

Subject:	Annual Performance Report 2019-20
Purpose:	To approve the publication of the North Ayrshire Health and Social Care Partnership (NAHSCP) Annual Performance Report 2019-2020
Recommendation:	Integration Joint Board (IJB) to approve the publishing of Partnership's 2019-20 Annual Performance Report

Glossary of Terms	
NHS AA	NHS Ayrshire and Arran
NAHSCP	North Ayrshire Health and Social Care Partnership

1.	EXECUTIVE SUMMARY
1.1	Section 42 of the Public Bodies (Joint Working)(Scotland) Act 2014 requires partnerships to publish an annual performance report setting out an assessment of performance in planning and carrying out the integration functions for which they are responsible.
1.2	Guidance for Health and Social Care Integration Partnership Performance Reports (published by the Scottish Government, March 2016) was followed to ensure the content of our performance report met the requirements set out in the guidance.
1.3	The legislated publication date for Annual Performance Reports is 31st July, however, the Scottish Government understood that Integrated Authorities (IA) may not be able to publish their final 2019-20 reports by the 31st July deadline and may postpone publication until 30th September in accordance with provisions made in the Coronavirus (Scotland) Act 2020 .
1.4	Latterly the publication date being extended to 30th September 2020 as a resultant impact of the COVID-19 pandemic on operational and support services was agreed at the Performance and Audit Committee on the 25th June 2020.
2.	CURRENT POSITION
2.1	With the agreed extension to the publication of the annual report a public notice was added to the partnership website stating the reason for the publication being extended to 30th September.

2.2	A draft of Annual Performance Report was presented at the Performance and Audit Committee on the 03rd September for initial review and following discussion a few amendments were made and the final document completed.
2.3	The annual report meets the minimum requirements as set out in the Guidance for Health and Social Care Integration Partnership Performance Reports (published by the Scottish Government, March 2016). We continue to build on this minimum requirement by including dedicated sections reporting on Children and Justice services.
	<p>The report is the collation, through collaboration with stakeholders, of the significant service highlights relating to the works and initiatives undertaken by partnership services in the support of our strategic plan objectives.</p> <p>These highlights include cross-service exemplars:</p> <ul style="list-style-type: none"> • Drug and Alcohol Recovery Service: maintaining the of low levels of methadone prescribing at 757 people at year end • Money Matters Team: enabling over £15M in life supporting entitled benefits to be accessed • Children and young people becoming accommodated: at year end the number of children accommodated in external placements was 26; a reduction from 33 at the beginning of the year • Care at Home and Community Alert Services: service inspection added to the Very Good grading for Care and Support with an Excellent grading for Management and Leadership <p>These specific highlights are representative of the varied services provided by the partnership and the role they play in the support of some of the most vulnerable people in the community to live independently for as long as possible.</p>
2.4	<u>Publication</u>
	This annual performance report is part of a suite of partnership public-facing documents. These documents are available from the NAHSCP website, www.nahscp.org .
3.	PROPOSALS
3.1	The NAHSCP 2019-20 Annual Performance Report is published by the revised deadline of 30th September 2020.
3.2	<u>Anticipated Outcomes</u>
	Informing the people of North Ayrshire and wider stakeholders on the progress of health and social care integration, specifically relating to:

	<ul style="list-style-type: none"> • Outcomes for local people; • Locality health and social care needs; • Service provision (including lead partnership responsibilities and commissioned services); • Transformational Change; • Budget and financial information.
3.3	<u>Measuring Impact</u>
	With the publication of the Annual Performance Report 2019-20 the partnership will have met its obligations under the Public Bodies (Joint Working)(Scotland) Act 2014.
4.	IMPLICATIONS

Financial:	There are no additional financial implications
Human Resources:	There are no implications for staff
Legal:	There are no legal issues.
Equality:	No issues
Children and Young People	No issues
Environmental & Sustainability:	No issues
Key Priorities:	This would ensure we fulfil our obligations in the Integration Scheme.
Risk Implications:	None identified.
Community Benefits:	Community is aware and informed about community-based health and social care services, plans and outcomes.

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

5.	CONSULTATION
5.1	Staff, partnership stakeholders, the Partnership Senior Management Team (PSMT) and IJB Performance and Audit Committee (PAC) were consulted on the Annual Performance Report.
6.	CONCLUSION
6.1	The Integrated Joint Board are asked to consider and approve the publication of the North Ayrshire Health and Social Care Partnership's 2019-20 Annual Performance Report.

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North Ayrshire Health and Social Care Partnership



Annual Performance Report 2019-20

Vision:

all people who live in North Ayrshire are
able to have a safe, healthy and active life

Reflections from Stephen Brown

Our annual performance report 2019-20 reflects on how Partnership services have contributed to meeting national and local priorities over the year. We have continued to deliver safe, sustainable health and social care services throughout the year and, although we have faced significant pressures in the areas of mental health, hospital discharges and some aspects of our children's services, there has also been some significant progress and success.

These highlights include the continued progress around Recovery in our alcohol and drugs services, including the sustained reductions in the number of individuals being supported via methadone prescriptions. Our Money Matters Team supported people across our communities to successfully claim for over £15 million of benefits that they were entitled to but not previously receiving. The positive inspection of our care at home and community alert services retaining a grading of *Very Good* for Care and Support and adding to this with an *Excellent* grading for Management and Leadership highlights the significant role these services play in supporting some of our most vulnerable people to continue to live independently for as long as possible.

Our greatest challenge remains our ability to manage demand within budget. The HSCP ended the year with a £0.154m overspend. This will be added to the debt to the Council carried forward from previous years.

Our transformation plan continues to drive forward our programme of improvement aligned to bringing services closer together to improve the health and social care outcomes for the people of North Ayrshire. These plans ensure we can use our resources effectively but also ensures that services are mobilised effectively to meet the demands of the COVID-19 pandemic through 2020-21 and beyond.

As committed to last year, I engaged with over 2,000 staff members through our *Thinking Different Doing Better* experience, and we were able to extend the experience to local community groups as well as hundreds of Health and Care students from Ayrshire College. The suggestions, feedback and conversations provided through these sessions has helped inform our transformation programme and will also inform our forthcoming refresh of our Strategic Plan.

I want to thank all of our partners and all of the staff working within North Ayrshire Health and Social Care Partnership for their continued hard work and dedication to improving the lives of people living in North Ayrshire.



Stephen Brown
Director, North Ayrshire Health and Social Care Partnership

Contents

Visions, Values and Priorities	2
Structure of this report	3
Performance related to National Health and Wellbeing Outcomes	4
National Indicators	27
Performance related to Children and Justice Services Outcomes	31
Localities	45
Transformation Programme	55
Lead Partnership Reporting	60
Inspection of Services	66
Financial Performance and Best Value	70
Appendix	81

Vision, Values and Priorities

North Ayrshire Health and Social Care Partnership (NAHSCP/the Partnership) is striving for a vision where:

“All people who live in North Ayrshire are able to have a safe, healthy and active life”

Our Partnership includes health and social care services within **Health and Community Care Services, Mental Health and Learning Disability Services** and **Children, Families and Justice Services**.

In this, our fifth annual performance report, we look back on the progress we have made, share some of our successes and reflect on some areas that have proved challenging.

The partnership refreshed the three-year Strategic Plan, this report aligns with the second year of our second Strategic Plan. The new Strategic Plan allowed us to confirm with the people who use our services and North Ayrshire residents and staff that we should continue to focus on these five **priorities**:

- Tackling Inequalities
- Engaging Communities
- Bringing Services Together
- Prevention and Early Intervention
- Improving Mental Health and Wellbeing

People who use our services and North Ayrshire residents will experience our Partnership **values** in the way our staff and volunteers engage with you and how we behave. We will:

- Put you at the centre
- Treat you with respect
- Demonstrate efficiency
- Care
- Be inclusive
- Embody honesty
- Encourage innovation

Structure of this report

We have measured and evaluated our performance in relation to:

- **Scottish Government National Health and Wellbeing Outcomes**
- **Children's and Justice Services Outcomes**
- **Local measurements**

The North Ayrshire Health and Social Care Partnership continues to have lead partnership responsibilities across Ayrshire and Arran for Mental Health and Learning Disability Services as well as Child Health Services (including immunisation and infant feeding). We have reflected on some of the highlights and challenges of leading these services across Ayrshire.

We will show that all our services (those provided by our Partnership staff and those provided by other organisations on our behalf) are providing high quality care and support to the people of North Ayrshire.

Finally, the partnership continues to face financial challenges in delivering and improving services from within the available budget. During the year we have made significant progress towards achieving financial balance and overall service sustainability. We have detailed our financial position and reflected on how we continue to provide assurance that we are delivering Best Value in North Ayrshire for Health and Social Care services

1

Performance in relation to National Health and Wellbeing Outcomes

As we completed our fifth year, the Partnership continued to focus our efforts on providing services that improve the lives of all the people living in North Ayrshire.

Our five strategic objectives link directly to the nine national Health and Wellbeing Outcomes. These outcomes provide a roadmap for us and we can demonstrate progress against each.

Outcome 1

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

Our Highlights

58% increase in referrals/ signposting to the Community Link Workers

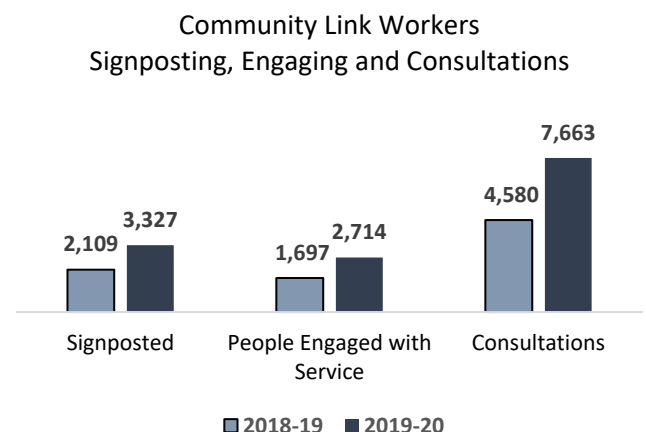
67% increase in Community Link Worker consultations

76% Reduction in Alcohol intake for those supported by NADARS

- 1.1 **The Community Link Worker Service** continues to provide a valuable support within all GP Surgeries in North Ayrshire. There was a total of 3,327 people signposted or referred to the Community Link Worker service in North Ayrshire from April 2019 to March 2020. This is an increase of 58% from the previous year. 82% of the people engaged with the service (2,714). The significant increase in consultation numbers is likely as a result of the additional staff members being fully embedded within the team.

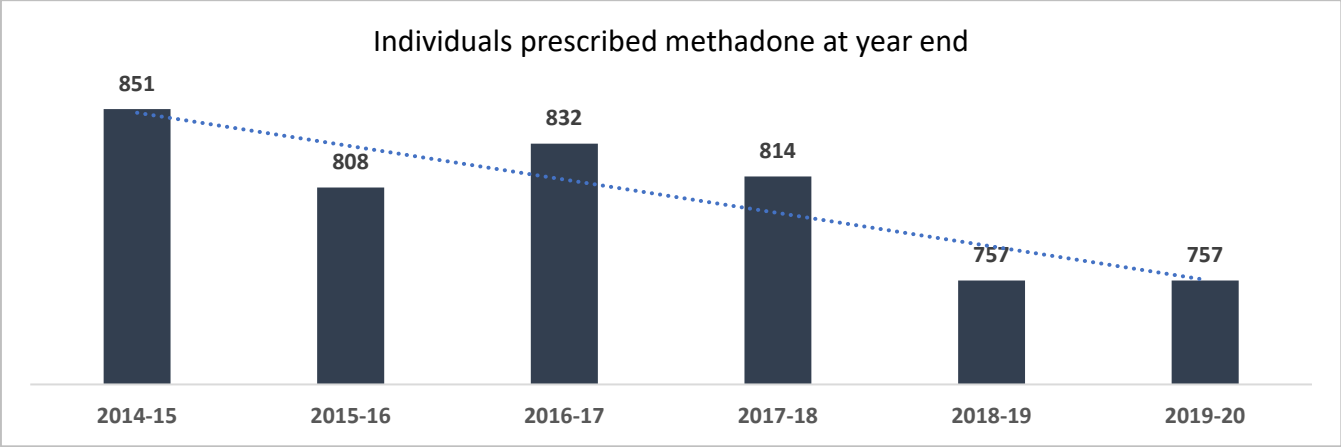
The three highest recorded reasons for attending the service are for:

- Mental Health and Wellbeing
- Financial
- Social



- 1.2 **The Health & Wellbeing Service** delivered by KA Leisure received 773 new referrals and undertook 2,695 classes, with a total of 42,132 attendances at supported physical activity sessions in 2019/20. The **Mind and Be Active Service** delivered by KA Leisure received 276 new referrals, undertook 490 supported classes and had 11,041 attendances at specific Mind and Be Active supported physical activity sessions in 2019-20. Across the year there were 885 follow up consultations completed at 6/12 months and 114 referrals made to health care providers or external agencies.

1.3 The **North Ayrshire Drug and Alcohol Recovery Service (NADARS)**, has continued to demonstrate high levels of performance by meeting national and local standards and targets, such as, access to treatment waiting times, provision of alcohol brief interventions (ABIs), the roll out of Naloxone supplies and maintaining a low level of methadone prescribing to individuals.



The team continues to identify new ways of working to provide a more agile and streamlined service and further improve performance. This work has been evidenced by the delivery of early intervention services in the delivery of Alcohol Brief Interventions (ABI).

