-stop deliveries.

AHP Workload and Workforce Exercise

A focussed piece of work was undertaken in early 2021 to assist AHP services to better understand their current capacity as they began to mobilise out of the Covid-19 pandemic, whilst also beginning to think through the future shape of such services aligned to local strategy - such as the North Ayrshire Health and Social Care Partnership strategic plan and Caring for Ayrshire agendas.

The service areas of greatest concern in terms of resource versus demand were identified in a paper presented to the Ayrshire Covid 19 Workforce Planning Group (now Workforce Planning and Improvement Group) in August 2020, and progressed through this approach. From a North Ayrshire perspective, these service areas included:

- **Primary Care Dietetics**
- **AHP input to the Adult Community Mental Health Team**
- **Children and Young People Speech and Language Therapy Service**
- **AHP input to Adult Community Hospital inpatient services – neurological, stroke services and general adult rehabilitation**
- **Adult Community Rehabilitation**

Data was triangulated from multiple sources, using common staffing methodology to provide a robust snapshot of the current position within AHP services.

Safety Huddle Template :

The Covid-19 AHP Safety Huddle template was co-produced using improvement methodology by the Chief Nursing Officers Directorate Health & Care staffing team, Scottish Government advisors and volunteer clinical stakeholders from across Scotland.

It was developed in the absence of AHP workload tools to provide a consistent mechanism for AHP teams to identify and articulate staffing requirements in real time, mitigate risk and escalate if required.

This template was completed for two weeks in April 2021 to provide a real time snapshot of the clinical areas previously highlighted.

Professional Judgement Tool:

The Professional Judgement tool is completed based on the users' retrospective professional judgement of how many staff (registered, experienced registered, and unregistered) were required to safely provide the care or input required in a clinical area over a set timeframe.

This tool was completed retrospectively at the end of each session, for the same 2 weeks in April 2021 as the safety huddle template, in the clinical areas previously highlighted.

Indicators of quality and local contextual information were also considered in drawing conclusions around the workforce position for the previously detailed areas. The outputs and implications of this exercise are now being discussed within the Partnership Senior Management Team.

4. Key challenges experienced in 2020

- The AHP workforce comprises mainly of small teams, which are sensitive to unplanned leave, with limited capacity to cover planned leave at times.
- Continuous high demand for AHP services, with waiting times in some areas.
- Unmet need in certain areas – which is not always simple to quantify.
- Collection of service performance data in a simple, time efficient manner.
- Limited administrative capacity.
- The duration of recruitment processes, and recognition that some posts have proved difficult to recruit to.
- Much less support for children and families during lockdown which could affect children and young people.

COVID related challenges for staff and patients:

For staff these include:

- **Staff shortages due to self- isolation.**
- **Limitations to practice of digital consultations and unable to assess some patients face to face.**
- **Impact on staff well-being of the extended pandemic with the need to continue services.**

For patients these include:

- **Inability to see clinicians face to face.**
- **Longer waiting times with some services being paused.**
- **Less access to support services.**

5. Plans and priorities for 2021

The AHP Service priorities for 2021 align to the NAHSCP Strategic Bridging Plan, and are to:

- **Progress the remobilisation of Allied Health Professional services**
- **Adopt key pandemic learning to improve patient access and treatment**
- **Maintain staff well-being.**

This will be undertaken by:

- Developing AHP workforce baseline, including professional headcount, service demand and performance.
- Improving access to AHP services through MDT processes to ensure service users access required treatment in an appropriate timescale. This includes the use of effective digital technology/Near Me/Teams.
- Monitoring the well-being of AHP staff.