Target set by Scottish Government – Priority Settings	3,419
Total ABI delivery in Priority Settings (Ayrshire & Arran)	3,524

Target set by Scottish Government in Wider Settings	855
Total ABI delivery in Wider Settings (Ayrshire & Arran)	2,927

People being supported by NADARS during 2019 -20 can be evidenced further by;



- 76% Reduction in alcohol intake
- 66% Reduction in non – prescribed drug use



- 51% Improvement in physical health
- 50% Improvement in physiological health
- 50% Improvement in social functioning

Outcome 2

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

Our Highlights

58% increase in service users receiving Care at Home Support

4% increase in service users receiving Community Alarm

Emergency Admissions 2% above 2015-16 baseline

- 2.1 The number of Service users being provided with **Care at Home** support increased to 3,527 in 2019-20 from 2,230 in 2018 -19, a 58% increase. The number of people receiving a **Community Alert** increased from 4,912 in 2018-19 to 5,103, a 4.5% increase in support.
- 2.2 Through independent inspection, '**Excellent**' grades were awarded to Three Towns, North Coast and Arran Care at Home Service and Irvine, Garnock Valley & Community Alarm for leadership. The Inspection report stated that;



"People receiving the service should be sure that the service is well managed. We found the service had an excellent management team who were skilled and highly motivated in their role. Managers showed and promoted leadership values at all levels of the service"

The inspection sought comments and views about the quality of service through the distribution of questionnaires, as well as, telephone calls and emails to service users, relatives and carers. Additionally, service users were visited in their own homes and inspectors spoke to a small group of people who received support from the service. Some of the comments from across the inspections are captured below:



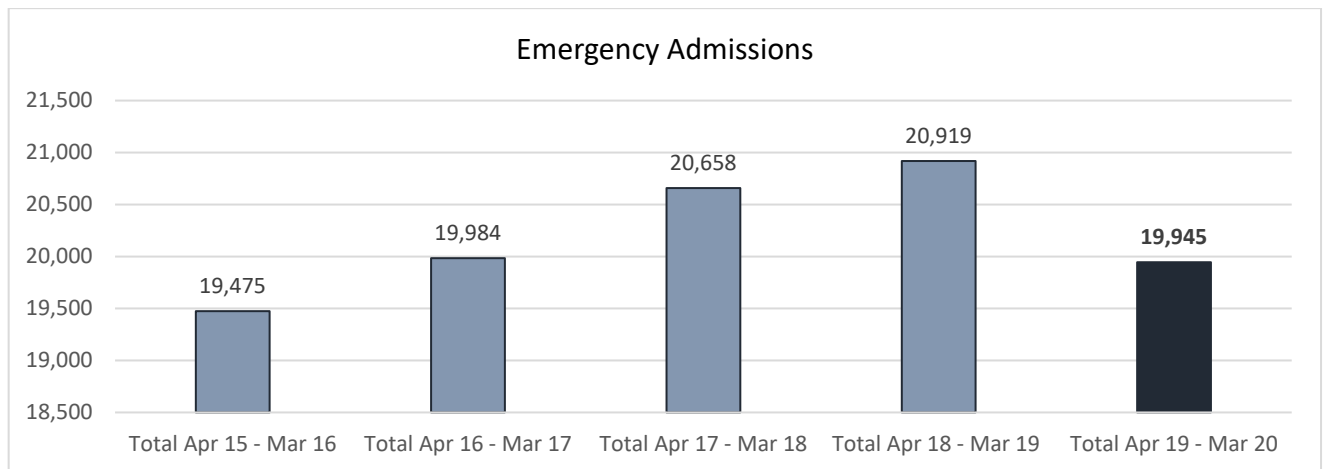
“I am very grateful for the service North Ayrshire Council Care at Home team provide, it allows me to stay at home and they help me to be as independent as possible”

“Staff are so helpful and caring”

“The girls have been a great help to my recovery”

“I am really happy with and very grateful for the service provided”

- 2.3 A report was presented to the Integration Joint Board on the supports that the Partnership will provide Community Alert and Telecare users during telecommunication providers switch to Digital from Analogue telephony systems, [Community Alarm/ Telecare Service Transition from Analogue to Digital](#).
- 2.4 At 31 March 2020 we have seen an improvement in Emergency Admissions compared with 2018-19 and nearing the initial the Ministerial Strategic Group baseline year of 2015-16 with only 2% variance.



Outcome 3:

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

Our Highlights

The Dirrans Centre carried out a total of 40 'What Matters to You' conversations

The Health and Social Care Partnership received a total of 54 compliments

Creation of "Opening the Shutters!"

3.1 **The Dirrans Centre** carried out a total of 40 '***What Matters to You***' conversations in June 2019. The 'What matters to you?' conversation aims to encourage and support more conversations between people who provide health and social care and the individuals, families and carers who receive that care. This aims to shift the focus from '*what is wrong with you*' to '*what matters to you*'

The key findings from the conversations were as follows;

- Attending the Dirrans Centre
- Having regular support and meaningful activities
- Family
- Having appropriate support as they grow older
- Mobility
- Getting out into the Community/accessibility
- Financial support

This positive re-framing of conversations using a person-centred approach resulted in the ability to address personal issues and difficulties raised during the conversations. From these conversations it was agreed that the following would be actioned;

- Individuals with accessibility issues would be supported to obtain a **MyBus** pass which was successfully advocated to cover the Garnock Valley area. Staff also support individuals by travelling with them on public transport to build confidence and promote independence.
- Events would take into consideration the wider family unit, with the aim of building positive relationships to enable open and honest conversations.
- Individuals are referred to the Money Matters team and supported with their financial worries to enable them to continue attending and benefitting from the service. This will help attendees cut costs and budget where necessary.

- 3.2 During 2019-20, **69** compliments (54 Social Care; 15 NHS) were recorded by the Health and Social Care Partnership relating to the service provided and the professionalism demonstrated by partnership staff. A sample of the compliments received include:



Compliments

Compliment to staff at the Eating Disorder Clinic in Irvine. Their support and guidance helped service users get well. Family wrote email to comment on the determination of staff

Thankyou letter, thanking staff for treating with consideration and kindness during recent stay in Ward 1 Rehab at Woodland View

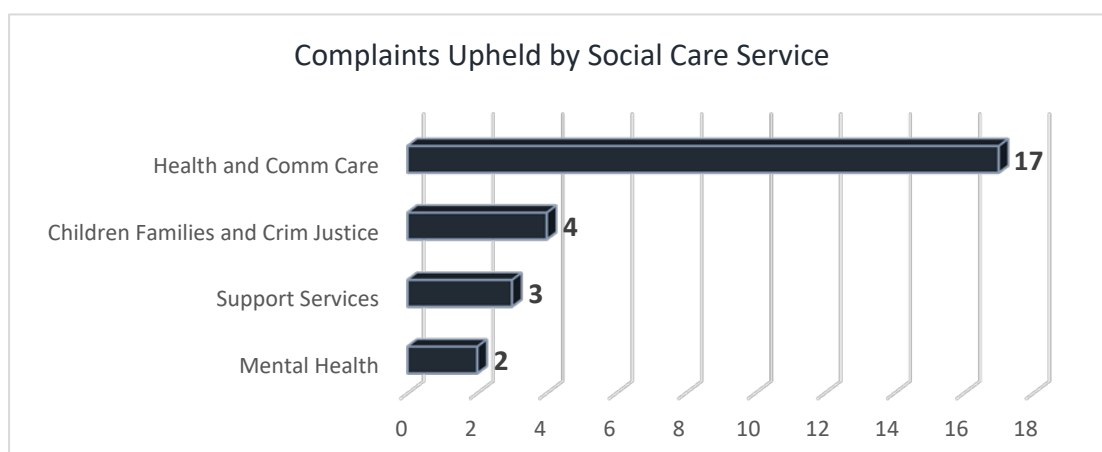
Compliment received in relation to adaptations in place enabling SU to safely and confidently use stairs. Grateful for HSCP allowing work to go ahead.

The gentleman has been attending the Douglas Grant Rehabilitation Centre for the last 6 weeks and wished to let us know that he feels the Centre has a wonderful team of staff.

Compliment to care at home staff with gratitude on behalf of family for support they provided to the service user. Their professionalism and dedication made it possible for him to remain at home until he passed away.

"Service Access Irvine member of staff received thank you for all aids provided and for service they provided"

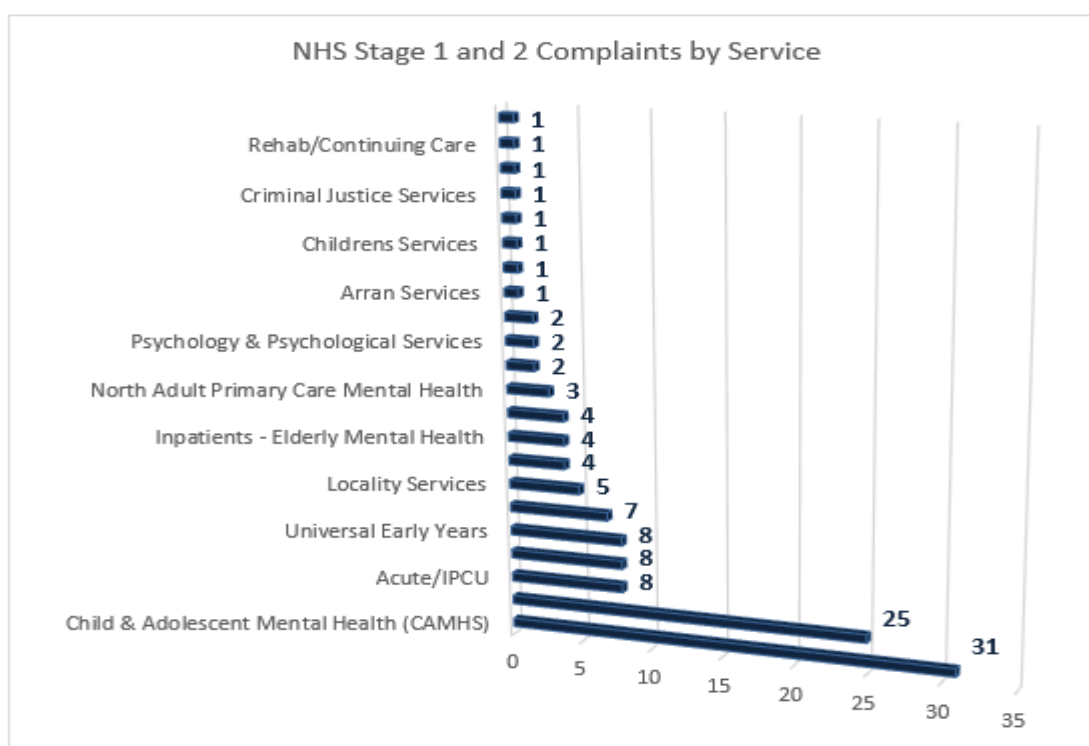
- 3.3 In total 246 complaints were received, 125 Social Care; 121 NHS. Of the Social Care complaints 20.8% (26) were upheld across all service areas.



Of the 26 upheld complaints, 7 (27.9%), were categorised as relating to a vulnerable person. In terms of categories the table shows the recorded category and whether it related to a vulnerable person.

Complaint Category	Upheld	Vulnerable Person
Communication	5	1
Missed/late appointment	1	0
Sensitive issue	1	1
Service provision/delivery	9	2
Staff behaviour (incl. alleged or perceived)	6	1
Waiting times	3	1
Other	1	1

Of the 121 recorded North Ayrshire NHS complaints, 40 were Stage 1 and 81 were stage 2 complaints.



Complaint Category	Stage 1	Stage 2
Attitude and behaviour	8	13
Clinical treatment	18	43
Communication (oral)	1	7
Communication (written)	3	1
Competence	0	1
Date for appointment	7	10
Patient property / expenses	1	0
Personal records	2	2
Premises	0	1
No Category	0	3

- 3.4 Our Community Link Worker Service was involved in the creation of a mental health and wellbeing group called **Opening the Shutters**. This group meets weekly and has an active presence on social media. The age range is 18 to 80 giving people a safe and secure space to feel part of something and not feel alone in the world of mental health. The group is supportive of each other and pick topics each week to discuss.



"I hit rock bottom and didn't know how I was going to come through that journey, thanks for caring reaching out and listening I can now see light at the end of the tunnel and getting stronger every day!"

"I personally think this an amazing group, we trust and support each other through out struggles"

"This group is organised and maintained from the heart, where we find the energy to keep going"

Outcome 4

Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services

Our Highlights

Successful Pilot of OT being placed in General Practices

97% increase in Naloxone kits distributed in Ayrshire and Arran

100 key partners attend addictions summit

- 4.1 An **Occupational Therapist** (OT) has been funded temporarily in the Largs Medical Group practice one day per week and early indications show positive outcomes. The OT provides follow up appointments helping people get people back into work and preventing long term mental health problems.

Feedback from GP's and patients offered the following when asked what has been beneficial about having an OT based within the practice;



GP

"Practical skills to patients so they can move forward in their lives, good to intervene early before symptoms entrenched"

"Enable trust to be built up in the MDT. She has helped us to understand which patients may benefit from her input"

"As she is based here, we can speak to her directly, and tell our patients that she will see them here rather than them having to go elsewhere"

Patients

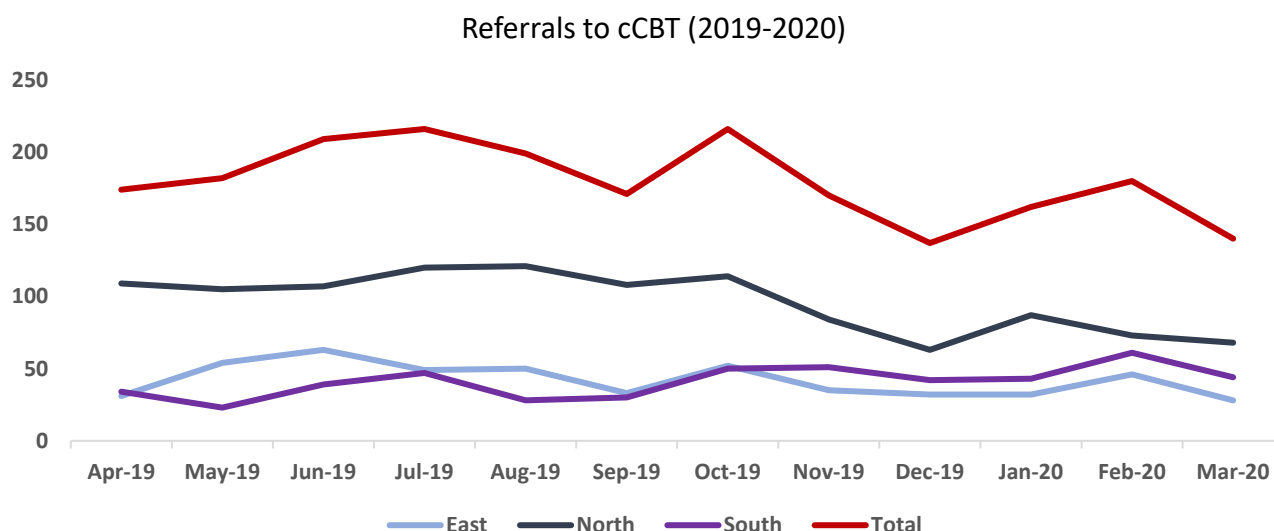
"I got support returning to work following a period of depression and anxiety. I was supported to evaluate myself and put strategies in place."

"I made good progress with managing my anxiety. Also made beneficial changes to my lifestyle."

"My sleep has improved, and I now have a clear mind and improved lifestyle."

- 4.2 **Beating the Blues and Silver Cloud** are interactive online treatment programmes that use cognitive behavioural therapy (CBT) to help people experiencing mild depression and/or anxiety. The programme involves completing exercises and learning CBT techniques that can help with depression and anxiety. To embed the learning and techniques each week tasks are to be completed between sessions.

The graph below is for the new system and represents the number of patients referred to the service from across Ayrshire.



- 4.3 North Ayrshire held a Drugs Summit in January 2020 at Saltcoats Town Hall to explore what is currently being carried out locally and nationally relating to the prevention of drug related deaths. Over 100 key partners, stakeholders and members of the community were in attendance. Following the summit Engagement Officers from Connected Communities engaged in Naloxone training to cascade within North Ayrshire localities.



- 4.4 **1,268 Naloxone kits** were distributed within Ayrshire 2019-20 in Community Settings. The number of kits distributed has almost doubled compared with 2018/19 with 642 kits.

Training in Naloxone also continues:



99
622
59

NHS staff completed the Naloxone LearnPro module
Overdose Awareness sessions provided
People completed Naloxone Training for Trainers

This training can be put into practice at any moment as was the case for one worker:

Case Study

A Justice Services Worker recognised individuals she had previously worked with in a shopping centre in Irvine. Noticing something was wrong, she approached the group and identified a person unconscious and displaying other signs of overdose. She administered her naloxone kit and phoned an ambulance. The person came around and was later taken to hospital.

- 4.5 The North Ayrshire Alcohol and Drug Partnership released their new strategy in 2019. The strategy is underpinned with the following vision:

“People in North Ayrshire have the right to be treated with dignity, enjoying a healthy life – free from the harms of alcohol and drugs. People are fully supported within their communities to find their own type of recovery”

In order to deliver this vision, the Partnership will focus on five strategic priorities:

- Prevention, education and early intervention
- A whole family approach
- A reduction in the affordability, availability and attractiveness of alcohol
- A public health approach to justice and
- A recovery orientated approach which reduces harm and prevents deaths.

These priorities have been generated from:

- Successes and learning from the North Ayrshire Alcohol and Drug Partnership Strategy 2015 – 2018
- Engagement with and feedback from people, our local communities and partners, including young people
- Learning from people with lived experience of drugs and alcohol, their families and carers
- Undertaking a detailed needs assessment
- Reviewing national strategy and policy developments
- Assessing current performance and
- Developing an outcomes framework to meet local and national priorities.

Feedback was gathered by the Engagement Steering Group and was focussed around four key questions

1. What more do you think can be done to prevent alcohol or drugs related problems?
2. What more can communities do to help overcome alcohol or drug problems?
3. What do you think has worked well in terms of dealing with alcohol or drugs misuse?
4. What do you think has not worked so well?

329 individual responses were received via our online questionnaire, “doorstep interviews” and individual questionnaires. We also had summary responses from eight focus groups – three young person groups and five adult groups. Of the total number of responses (384), 82 reported being young people (The rest being unknown or adult).



“I have personally found groups, drug education and peer mentoring a massive help”

“Presence and visibility of police”

“Nothing or very little”

“People on methadone – being on a substitute for over 20 years is not therapeutic”

“Discharging service users for DNA without finding out why”

4.6 **Action on Hearing Loss** Scotland’s Community Hearing Support Service is a pan-Ayrshire funded service providing hearing aid maintenance and support. During 2019-20 the service supported 129 Community Hearing drop-ins. The **Help to Hear** service support people to make the most of their hearing aid and manage their hearing loss effectively. During the year 158 people completed the annual survey with the following highlight results:

- 74% of participants rated the quality of our hearing aid maintenance and repairs as ‘excellent’, with a further 24% rating it as ‘good’
- 82% of people rated the friendliness of staff and volunteers as ‘excellent’, and the remaining 18% rating it as ‘good’
- 77% of people rated the service overall as ‘excellent’, with a further 21% rating it as ‘good’
- 57% of participants told us that the support we provided had made a ‘big improvement’ to their daily life
- 78% told us they felt better because they could talk to someone who really understood their hearing loss
- 77% told us that socialising with family and friends is easier
- 77% said they felt more independent because they could hear better

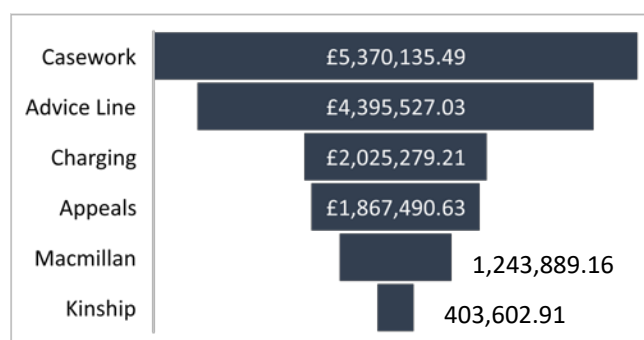
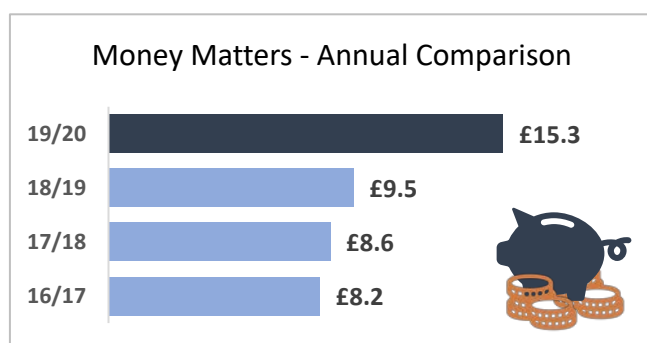
Outcome 5

Health and social care services contribute to reducing health inequalities

Our Highlights

23.84% of Learning Disability Service Users accessed employment opportunities
The final Syrians from our resettlement programme were in homes by March 2020
The money matters financial gains for 2019/20 was **over £15.3m**

- 5.1 During January, together with the opening of Trindlemoss Day Opportunities Centre, Job Coaches have focused on exploring their role within learning disability day services, with a view to ensuring that their activity reflects and benefits the community change agenda. Collaboration with a broad range of community partners was key to developing current and creating new collaborations. This resulted in 23.84% of learning disability service users accessing employment opportunities during 2019/20.
- 5.2 The final Syrians from our resettlement programme were in homes by March 2020 – meaning the Council has supported **over 200 people** since the first families arrived five years ago. Now as part of a new UK-wide programme for Syrian Resettlement, the Council will provide a haven for a further 30 refugees (six families) by March 2021.
- 5.3 Our **Money Matters Team** once again supported the most vulnerable people in our communities accessing entitled benefits to the incredible sum of £15.3m, an increase of £5.8m from 2018-19. This is a great achievement against a backdrop of austerity/welfare reform cuts and is testimony to everyone's work in the Money Matters Team.



- 5.4 We finalised our Independent Advocacy Strategic Plan: '**Empowering Inclusion**'. We are committed to ensuring people have their voice heard, can express their needs, make informed decisions and have their rights and interests protected.

The Partnership recognises the importance of advocacy in:

- **Empowering** people to express their own needs and make their own decisions
- **Enabling** people to access information, explore options and make informed decisions
- **Providing** a voice for people who are unable to do so
- **Ensuring** a safeguard for vulnerable people

This has resulted in advocacy being available to adults with learning disabilities, adults affected by mental ill health, adults with addiction issues, adults with physical disabilities, adults with brain injury, children and young people, and older adults.

Outcome 6

People who provide unpaid care are supported to look after their own health and wellbeing. Including to reduce any negative impact of their caring role on their own health and wellbeing

Our Highlights

2 unpaid adult carers supported to successfully complete their Level 2 SVQ

Carers Development Officer is now in post

27% increase in uptake of Carers registration cards

- 6.1 **Carers** are equal partners in care and experienced in the care they provide to their family, friends or neighbours. The **NAHSCP Carers Team** and **Learning & Development Team** supported two North Ayrshire unpaid adult carers to successfully complete their Level 2 SVQ in Social Services and Healthcare based on their caring role.



“It’s been a great experience and it’s helped me to overcome some of the barriers that I had about myself. It’s also encouraged me to apply for more training, and now I’m doing another course through my son’s school. I’m really glad that I did it.”



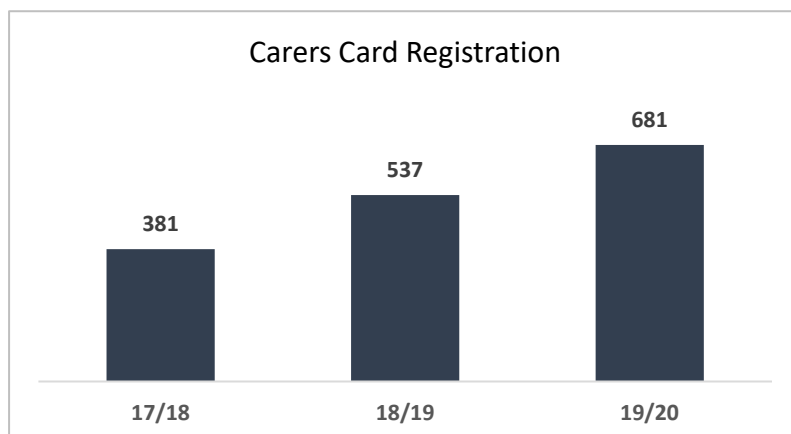
- 6.2 We expanded training options available to unpaid carers across North Ayrshire by working in partnership with the Learning and Development Team, Housing Team and Unity North Ayrshire Carers Centre to offer access to online and face to face training.
- 6.3 We also involved carers in dementia training being delivered across North Ayrshire. Pictured is Sally Powell (carer) supporting Craig Hatton – Chief Executive North Ayrshire Council who is experiencing the ageing suit



- 6.4 The Team have been pivotal in the pan Ayrshire pilot to improve carer involvement in hospital discharge and ensure unpaid carers are equal partners in the care of their family/friends. They are building on previous acute services centred work led by Angela Rowe – NHS A&A and have commenced the same with our Community Hospital sites at Woodland View.

The work has been initiated with four wards within Woodland View to provide staff with resources, training and a carer referral pathway to assist in the identification and support around hospital discharge and including unpaid carers.

This work will be further supported by the expanded team after recruiting a new Carers Development Officer whose focus is to update and implement the current NAHSCP Carers Strategy.



- 6.5 We have seen a further uptake in the use of the Carers Appreciation Card with 681 carers now registered for their card, an increase of 27% from the previous year.

- 6.6 In collaboration with Carers UK/Scotland, a **Digital resource for Carers** has been launched to provide comprehensive information and support for carers.



Outcome 7

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

Our Highlights

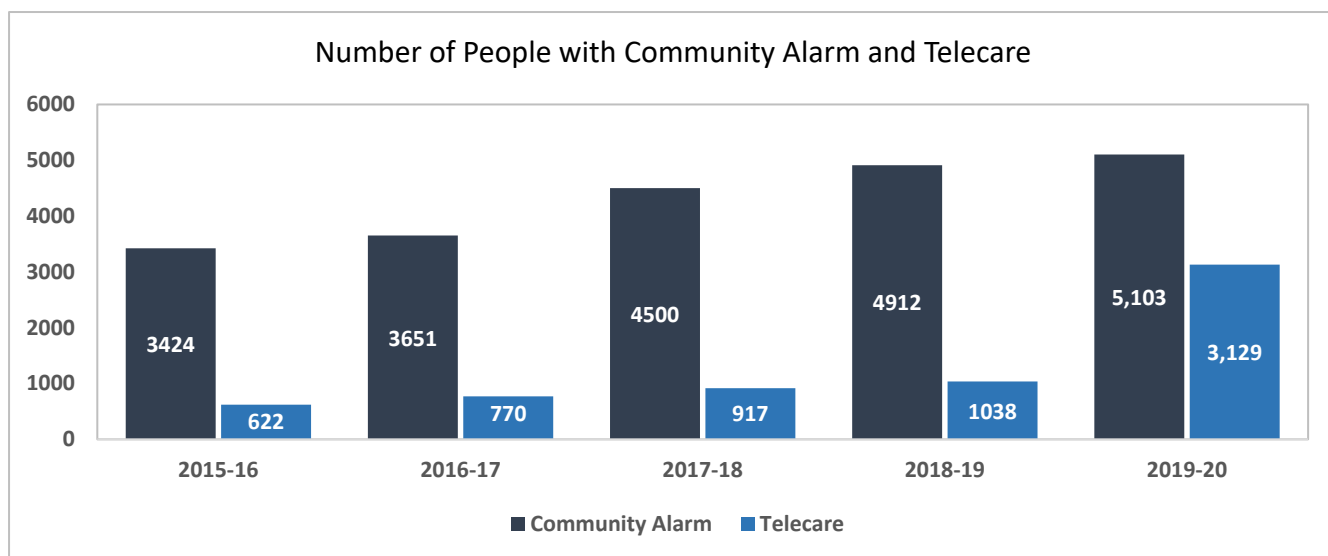
5,103 people received a Community Alarm

3,129 people received Enhanced Telecare

Care at Home and Community Care Inspections resulted in 'Excellent' gradings

22% increase in Child Protection Registrations

- 7.1 In 2019-20 we continued to expand the use of **Community Alarms** and **Enhanced Telecare** with 5,103 people receiving a community alarm and 3,129 in people receiving enhanced telecare.



- 7.2 Our Care Inspectorate annual inspection of Care at Home and Community Alert services concluded earlier this year – with verbal feedback being received. The service retained it's '**Very good**' grade for Care and Support and was given an '**Excellent**' grading for Management and Leadership.

This grading means that the service is considered by external regulators as 'outstanding' and 'sector leading'. Whilst there are a handful of public sector services grades at this level across Scotland, all the others are very small – supporting between 10-25 people.

This is the first time that any service of the size of our own, has been awarded such a grade. To put this in context, our Care at Home Service supports approximately 2,000 people across North Ayrshire with our Community Alert Service supporting over 5,000 people.

The reports can be found on the Care Inspectorate site:

[Inspection Report – Irvine, Garnock Valley and Community Alarm – Housing Support Service](#)

[Inspection Report Three Towns, North Coast and Arran – Housing Support Service](#)

- 7.3 We ended the year 2019-20 with an increase of children registered on the Child Protection Register; 137 children from 73 families registered, an increase of 17% on the previous year.

Outcome 8

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

Our Highlights

Over 2,000 members of staff experienced our Thinking Different Doing Better

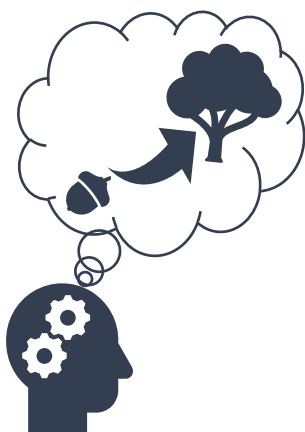
New HSCP Facebook page launched

8.1 Over 2,000 members of staff have now experienced our **Thinking Different Doing Better** sessions.

Thinking Different Doing Better is a unique, interactive experience, which has been designed in partnership with local community groups, businesses, volunteers, our third and independent sector partners and staff working across the Health and Social Care Partnership.



Staff attended a 3-hour experience, which consists of 90 minutes of experiential learning, followed by a 90-minute intimate discussion with the HSCP Director, Stephen Brown. The experience was developed to enable 3 objectives to be met:



- To facilitate a greater learning by all staff on the North Ayrshire Health and Social Care Partnership, our priorities, values and partners
- To provide an opportunity for participants meet colleagues from other services and give their views on things such as financial spend and how we, as a Partnership, can do better.
- To inspire staff to think differently and focus on our assets, both in the community and within people, which should ultimately lead to improved outcomes across each of our five priorities.

The initiative was also extended to the public for the same purpose of providing an immersive visual experience on all the partnership's assets and constraints.



- 8.2 The new partnership Facebook page was launched in February 2020 - www.facebook.com/NorthAyrshireHSCP. This will enable the partnership to reach the wider communities, sharing more news and events.
- 8.3 The partnership measures and develops internal engagement through the use of **iMatter** and the **NAC Our Voice** staff surveys. These helped to determine areas for support, improvement and innovation across teams and services through learning experience.

In 2019-20 partnership staff scored high engagement rates within both surveys with **79%** in iMatter and **72.5%** in Our Voice. In total 1,474 partnership staff across 204 teams responded to the iMatter questionnaire and 548 NAHSCP Council employed staff responding to the NAC Our Voice survey.

- 8.4 Each year we **celebrate the contribution individuals and teams** make to the health and wellbeing of the people of North Ayrshire in our Breakfast for Champions event. In previous years our Partnership Staff Awards have successfully recognised employees and volunteers from North Ayrshire Council, NHS Ayrshire and Arran, the Third Sector and the Independent Sector.

This time the Partnership Staff Awards became **the Partnership Awards**. We developed our awards to better appreciate the role of the community as partners in health and social care – reflecting our “delivering care together” approach. We did this by two main changes. For the first time we invited members of the public to nominate individuals and teams. Second, we ensured that nominations included community champions, unpaid carers and other members of the public.



The twelve categories (Individual and Team) look for evidence for the demonstration of our seven values. We had 16 team finalists and 23 individual finalists.

The finalists included Bourtreehill Drop in centre (Age Concern), The Scottish Centre for Personal Safety, Ailn Volunteer Board, Ward 2 Woodland View, Break the Silence, Justice Services, Care at home, A New Hope, Lend an Ear volunteer team, North Ayrshire Carers Centre staff team, Psychology Management administrators, Child Protection post admissions administration team plus individuals from the community including unpaid carers and staff from the Partnership.

Outcome 9:

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

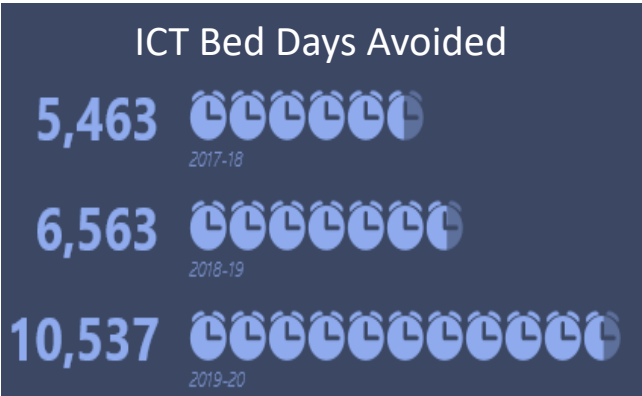
Our Highlights

99.14% of ICT service users were seen within 1 day of referral.

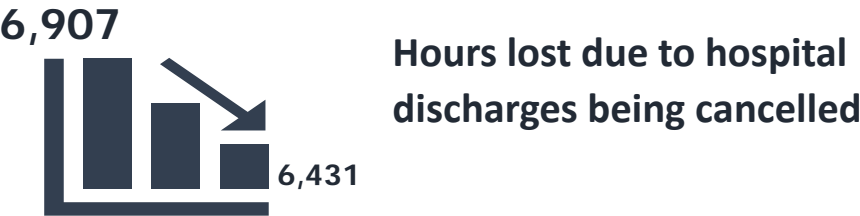
6,431.27 Care at Home hours lost

10,537 days of ICT service as an alternative to hospitalisation

9.1 Our **Intermediate Care Team (ICT)** supports people to regain their independence by supporting them when they are either discharged from hospital, or in their own homes, to prevent admission to hospital. This early intervention and prevention approach provided **10,537 days** of ICT service (during 2019-20) as an alternative to hospitalisation, a continued improvement from 2018-19. A specific highlight is in the performance of initial service user contact with 99% service users being seen within 1 day of referral.



9.2 Compared to 2018-19 we have seen a decrease in care at home hours lost due to the cancellation of hospital discharges with **6,431** hours lost compared to 6,907 from the previous year. This is as a result of our dedicated team within Crosshouse hospital continuing to work with our hospital colleagues to reduce the number of discharge cancellations.



9.3 We launched the Scottish Government’s whole system approach to the diet and healthy weight Public Health priority in October with our other partners such as NHS and Leeds Beckett University. We are one of three early adopter sites for this priority and have agreed one of four in-depth partnerships with Sports Scotland to progress a shared approach. The focus of the programme is to improve the food and physical activity environment experienced by children and their families.

- 9.4 The HSCP has co-produced a mental health and wellbeing information 'pocket guide' with Largs Academy Mental Health Youth Ambassadors and The North Coast Locality Forum. This approach was shared with Education Services who are developing this approach across all the North Ayrshire localities. The aim of this pocket guide raises awareness to the services/people in the North Coast to assist young people achieve positive mental wellbeing. The intention is to produce the 'Pocket Guide' for every academy pupil and every cluster school Primary 7 pupil as part of their transition.
- 9.5 The HSCP Alcohol and Drug Partnership sponsors the Third Sector Interface on Arran, which is the lead agency in hosting a drug and alcohol research post. This post is exploring the specific impacts of drugs and alcohol on island communities and developing a partnership action plan.



2

National Health and Wellbeing Indicators

The Scottish Government identified 23 indicators (4 remain in development) that were felt evidenced the 9 National Health and Wellbeing Outcomes. Nine indicators come from the biennial Health and Care Experience Survey (see below) and the additional 14 indicators (also below), which evidence the operation of NAHSCP, come from the NHS Information Services Division (ISD) survey. This survey represents a sample of the community and asks about the collective services received whether it be from Social Services, NHS, the collective HSCP or private or voluntary organisations. The survey responses do not separate each organisation's service provision.

Due to the COVID-19 pandemic, the data completeness and validation for these indicators has been delayed as Public Health Scotland personnel have been re-tasked to other prioritised works. The information below represents the most up-to-date **calendar** year information with the financial year updates available in due course accessible from [Public Health Scotland](#). The rates presented below relate to the year for which data is most recently available for each indicator and as such the ranking value should also be regarded as an indicator and not the final rank.

Health and Social Care Experience Indicators	2015–16	2017–18	2019-20 Not available	Scottish Av % Diff	Rank against Family Group (2017-18)
Adults able to look after their health very well or quite well	93%	91%	-	93%	4
Adults supported at home who agreed that they are supported to live as independently as possible	82%	84%	-	81%	1
Adults supported at home who agreed that they had a say in how their help, care, or support was provided	77%	70%	-	76%	7
Adults supported at home who agreed that their health and social care services seemed to be well co-ordinated	78%	74%	-	74%	6
Adults receiving any care or support who rated it as excellent or good	79%	78%	-	80%	7
People with positive experience of the care provided by their GP practice	84%	80%	-	83%	6
Adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	82%	82%	-	80%	2
Carers who feel supported to continue in their caring role	43%	39%	-	37%	4
Adults supported at home who agreed they felt safe	79%	80%	-	83%	6

To support service improvement, the Scottish Government has identified local authority / Partnership benchmarking families. These family groups are made up of eight local authorities that share similar social, demographic and economic characteristics. Comparing our performance information with our family group should provide a more meaningful comparison with similar areas and allow for greater opportunities for shared learning and best practice. Rankings are on a scale of 1–8, where 1= best performing, 8=worst performing.

North Ayrshire is partnered in its family group with: East Ayrshire, Dundee, Western Isles, Glasgow, Inverclyde, North Lanarkshire and West Dunbartonshire.

Indicators based on Administrative data	2016–17	2017–18	2018–19	Value (calendar year)	Scottish Av/ % Diff	Rank against Family Group
Premature mortality rate. (Under 75s age-standardised death rates for all causes per 100,000 population).	490		456	456 (2019)	432	2
Rate of Emergency Hospital Admissions for adults (per 100,000 population)	16,249	16,481	16,513	16,894 (2019)	12,602	8
Rate of emergency bed days for adults.*	139,750	149,902	142,441	149,356 (2019)	117,478	7
Readmissions to hospital within 28 days of discharge.	105	106	107	112 (2019)	104	6
Proportion of last 6 months of life spent at home or in community setting.	87%	87%	88%	88% (2019)	89%	8
Falls rate per 1,000 population aged 65+	20	24	22	22 (2019)	23	3
Proportion of care services graded 'good' (4) or better in Care Inspectorate Inspections.	81%	87%	88%	88% (2019-20)	82%	3
Percentage of adults with intensive needs receiving care at home. (all levels of CAH)	49%	49%	63% (2018)	63% (2018)	62	3
Number of days people aged 75+ spend in hospital when they are ready to be discharged per 1000 population)	624	1,033	1,126	1,366 (2018-19)	793	7
Percentage of total health and care spend on hospital stays where the patient was admitted in an emergency.	26%	29%	28%	28% (2018-19)	24%	8

As well as the National Health and Wellbeing indicators, we regularly report on local measures to help us to evidence performance against the nine National Health and Wellbeing Outcomes and our Strategic Priorities. The list of local indicators can be found in Appendix 1 (see page 69).

From January 2017, The Ministerial Strategic Group for Health and Community Care (MSG) advised that in order to measure the impact of integration they would be monitoring a suite of indicators. These are indicators which the government view as being

appropriate to measure progress with integration and for which data is available to enable a comparison across partnership areas and to report on progress at a national level. The full list of indicators can be found in Appendix 2 (see page 82).

3


Performance in relation to the three Children's Outcomes and three Justice Service Outcome

Children's Outcomes

Outcome 1: Our children have the best start in life and are ready to succeed

Outcome 2: Our young people are successful learning, confident individuals, effective contributors and responsible citizens

Outcome 3: We have improved the life chances for children, young people and families at risk

- 1.1 There has been an increase in the percentage of children either solely breastfed or mixed. With **19.69%** either breastfed or mixed at the 6-8 weeks review, which is a slight improvement from the 2018-19 figure of 19.51%
- 1.2 Our Universal Early Years team which consists of social workers, health visitors, speech and language therapists, welfare rights advisors, mental health nurses and employability workers. This multi-disciplinary team continued to provide support to ensure the improving health of young children was priority. The percentage of children with BMI centile greater than 91 (meaning they are overweight or very overweight) at 27-month review increased from 9.98% to **13.19%**.
- 1.3 Through various consultations with stakeholders; the Partnership has implemented several initiatives throughout the year to support children, young people and their families. These include:
- A fully implemented the **National Health Visiting Pathway** which promotes the importance of prevention and early identification: getting the right support for families at the right time.
 - Our integrated Universal Early Years' Service provides individualised, early intervention care and supports to the child and their family. This service includes expertise from health visiting, social work, speech and language and perinatal mental health. In addition, we have a strong support team who can provide in house, person centred support to families on a variety of issues as and when families need it.
 - Almost half of requests from health visitors remain within Universal Early Years, demonstrating our focus on early intervention and prevention;
 - The service has access to wide range of additional supports from within the wider NHS, local authority (day care and early nursery placement) and third sector (Barnardos)
- 

- A refresh of our award-winning **Young People's Citizenship and Participation Strategy** ensuring our young people continue to have a voice in local and national decisions that affect them.
- The Partnership Learning and Development Team have been working in partnership with colleagues in Education to deliver a **Foundation Apprenticeship** course in Social Services and Healthcare. This was delivered to nine 6th year pupils from across North, East and South Ayrshire at Irvine Royal Academy. All nine pupils achieved the National Progression Award as part of the course, with five going on to successfully complete a placement in a health and social care setting, achieving an SVQ and completing the full Foundation Apprenticeship.



- **Mental Health Youth Ambassadors** from Kilwinning Academy have engaged in democratic decision-making processes in the co-creation of Kilwinning Library as a **Wellbeing Hub and learning Centre**. Our Youth Ambassadors are contributing to our Youth Poverty Commission, the first in Scotland, as part of the Year of Young People Poverty and Inequality workstream
- There was a consultation with the Mental Health Youth Ambassadors in an '**En-Lightening Capacity Building Event**' to redress their perceived deficit of bespoke Mental Health services for young people on Arran. The Capacity Building session was very well received by The Mental Health Youth Ambassadors who engaged enthusiastically articulating their needs, issues and aspiration for bespoke Youth Mental Health Services.
- There was an event within the North Coast which aimed to engage the Mental Health Youth Ambassadors in a bespoke breakfast blether & capacity building session to a co-

produce a pocket guide to wellbeing services in the North Coast; designed for and by young people. The initiative was a direct result from the discussion dinner/expressed needs, issues and aspirations of the young people.

- Our **Family Firm** corporate parenting policy, procedures and protocols, which supports young care experienced people with training and employability.
- Our **Joint Child Poverty Action Plan** was submitted to the Scottish Government in June 2019. Initial feedback suggests we are demonstrating more progress than many other local authorities to prevent and mitigate the effects of child poverty and reduce future levels

- 1.4 Since its inception, the **SNAP (STOP NOW AND PLAN)** initiative has supported children ages 8 -11 engaging in aggressive and anti-social behaviour at school or in the community. Experienced and highly trained staff work with each family to assess challenges and problems and develop an action plan aimed to reduce the potential of anti-social behaviour and chances of conflict with family, peers and authority figures.

For the period 2019-20, 100% of children who have been involved through SNAP have been sustained within their local school.

- 1.5 The **Rosemount Team** deliver family focused, consistent and connected practice that supports positive change through meaningful relationships. From April 2019 to March 2020 the Rosemount team worked with 324 young people and their parents/carers. Although the number of referrals to the service have decreased (the previous financial year the team worked with 359 cases) the numbers of young people being maintained at home remains high with 94% of young people remaining with their parents/carers on a long-term basis.

- 1.6 The re-structured Children and Families Services included **School-based Social Workers** ensuring greater integration between health and social care and we are in the process of creating three multi-disciplinary Locality Teams based in local secondary schools. The first of these teams, located at Kilwinning Academy, became operational in early September 2019 and we have gathered both qualitative and quantitative data around the impact this model is having on prevention and early intervention work, the numbers of children being accommodated, and the number of children being placed on compulsory and statutory measures. Very early analysis of our data indicates that there is positive movement as a result of locality working. Accommodation has now been identified for the Three Towns locality team and further work is being driven forward in the Garnock Valley.

- 1.7 The North Ayrshire **Family Wellbeing Service** is based in the heart of the community; it is staffed by skilled people who know the local area and offers a '**one-stop shop**' of support. The team work alongside children and families, supporting them to thrive, whilst aiming to create profound change within the community they live in. Support is offered to families to help them understand and address the challenges and risks which may have led to their vulnerability, promote connection to their local communities, and improve financial stability and resilience.



The primary aims of the support to communities to become more resilient and a place where children feel safe, valued, understood and supported with some highlights being:

- Supported 84 individuals who reached out for Family Support during a time of challenge or crisis, providing emotional support to encourage mindfulness, help manage stress and build resilience.
- Supported families to **manage debt** of £83,241.94
- Delivered a Programme of Community Engagement events to the community and other families connected to the HUB over a 12-month period providing social activities, trips and holiday activities to encourage informal engagement and peer support
- Secured funding from the Scottish Government to organise a **Family Fun Day** within the Community with a focus on Children's Rights. This was attended by over **200 children and families** that brought the community together for lots of fun activities, play, and food!
- Reached out to a further 7 communities across North Ayrshire, where there was a need or vulnerability – Castlepark, Saltcoats, West Kilbride, Dalry, Beith and Kilwinning
- Offered trauma informed Kinship Care Support to help families navigate both the emotional and legal complexities of living in kinship care arrangements.

- 1.8 **Reducing the number of children and young people becoming accommodated** continues to be a priority. At the start of 2019-20 there were 33 children and young people looked after in external residential placements, and at the end of the year that number was down to 26. This continues to be a focus for session 2020-21.
- 1.9 **The Throughcare and Aftercare teams** support young people moving on from being accommodated away from home to the next stage of their lives. They are there to listen and respond to young people's emerging needs in any way they can.

Support is offered in a variety of ways, for example, the team has a dedicated Employability Advisor who supports young people to explore pathways into employment, training or education. Advice offered is adaptable to suit individual needs as their employment, education or training journey progresses. In addition, staff can assist young people in finding their own accommodation and provide bespoke emotional and practical support through what can be, for some, challenging and uncertain times, as well as exciting. At the end of July 2019, 66% of young people receiving aftercare services, where the economic activity was known, were in employment, education or training. This compares favourably with the nationwide figure which was 44%.

66% of CYP receiving aftercare services were in employment, education or training

The teams are dynamic, creative and flexible to meet the emerging and individual needs of care experienced young people offering advice and guidance to those who need support in applying for benefits, as well as those who are applying for educational bursaries, care leaver's bursaries and financial support. Assistance can also be provided on legal matters, emotional health and wellbeing and life skills.

- 1.10 The Advocacy support that is provided in North Ayrshire is by Barnardo's **Hear 4u Advocacy Service**. The service provides advocacy for children and young people aged 5-26 who are looked after and accommodated in residential, foster care, kinship and at home, on the child protection register and those with Additional Support Needs. Barnardo's run specialist advocacy services across the UK and are there for young people who need someone to support them, protect their rights and help them speak out. Their advocates are independent, and they don't work for local councils, social services or the NHS. They strive to explain the wishes of the young person, represent their case and do not give their personal opinions.

96 children (including 62 CEYP) receiving advocacy support

Barnardo's advocates role includes:

- Attending meetings with or on behalf of children/young people where decisions are made – for example, children's hearings, looked after reviews, child protection processes.
- Writing letters on behalf of young persons and assisting them with complaints or appeals.
- Helping children and young people to access information so that they can make informed decisions.
- Helping children and young people understand decision making processes and what their rights are within these.
- Giving children and young people a voice to help them achieve their full potential.
- Empowering children and young people to develop their confidence/skills in self-advocacy
- Listening to young people is at centre to all the work they carry out as advocates.

Around the end of the year there were 96 children receiving advocacy support, 62 of whom were care experienced young people (CEYP).

- 1.11 **Nurture-based training** approaches continue to be cascaded across the Children and Families residential services. In order to introduce and develop these approaches, there has been extensive work in: awareness raising sessions for all staff; the concept of nurture being utilised within supervision, team meetings and development sessions. Nurture Champions have been identified across the service and managers have been completing a four-day training course. Nurture training continues to be rolled out across other services including Early Years, Education & Housing.

We have a child protection training calendar for professionals to ensure that children are protected from violence and can recover from traumatic experiences. This includes training on children's rights, domestic abuse and, trauma informed practice.

Our Child Protection Committee is supporting the ***Everyone Has a Story*** training it has been agreed that this training will be delivered towards the end of 2020 early 2021. There will be scope for 15 staff to attend this training and the course will support practitioners in adult and children's services to respond to children affected by parental substance use.

To enhance the skills of our workforce and improve outcomes for young people and families the North Ayrshire Alcohol and Drug Partnership (ADP) has invested in the **C.H.A.T.** training (**Children Harmed by Alcohol Tool**). During 2019 there were 44 staff from across children and family's services trained to deliver this intervention. C.H.A.T. can be used with children, young people and families harmed by problematic alcohol use. The aim of the resource is to build resilience and protective factors in children and families.

The C.H.A.T. training has recently been evaluated by Alcohol Focus Scotland and key findings have highlighted that following training 100% of participants were more aware of the impact of harmful parental drinking on children and families and felt more confident in raising the issue of alcohol with families. A further evaluation will take place in 2020 to explore the impact of C.H.A.T. in our work with young people and families.

- 1.12 Our **Fostering and Adoption Team** continues to run successful campaigns to increase the number of foster carers and families who would like to foster and adopt children. The number of foster carers in the local authority remains steady (98 as at the end of 2019-20) but since the launch of a communications campaign in January 2020 we have had 33 enquiries and recruited 6 new carers.

Our Fostering and Adoption Team launched their communications campaign which aims to encourage local people to consider becoming a foster carer or adoptive parent to a child in North Ayrshire. As part of the campaign one of our looked after children designed a new colourful logo for the Family Placement Team. The logo will appear on outdoor adverts, as well as being rolled out across our social media channels, with the hashtag #youjusthaventmetmeyet.

- 1.13 At the start of 2019-20 there were 328 children and young people in a **Kinship placement** to 248 Kinship Carers. Over the course of the year we received 60 referrals, approved 23 new kinship carers, and had 18 new Kinship Orders granted. By the end of the year, there were 343 children and young people in a Kinship Care placement to 262 Carers.
- 1.14 We know that North Ayrshire proportionally has higher levels of **Child Protection** activity than across the country as a whole (the rate per 1,000 of children aged 0-15 on the Child Protection register in North Ayrshire at the end of July 2019 was 4.6, which was higher than the national figure of 2.8). Despite this, there has been a marked improvement around Child Protection timescales in 2019-20 compared to previous years.
- 1.15 The **North Ayrshire Child Protection Committee** (NACPC), on updating their website - <http://childprotectionnorthayrshire.info/cpc/#> - launched a social media campaign around child protection and distributed child protection materials, in partnership with the community hubs distributing food during the pandemic, to families who received food deliveries. The CPC also offers multi-agency practice development opportunities for workers in relation to child protection. This training is designed and delivered in relation to the general contact workforce, the specific contact workforce and the intensive contact workforce. A total of 1362 people attended multi-agency training, bespoke inputs and workshops in 2019.
- 1.16 The Significant Case Review working group, renamed ***Making Change Happen***, has now met on three occasions. The three areas for improvement we shall be taking forward will focus on: Increasing professional curiosity/responsibility; enhancing opportunities for reflection (including self/peer supervision); and improving understanding of the child's experience/perspective, ensuring adult voices are not over-privileged.
- 1.17 The **Young People's (YP) Suicide Taskforce** (formerly the Young People's Operational Suicide Prevention Group) has continued to meet regularly, with governance from the Young People's Strategic Suicide Prevention Group (YPSSPG). A key piece of work taken forward by the YP Suicide Taskforce has been the **13 Ways campaign**. A series of 13 animations with key messages focusing on young people supporting each other, were developed and released via social media. The animations illustrated one of each of 13 messages, with a narration by a young person and an animation to illustrate the message. Young people were central to developing the language, visuals and stories, and were supported to contribute meaningfully specifically (but not exclusively) through the Year of the Young People (YOYP) Ambassadors. The campaign has been very well received and has been given a positive response perhaps because of the ownership by all groups and the young people of the messages and the rationale. Young people have been the best ambassadors – the YOYP ambassadors winning the category prize for Mental Health and Wellbeing in the Youth Link awards for this work. The campaign has continued to be further developed in 2019 and 2020, with celebrity endorsement to widen the reach of the messages.
- 1.18 The **Champions Board** is a group of care experienced young people aged 15-23yrs who work together with Corporate Parents to create change within the care system, as well as

working to develop a Mental Health toolkit and advice specifically for care experienced Children and Young People. Over the past year the champions Board have continued to challenge the language and stigma that exists within the care system.

The Champions Board have created the new Children, Families & Justice Services logo.



- 1.19 The recently refurbished **Meadowcroft** building which opened in mid-January, is a bespoke facility which is home to several specialist teams who provide a range of intensive and creative interventions to support our children, young people and families. The teams based at Meadowcroft include; Rosemount Crisis Intervention Team, Programmes Approach Team, Corporate Parenting Team, Throughcare Team and Residential Social Workers.



The teams relocated to the Meadowcroft building just before the COVID-19 pandemic and have continued to provide a robust service to our vulnerable young people and families. The facility provides first rate space for staff as well as comfortable meeting rooms for young people, kitchen facilities to help work on independent-living skills, and an art room.



- 1.20 Work is well underway in the construction of the brand new, state of the art **Additional Support Needs (ASN) School** and Respite and Residential Accommodation in Stevenston. This development presents a unique, exciting and innovative opportunity for the Partnership and Education Services to better meet the needs of children and young people with additional support needs in North Ayrshire. The facility will enable professionals to work together, in an integrated way, to benefit some of our most disadvantaged children and young people. This opportunity affords our children and young people with complex needs the opportunity to access the very best in technology, facilities and resources, in their local area.
- 1.21 Through 2019-20 we have increased communication through use of **social media**. We have a new and updated Child Protection Website, Facebook page and Twitter account, as well as a monthly Children, Families and Justice Services newsletter and a Handbook. We will continue to explore and utilise different ways of communicating with all our families and partners.



- 1.22 Our new Head of Service appointed in September, has implemented monthly 'drop-in' sessions for staff and for young people to increase communication, chat over good practice and take forward any items which need to be addressed. In addition, 'Collegialitea' sessions were established so that staff could come together, from a range of services, to meet each other discuss key areas for improvement. These sessions have been well received.

Justice Service Outcomes

Outcome 1: Community safety and public protection

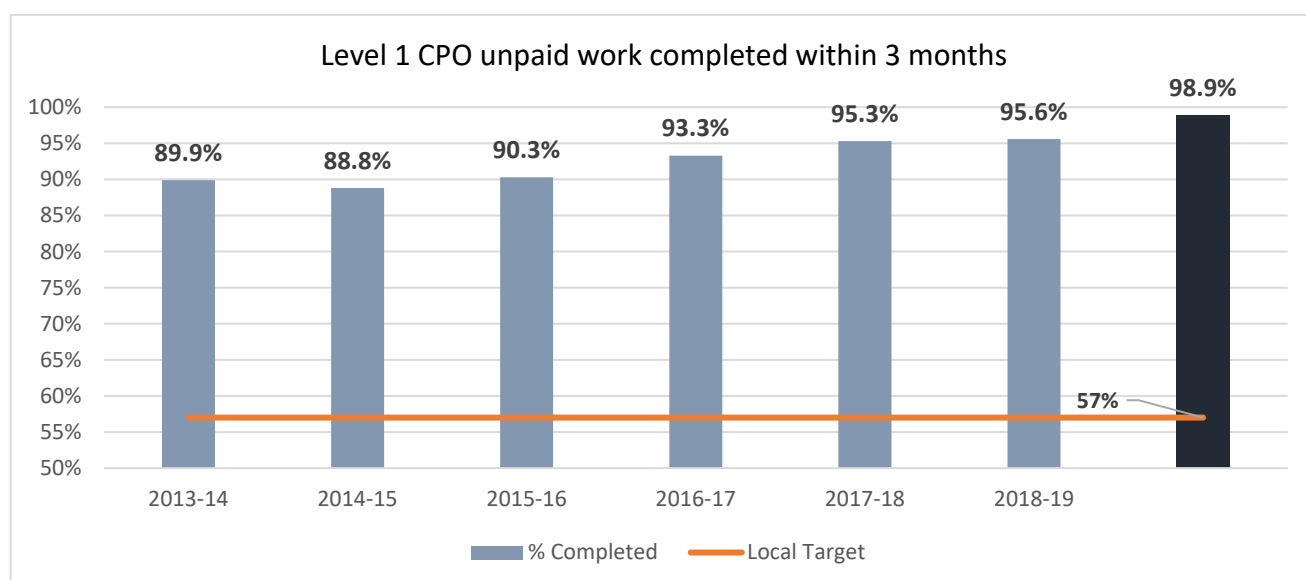
Outcome 2: The reduction of re-offending

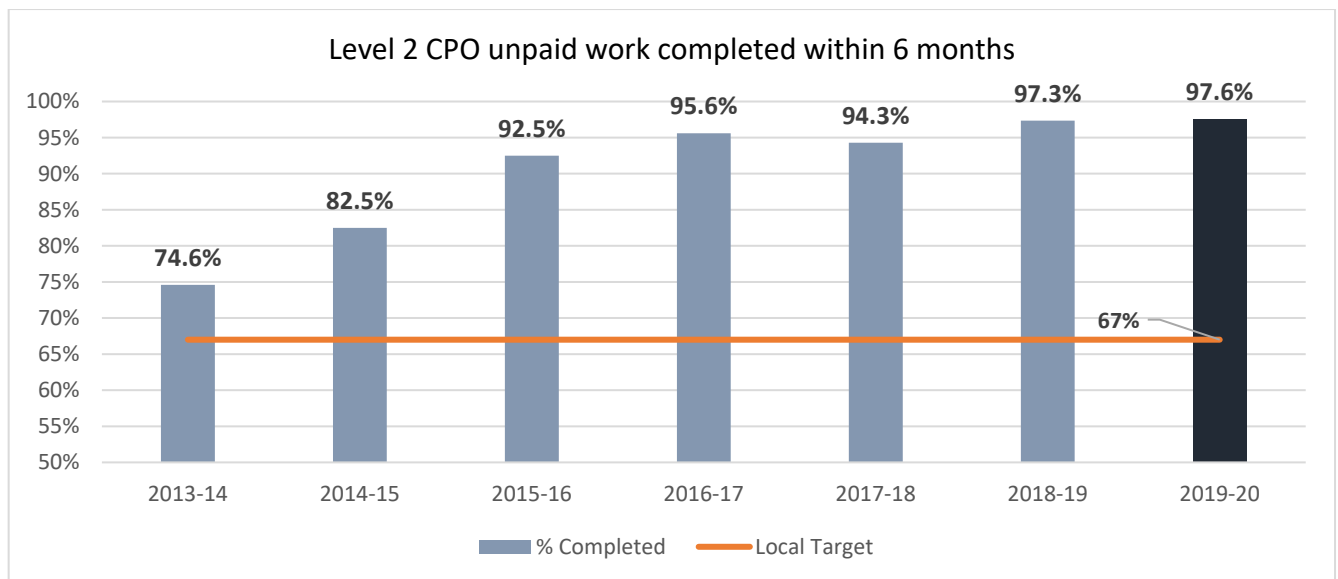
Outcome 3: Social inclusion to support desistance from offending

- 1.1 The targets set for unpaid work are pan-Ayrshire targets. The latest Government statistics on **Community Payback Orders (CPO)** (2018-19) show that North Ayrshire has the third highest number of CPO's imposed per 10,000 population in Scotland at 64.5 per 10,000 population. In comparison, East Ayrshire has the highest in Scotland at 65.7 and South Ayrshire sit at 52.3. The Scottish average is 42.6 per 10,000 population.

There has been a steady decline in the number of Criminal Justice Social Work Reports (CJSW) since 2015-16, however 2019-20 has indicated a slight upward turn. The latest Government statistics on CJSWs for 2018-19 reveal North Ayrshire at 80.8 per 10,000 population. In comparison, East Ayrshire has the second highest at 113.5 and South Ayrshire sit at 82.6. The Scottish average is 70.8 per 10,000 population.

- 1.2 Our Justice Services continue to have a positive impact on the local community through the **Community Payback Order (CPO)** unpaid work scheme. For the seventh year we have continuously over-achieved against targets for CPO level 1 and level 2.





1.3 We currently have 190 people of all ages and abilities undertaking unpaid work. The unpaid work teams undertake a variety of tasks for the benefit of local communities, including;

- **Foodbank** - undertaking collections for a local Foodbank at Church of Nazarene in Ardrossan. They then carry out distribution of the allocated food across North Ayrshire.
- **Painting and Decorating** - our teams undertook painting the Main Hall in Whitlees Community Centre, Ardrossan. There is ongoing work in community-based facilities in Arran.
- **Removals** – support is provided to local Charity shops by collecting donated furniture and delivering purchased items. This is a valuable resource for those who might find it difficult to pay for uplift and delivery of large items.
- **Workshops** - our three workshops are equipped to undertake training in woodworking skills and arts and crafts. Service users who have disabilities or health issues may not be able to undertake heavier work, they also have an opportunity to make items which are sold with the funds going to the Income Generation Fund.
- **Employability** - working with all justice service users to provide support in working towards employment; a significant factor in reducing re-offending.

1.4 Reintegration into communities is very much the ethos of Community Payback Orders and with that aim in mind we have **Employability Mentors** based within the Community Payback, Unpaid Work Team. Since coming into post the mentors have been successful in supporting 27 service users into full time employment, 9 in the last year. The team have sourced and placed a significant number of service users into training that is likely to increase future employment opportunities. In addition to this they have supported 3 services users into various full-time education courses.



The Mentors, alongside Economies and Communities, CEIS (Community Enterprise in Scotland) and DWP (Department for Work and Pensions) organised a 'Recruit with Conviction Event' at the Ardrossan Hub in May 2019. Employers from a variety of sectors attended including advice from Disclosure Scotland. In addition to this they completed a presentation at HMP Kilmarnock to 20 employers to demonstrate skills and abilities of service users to aid their further employment

- 1.5 The **Early Intervention from Custody (Women)** project continued to offer support to women to access existing health and other services, particularly Addictions and Mental Health services, to improve their health outcomes. The project also seeks to develop improved integrated pathways between Health and Social Care Services in North Ayrshire, leading to sustainable improvements in how services work together and deliver services more effectively.

Case Study

Ms G

Ms G appeared in court in October and was referred to the Early Intervention Service for extra support. The allocated staff member completed a home visit and discussed what support could be provided by staff. Ms G was having difficulty in relation to her existing welfare benefits and was unsure if she was eligible for other benefits as a result of a recent serious injury. A referral to Money Matters was made and Ms G was able to resolve the issue surrounding her existing welfare issue. Moreover, she was provided with relevant information regarding her recent injury and helped apply for relevant welfare. Additionally, Ms G reported that she suffered from depression and would like to be provided a safe space to undertake counselling for childhood sexual abuse. A referral was made to the Occupational Therapy to address these issues. Furthermore, Ms G was provided with information for a local charity - Break The Silence, which was established to provide support to survivors of childhood sexual abuse. Ms G continues to attend Occupational Therapy and has reported great improvements in her mood.

Case Study

Ms E

Ms E has been engaging with the Early Intervention Service since August 2019 after being referred for support regarding substance abuse and counselling. During this time, she lost her partner to an overdose which left her in a state of uncertainty as they had previously managed the household and benefits. Thus, on the passing of her partner she was now required to set up her own bank account and update her housing application. Ms E was supported by the allocated worker who drove her to attend Housing Services with the necessary paperwork. Within the same day, Ms E was helped to set up her own bank account, so she may receive her welfare payments. Ms E noted how excited and proud she felt on doing this as it had been years since she had, had her own bank account.

During her engagement with the service Ms E has had great difficulty at times affording food. On one such occasion, the allocated worker alongside the supporting Occupational Therapist accompanied Ms E to several food banks within the area to source a food parcel. This involved driving from Ms E's home address to her local food bank, however, they had no parcels left. Following this, Ms E was driven to two further foodbanks within the North Ayrshire locale until a food parcel could be sourced for her. This support ran past normal working hours, however, both workers felt it was imperative to ensure Ms E had food at home. Ms E continues to engage with the service and reports how "thankful and grateful" she is of the support.

- 1.6 The **Caledonian Women's Service** offers emotional and practical support to women, advice on safety planning, risk assessment and advocacy. Working in partnership with the women, we aim to reduce their vulnerability and work with other services, including; education, housing, Police Scotland and the voluntary sector, so that women and their families are better supported.

In 2019-20 the team worked with **140** individuals across Ayrshire (an increase of 17 from the previous year). Offering a variety of services and support, from safety planning sessions, to longer term interventions and support the team currently continue to support 54 women across North Ayrshire.

The Caledonian Women's Service are currently piloting women's well-being groups as a means of reducing isolation, building new relationships and gaining feedback in a more trauma informed way – 2 have taken place across Ayrshire so far.

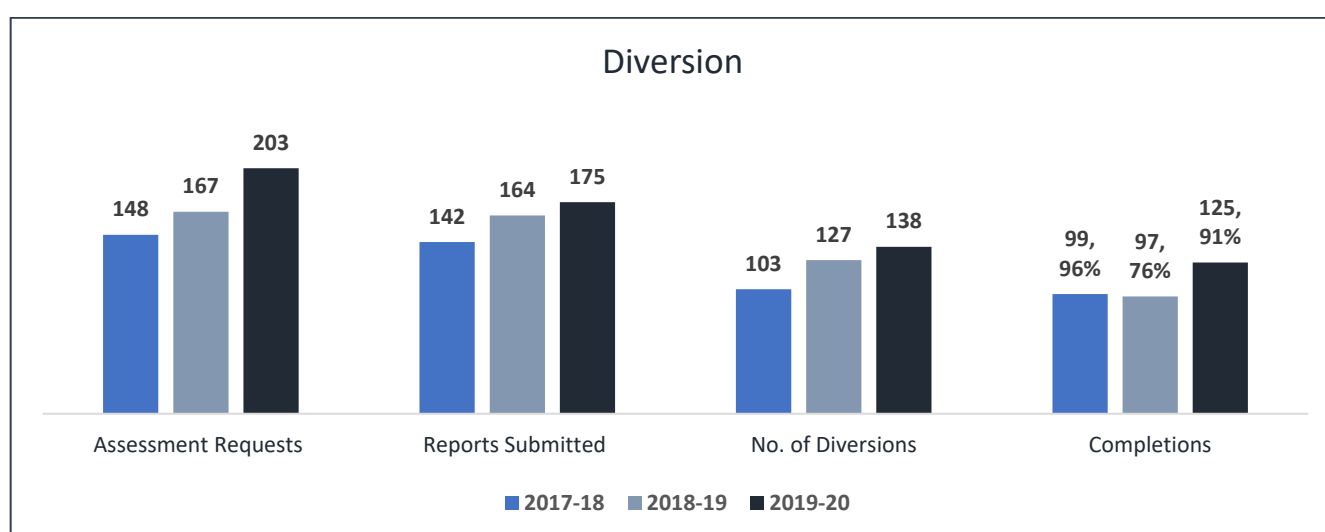
1.7 **Women's Service** staff provide supervision and case management of Community Payback Orders (CPOs) imposed by the courts for women who have more complex risk and needs as referred by Justice Services locality teams. Some of the positive outcomes are listed below;

- Reduction in number of revocations
- Reduction in offending behaviour whilst subject to a CPO
- Excellent advocacy from case managers regarding mental health issues and improved pathways to Health Services in North and South Ayrshire due to collective work with the Occupational Therapist
- Collaborative work in all areas with services such as Money Matters and the Financial Inclusion Team has led to services user's income being maximised and numerous women received significant amounts of backdated money

Whilst there have been positive destinations for many women, this is an area where we would hope to improve. Our aim is to encourage and support service users to be in education/training or employment (either voluntary or paid) prior to the end of their Order.

1.8 **Diversion From Prosecution (Diversion)** is delivered within each locality Justice Service following an assessment by a Justice Social Worker. However, up until the past few years referrals from the Procurators Fiscal (PFs) were very small and it was agreed to develop a more structured service across the Partnership in order to coordinate more directly with the Crown Service. Since integration, referrals have increased significantly, and particularly in the past year with a drive to increase Diversion nationally in response to specific Justice outcomes in the updated national alcohol and drug policy '**Rights, Respect and Recovery**'

The numbers of Procurators Fiscal (PF) assessment requests have increased by 37% from 2017-18 to 2019-20, which has resulted in a 34% rise in the number of Diversions allocated. In the past, Diversion would last approx. 6 - 8 weeks and generally be for first offences, so that the intervention would be offence focussed, whereas recently a change in PF referral criteria places the focus on less serious offences rather than whether it is a first offence, so that many cases presenting in the past year have had a longer offending history.



The Diversion service has proved a positive support based on feedback received:

- 96% rated the intervention as excellent/very good in helping them address their offending behaviour
- 98% rated staff as excellent/very good in helping them address their issues
- 100% of participants stated the Diversion service had met their needs.

Case Study

Mr C

Mr C was referred to the service following several reports of public disorder. When undertaking the assessment, the writer was made aware that Mr C had been diagnosed with Asperger's a few years earlier, however no community-based supports were presently in place due to him refusing to engage with services – stating that he could not tell people how he was feeling. Much frustration, reported feelings of helplessness and being misunderstood by society resulted in his withdrawal from his family, friends and the community and any attempts to reintroduce him resulted in displays of threatening and abusive behaviour. Through much engagement with Mr C, partnership working with the Learning Disability Team and the National Autistic Society, staff utilised additional pictorial cues and interventions to encourage Mr C to understand his feelings and to communicate more effectively. This intervention changed the focus of communication for Mr C and he now feels able to express himself in alternative ways which (though the use of emojis on his phone) do not result in frustration and inappropriate behaviour. Mr C recently applied for College, where he hopes to develop his passion for music.

4

Reporting on Localities

North Ayrshire is home to over 136,000 people, all living in its many towns, villages and islands. These places are home to many different communities, each with their own characteristics and needs.

We recognise that a one – size all approach to services delivery is not appropriate. A blanket service may be of great benefit to one community and of little value to another.

That is why we are now designing local services based on local need, identifying the health and social care priorities in communities and developing services that help people access the right services at the right time.



Overview

Throughout the 2019-20 service year, our six **Locality Planning Forums (LPF)** have continued to represent local communities within the Health and Social Care Partnership.

Following on from the review of the LPF governance structures in September 2018, each forum has engaged in further information and awareness raising sessions in order to better serve their local communities. In addition to inputs by HSCP officers at LPF meetings, a half day capacity building seminar was hosted in December 2019. The outcome of these sessions has included:

- Clarity on the role and value of planning health and care services at the local level
- A greater understanding - for all members - on how to progress concerns, issues or recommendations through the HSCPs governance structure
- The development of an 'engagement calendar' highlighting various activities, events and celebration days that LPFs can be involved in

Further, throughout 2019-20, HSCP Locality Planning Forums have increased representation on Community Planning Partnership Locality Partnerships. This has resulted in several pieces of joint engagement work with local communities across North Ayrshire.

It is anticipated, that as HSCP teams become more organised into localities, our LPFs will have a greater role in engaging with local communities to understanding local needs and concerns. Through effective engagement, it is the continued role of LPFs to be the voice of local people in the HSCP, ensuring services are designed to meet local need.

Arran

Throughout the service year, Arran initiated their first joint Locality Planning Partnership and Locality Planning Forum meetings. These new joint groups aligned the CPP and HSCP locality groups into one structure. In December 2019, an engagement event was held with the Patient Service User groups in Lamlash Medical Practice and Brodick Library to inform residents of the **joined-up** way of working and discussing how local people can be involved. This event resulted in several positive outcomes, such as:

- Enhancing the engagement network on Arran
- Improved awareness of the roles of local groups and organisations
- Highlighted concerns identified by local resident groups for action

Focus has been on improving services that support the **mental health of young people**. In early December 2020 a capacity building event took place with Mental Health Youth Ambassadors from Arran High School, to discuss local services and address a perceived lack of appropriate youth mental health services on the island.

The **Capacity Building** session was very well received by The Mental Health Youth Ambassadors who engaged enthusiastically articulating their needs, issues and aspirations for bespoke Youth Mental Health Services. The young people expressed the need:

- to de-stigmatise the 'Wellbeing Centre' and develop safe spaces all around the school
- explore more creative types of wellbeing including art, music and pet therapy
- develop balanced physical wellbeing by ensuring more sporting options directly targeting girls and prioritising all sports like football, basketball, netball & rugby
- explore the potential of group therapies
- introduce qualifications around Mental Health including an alternative curriculum
- enhance communications regarding wellbeing and the opportunities within the wellbeing centre.

Following this event, it was agreed to explore the pursuit of Community Investment Funding. In March 2020, a further capacity building event took place with several local partners at the Arran Outdoors Centre with the aim to pursue a joint CIF bid to address the needs identified by young people. This event was considered a success and activity will now take place to pursue a CIF application and other funding to support developments for young people on the island.

In support of the local community and **encourage younger people** into a career in the Health and Social Care Partnership, a jobs fair was held in support of choice and opportunities available.





During the service year, the Garnock Valley progressed work to help address the concern of **social isolation and loneliness** experienced by local people. On 8th December 2019, the LPF hosted an event in the Montgomery Court Community Hub bringing together local partners from Community Learning and Development, Community Link Workers, St Bridget's Primary School and the Beith Trust.

The session aimed to:

- Identify local need in the Garnock Valley
- Consider how social isolation and loneliness could be address in the locality.

The session included many active engagement methods, including:

- Icebreakers, brainstorming, idea snowballing, social singing and inter-generational work.

Impact Stars were used to evaluate participants experiences, and importantly they had the opportunity to identify what they would like to see developed in their locality that they could redress the issues of Social Isolation and Loneliness moving forward.

One agreed solution was for Montgomery Court to develop lunch and/or activity clubs with additional developmental support to them to help build more local capacity. Further development was identified with other third sector groups, who may wish to develop new services in the area with possible groups to include the Beith Trust who have agreed to deliver cooking sessions and training for the targeted communities.

This bottom-up approach at a locality level was identified as a positive way to redress Social Isolation and Loneliness based on expressed needs, issues and aspirations. Further sessions are planned to engage with more groups to further enhance the approach and address the concerns of social isolation and loneliness.



Following concerns raised by LPF members in relation to **local mental health** concerns, a decision was made with local partners to pursue a consortium bid for funding from the National Lottery.

Discussions then raised awareness that several local groups and third sector partners were seeking to apply for funding to deliver local programmes to support mental health. The suggestion was made to pursue a joint bid in order to ensure a more collaborative approach to service delivery and perhaps lever in greater resources for local people.

A '**Coffee, Cake and Chat**' event took place in December 2019 bringing together partners from Community Learning and Development, Community Link Workers, Kilwinning Library and Third sector Partners.

The event proved to be very enlightening and positively motivating regarding new developments and a more co-operative approach:

- to build more bespoke family services
- to minimise silo working within the locality
- to develop/detail a consortium lottery bid to add leverage/resources within the locality
- to use the library space for future developments to de-stigmatise services
- to introduce qualifications around Mental Health including an alternative curriculum

The group will now seek further partners to participate in the consortium approach including Further Education and explore the development of a Wellbeing Academy.

Further developing the consortium approach, in March 2020, the LPF led on an engagement activity with local partners to consider the development of a local Wellbeing Curriculum for the Kilwinning area, namely in delivering the '**Practical Approaches to Mental Health**' programme to the local people and groups.

The event discussed how best to deliver to jointly deliver the curriculum, ensuring wide reaching engagement and participation by local people who require the service. Going forward the consortium of organisations pledged to a more corporate way forward; maximising the impact and minimising duplication by:

- Co-facilitating the course
- Minimising silo working within the locality
- Using corporate approaches to monitor/evaluate the programme
- Using the library space for future developments
- De-stigmatising Mental Health Services
- Introducing accredited and non-accredited learning around Mental Health

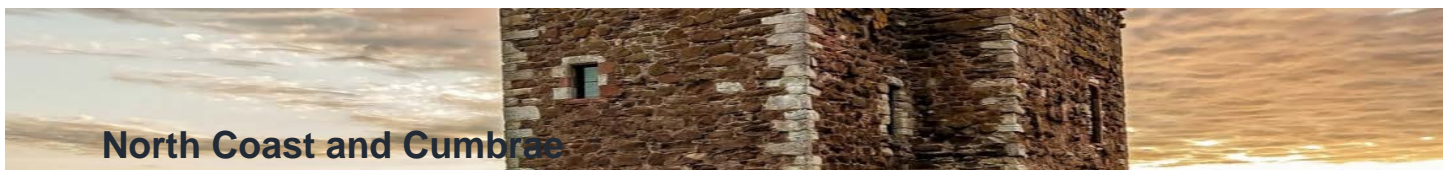


In February 2020, Irvine Locality Planning Forum engaged with the Parent Council from Irvine

In February 2020, Irvine Locality Planning Forum engaged with the Parent Council from Irvine Royal Academy to raise awareness of the forthcoming **Addictions Participatory Budgeting** (PB) Event. As part of their new strategy, North Ayrshire Alcohol and Drug Partnership ran a PB event to provide funding to local groups to deliver local projects to help address drug and alcohol misuse.

The Irvine LPF, along with colleagues from Connected Communities and other senior staff, provided key support and guidance to members of Parent Council. This was identified as a need following an increase in concerns in relation to drug misuse among pupils. In addition to addressing concerns over substance misuse, discussions looked at the potential to ‘**co-deliver**’ a response to mental health concerns within the school.

The Awareness Raising Session was positively received by the parent council, pupil representatives and senior staff, identifying evolving mental health/drug concerns within the school community and potential partnership responses.



During 2019-20, the North Coast LPF invited two Mental Health ambassadors from Largs Academy to join the forum. Both S6 pupils, they added a much-valued youth voice to the group. Following on from discussions at the forum and concerns raised regarding the increase in mental health concerns of pupils in the North Coast, the LPF organised a ‘Discussion Dinner’ with pupils of Largs Academy and their parents to look at addressing local Mental Health Concerns. The discussions then generated the idea of producing a Mental Health information leaflet for all young people in the North Coast area that would be ‘**co-produced**’ by young people.

On World Mental Health Day (10th October 2019) a bespoke ‘**Breakfast Blether**’ and capacity building session took place in order to co-produce a ‘Pocket Guide to Wellbeing Services’.

The Capacity Building Session was sponsored by UNISON enabling a social breakfast as a medium to engage. Pupils felt strongly that the Guide should be a discrete fold away, paper-based tool rather than an app or online medium as some young people don’t always have access to the internet. It was also agreed that this would be a useful tool for all primary seven pupils transitioning to the academy from the associated cluster schools. As such, many aspects had to be considered, such as; the language used, advice provided was suitable for all ages, and signposted supports were approved by Education and CAMHS.

Through further support from the LPF, funding was sought to enable the printing and distribution of 2000 guides.

In February 2020, the LPF took part in a capacity building session looking at Practical Approaches to Mental Health. The overall aim was to enable members to increase their knowledge and awareness of Mental Health and thereafter be empowered to cascade the session within their respective communities.

The Capacity Building session was very well received by the participants and the potential impact within communities enthusiastically discussed. The participants were in the main practitioners, a parent and 2 youth ambassadors all keen to implement.



Over the past year, the Three Towns Locality Planning Forum has continued to work towards addressing their local priorities of; improving the mental health and wellbeing of young people, reducing social isolation, and improving support to those with complex needs.

Several key action points were planned for delivery by LPF members during the 2019-20 service year but have been postponed due to the COVID-19 Pandemic. Actions for delivery included:

- Rolling out of '**Practical Approaches to Mental Health**' to communities and Third Sector organisations in the Three Towns.
- Accessing '**Cash Back for Communities**' funding to implement a 2-year physical wellbeing programme
- Deliver a '**Hogwarts**' themed event to help reduce the impact of Social Isolation on young people
- Seek to develop a '**Wellbeing curriculum**' in the Three Towns

It is hoped these actions can still be delivered when safe and appropriate to do so.

Throughout the service year, in recognising the value of working closely with the local community, the LPF began actively engaging with local support groups and projects. In this way, the group aims to work in collaboration within their local community to address their identified priorities.

In February, discussion took place with forum members, colleagues from Connected Communities and representatives from Ardeer Church to assess the possibility of establishing a support base there to provide support to young people with poor mental health. This service would also seek to implement some form of financial inclusion, such as a Credit Union for young people. Unfortunately, discussion have been delayed due to the impact of the COVID-19 Pandemic.

Community Link Workers based in the Three Towns have benefitted from the identification of local support groups. When working with local people, Community Link Workers have been

able to advise of the wide range of support groups available within the local area. This has included referrals to projects that support men's mental health, such as the '**New Hope project**'; and the Saltcoats '**Link-up project**' and the '**Hope project**' delivered by CLASP, which aim to address social isolation.

5

Transformation Programme

North Ayrshire's Transformation Team support Partnership teams to identify, develop and deliver system wide change to local services and improve outcomes for the people of North Ayrshire



Review of Integration

The North Ayrshire Integration Joint Board submitted its Ministerial Steering Group (MSG) Review of **Integration self-assessment** which highlighted areas of both good practice and improvement to the Scottish Government in May 2019. The Scottish Government MSG integration review identified the following key areas, with sub proposals, to both enable and improve the effectiveness and pace of integration:

- Collaborative Leadership and Relationship Building
- Integrated finance and financial planning
- Effective strategic planning for improvement
- Governance and accountability
- Ability and willingness to share information
- Meaningful and sustained engagement

Since May 2019 a wide range of work has been undertaken across service areas to address identified areas of improvement, which will improve the pace of integration and these are noted below:

Collaborative Leadership and Relationship Building

- Development of a partnership Workforce Development Strategy
- Third and Independent Sector teams are represented as part of Thinking Different: Doing Better
- Independent sector involved in the development of the new Care Home Commissioning Strategy

Integrated finance and financial planning

- Development of medium-term financial plan
- The support for a section 95 officer and the HSCP reserves policy has been approved
- Development of IJB Directions. Workshops have been held pan – Ayrshire to discuss a consistent approach to Directions

Effective strategic planning for improvement

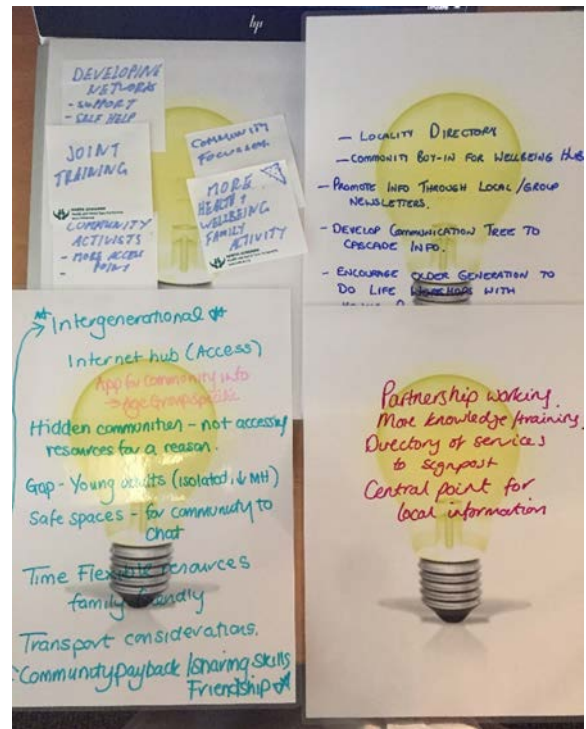
- Succession planning and ongoing IJB development sessions
- Review governance processes, budget setting arrangements and the links to succession planning

Ability and Willingness to share information

- Improvements around performance information, benchmarking and reporting information to the Performance & Audit Committee continues.
- Drive to make information more accessible to the public and delivery of an accessible Annual Performance Report

Meaningful and sustained engagement

- A new approach of working directly with communities and key groups in their settings has been developed.



Communities

- The HSCP '**Thinking Different: Doing Better**' initiative has delivered 137 staff sessions in total (2113 attendees), 17 college sessions (292 attendees), champions board (11 participants), University of West of Scotland (10 attendees), 5 community sessions (75 attendees) and 24 sessions for colleges/community (388 attendees).
- This promotes the HSCP as a positive employer offering access positions after young people have completed their studies.
- The HSCP, building on its positive relationships with the connected communities' team, was identified by Scottish Government as one of three national test sites for '**co-creating libraries for wellbeing**' leading to the creation of a wellbeing hub in Kilwinning library, which was co-designed with the Mental Health Youth Ambassadors from Kilwinning academy.

Health and Community Care

- **Primary Care Implementation Plan** - Primary Care continues to move its model to a multidisciplinary approach with the provision of practice-based pharmacists, MSK physiotherapists and mental health practitioners.
- Community link workers cover all the practices across North Ayrshire. GP Practices continue to develop their GP clusters, working together on quality improvement activities within their geographical areas.
- The HSCP has been working with NHS Ayrshire and Arran in developing its '**Caring for Ayrshire**' 10-year vision for locality health and wellbeing. Within Ayrshire, 90 per cent of all health and care contacts take place within a community setting, with the remaining 10 per cent in a hospital setting. We want to improve all these contacts, beginning with providing more services closer to home or in a homely setting, and working in partnership with our communities to support improved health and wellbeing. In support of the initiative a number of project updates have been presented to the Integration Joint Board in recognition of the North Ayrshire HSCP requirements to the initiative;

[Caring for Ayrshire – Project Initiation Document \(PID\).](#)

[Caring for Ayrshire Programme – Informing, Engagement and Communication Plans](#)

Children, Families and Justice Services

- NHS Ayrshire & Arran and North Ayrshire Health and Social Care Partnership are building a new national facility for young people at Ayrshire Central Hospital in Irvine.
- The Council has approved plans for the new **National Secure Adolescent Inpatient Service (NSAIS)**, with building expected to start in July / August 2020. This will be a 12-bedded unit for children aged 12 to 17 years who have complex difficulties and need a high level of care. It will provide the first secure adolescent inpatient service for young people in Scotland.
- This unit is a key strand of NHS Scotland's Mental Health Strategy 2017-2027
- **ASN development** -The construction phase of the New ASN Residential & Respite (R&R) Houses and the new ASN Campus has seen us work together with various different teams across the Council including Education, NHS, Facilities Management, Property Maintenance & Investment as well as continued engagement with the parents and the young people who currently attend the Mungo Foundation Respite facility to improve the lives and the wellbeing of all of the children & young people who will reside in the new facilities.

- The Children with Disabilities team are going to have offices within the new ASN school which will also contribute to improving the lives of the Children & Young people who will attend the New ASN School as well as those who reside in the R&R Houses.

Mental Health and Learning Disability Services

- **Warrix Avenue** is a purpose-built community-based rehabilitation services located in Irvine, North Ayrshire. The service offers time limited interventions to individuals with severe and enduring mental health needs. The environment offers opportunity for individuals, as part of their recovery journey, as close to independent living as possible.

The interdisciplinary team at Warrix Avenue aspire to promote hope, opportunity and recovery through “**doing with, not for**” by working in partnership with individuals. Warrix Avenue has now been open for 1 year; our first admission into the unit was on the August 2019.

Since the opening of Warrix Avenue we have:

- Received 15 referrals.
- Supported 8 admissions.
- Required to transfers 3 individuals back to acute in-patient service at Woodland View (due to relapse in mental health, which has led to lack of engagement within their rehabilitation programmes)
- Facilitated 1 discharge back to the community
- As part of setting up **Trindlemoss** (our “day opportunities” centre), we welcomed around 60 representatives, volunteers and community leaders to visit the premises in December 2019 (in parallel with service user, family and staff visits). Invitees ranged from Irvine Locality Policing Team and the Local Debating group through to Waterbabies and Turtletots who were both interested in the pool facility as a possible rental facility.
- With a new emphasis on community-based health and wellbeing (“from the heart of the community”), the facility has the potential for use by such community groups - combining enterprise and the community integration.

6

Reporting on Lead Partnership Responsibility

Each Ayrshire health and social care partnership has lead responsibility for specific services across Ayrshire.

North Ayrshire Health and Social Care Partnership has lead responsibility for:

Mental health services (including psychology, CAMHs, learning disability assessment and treatment)

Child health services (including child immunisation and infant feeding)

East Ayrshire Health and Social Care Partnership has lead responsibility for primary care and out of hours community response

South Ayrshire Health and Social Care Partnership had lead responsibility for technology enable care (TEC) and falls prevention.

Details of North Ayrshire's performance in these services is available from the other Partnership publications that can be found by clicking on each Partnership name:

[East Ayrshire Health and Social Care Partnership](#)

[South Ayrshire Health and Social Care Partnership](#)

Mental Health Services

Across Scotland both primary and secondary schools have reported increase numbers of children and young people presenting with stress, anxiety, depression, low mood and self-harm. This demand has also been reflected by an increase in referrals to specialist **Child and Adolescent Mental Health Teams (CAMHS)**. This increase has undoubtedly put a strain on several services, not least on the families of the young people.

In January 2018, the Ayrshire and Arran **Wellness Model** looked to test a whole system model of mental health support by developing a fully integrated approach aligning specialist child and adolescent mental health teams with developing initiatives in partnership with North Ayrshire schools and other parts of the community. The aim of the whole system approach:

- By the end of 2020, there will be clear evidence of a shift in the emotional wellbeing of children and young people within one locality (Kilwinning) evidenced by more appropriate requests for assistance being made to CAMHS.

The Ayrshire & Arran Wellness Model has significantly influenced, managed and changed the demand pressures placed on specialist mental health services to children and young people in a locality, ensuring those individuals with serious mental health concerns are seen timeously and appropriately. This model fits around children and young people's needs using a broader lens for mental health services, and one that incorporates the wider system, supporting young people wherever they are.



Stakeholder comments

"Feel really empowered after today"

"What is the follow up to today; needs to be something"

"There is improved communication with CAMHS and School. Great there are named people in CAMHS to contact –Education, Kilwinning Academy."

"Make all parents aware of what is out there other than CAMHS"

"The KWM is much better from a GP point of view – GP KMP"

"Whole world of support that people need to know about"

"Didn't know all these services were in Kilwinning schools – Parent"

"It has raised confidence of what is urgent and what isn't – Primary HT"

In addition, being a positive approach to children and young people's needs, the Wellbeing Model has received various accolades:

- ICIC19 – 19th **International Conference on Integrated Care**, San Sebastian, Basque Country 1-3 April 2019. A successful abstract based on the Kilwinning Wellness Model has resulted in the Kilwinning Wellness Model being asked to present a poster at the Conference in San Sebastian at the International Conference on Integrated Care in April 2019.
- 9th May 2019 - **Mental Health Access Improvement Support Team** - Kilwinning Wellness won a prize for its innovative work and showing both qualitative and quantitative data.
- 24th June 2019 **Dynamic Earth Edinburgh** – the Kilwinning Wellness Model is part of the presentation of Improving outcomes for children and young people and Parental empowerment.

NHS Ayrshire & Arran developed a **Drug and Alcohol mobile application** (app) which provides people with all the information someone might need to seek help for themselves or someone they know who has a drug or alcohol addiction.

This app provides information about:

- Local services and support
- Helpful websites
- Current alerts
- Who to contact in an emergency
- Events in your including free training
- Self-help
- What is happening in Ward 5 (Addiction facility at Woodland View)

As of 1st April 2020, the **Adult Community Mental Health Service** was due to **co-locate** and reside at the 3 Towns Resource Centre. All construction and cosmetic works were completed on time, however, due to the COVID-19 pandemic essential ICT works were redirected and reprioritisation and therefore has not been completed at this time. As such a decision was taken to postpone all staff moving in. The footfall of staff through the building, and existing accommodations (Ayrshire Central Hospital and Caley Court) has been reduced to minimum numbers, with other staff working from home but able to mobilise from there as appropriate.

The Annual operating plan for **Psychological therapies and CAMHS** waiting times was submitted to the Scottish Government during December 2019. Regular meetings have been established with the Scottish Government during January to March 2020. An update report was provided to the Integration Joint Board, [Scottish Government Waiting Times Standard for Psychological Therapies](#), in September providing an update on progress against the waiting times standards.

The planned trajectories/actions are being revised further due to the impact of the COVID-19 emergency to reflect anticipated change in demand.

One of our **Alzheimer Scotland dementia nurse consultants** in NHS Ayrshire and Arran, was nominated in the **Leader of the Year** category at the Scottish Health Awards. She recently helped set up a **Carers Academy** to offer support and advice to those caring for someone with dementia. The joint initiative between University Crosshouse Hospital in Kilmarnock and the University of the West of Scotland has been a big success so far. She said,



“We have a huge vision about helping people with dementia to live longer and healthier lives at home, if that’s what they want to do. A lot of people who are living at home are dependent on family members, so we wanted to try to support them in meeting the care needs of their loved ones. The Carers Academy has been running for six months. We focus on helping people develop practical skills so they can continue in their caring role. Our carers are totally inspiring in their commitment to their loved ones and their willingness to do what they can to help someone stay at home. It’s hugely rewarding to be part of it.”



“We’ve had great feedback. A lot of carers have said it helps in terms of advance planning and understanding some of the signs and symptoms. They’ve also spoken about it reducing some of the isolation they feel and the benefits of peer-to-peer learning and sharing experiences with other carers.”

During 2019-20, **Woodland View** was visited twice by the Mental Welfare Commission in July and September. On both occasions the inspectors responded with recommendations. Woodland View provides older people’s rehabilitation as well as dementia, mental health and addiction services for people across Ayrshire and Arran.

During the July visit inspectors met and reviewed the care and treatment of all five patients, whilst speaking with the charge nurse, staff nurses and healthcare assistants throughout the day and noted 1 recommendation related to additional training needs.

The full report can be found here – [Report on unannounced visit to Woodland View, Wards 9, 10 and 11.](#)

During the September visit inspectors met with and reviewed the care and treatment of 11 patients and two relatives. They spoke with charge nurses, staff nurses, health care assistants and the bed manager and made 2 recommendations related to essential document access and the delayed discharge process.

The full report can be found here – [Report on announced visit to Woodland View.](#)

Child Health Services

Child Health Service is responsible for the comprehensive immunisation/screening/health review programmes and fail-safe aspects provided to the eligible population across Ayrshire and Arran. The Child Health Service is governed by Scottish Government legislation and protocols.



- The Children's Immunisation Service provides the Ayrshire school-based immunisation programme, including Human Papilloma virus (HPV), Diphtheria, Tetanus and Polio, Meningitis ACWY, and Measles, Mumps and Rubella (MMR). In North Ayrshire this programme is offered to 7,712 (0.55% increase on previous year) pupils between the cohorts of S1 to S6. The annual influenza vaccine is offered to 12,585 (23.03% increase on previous year) pupils from Primary 1 to 7. As part of the roll out of the Vaccination Transformation programme, 8 new staff nurses have been recruited to deliver the routine childhood clinics within North Ayrshire.
- Health visitors in the infant feeding service continue to promote, protect and support breastfeeding, referring mums to the community infant feeding nurse for support with more complex issues. Audit shows that the care provided is of a high standard and well received. Work remains ongoing across Ayrshire to increase the number of premises signed up to the Breastfeeding Friendly Scotland scheme

7

Inspection of Services

The Partnership works closely with independent care providers to ensure that the care and support provided is being delivered in line with peoples' outcomes, offers best value, meets regulatory requirements and keeps people healthy, safe and well.

Care services provided by Partnership teams also undergo external inspections and are subject to rigorous review and inspection. Working together, we ensure that all required standards of quality and safety are met.



Independent Care Providers who provide care services on our behalf

Independent care and 3rd sector providers, via the contract management framework, maintain and improve their standards of care and support on an on-going basis. We use a range of methods to monitor performance, including:

- Compliments, complaints and feedback from staff, carers and people who use services
- Information that we collect, before visits, from the provider or from our records
- Local and national information, for example, Care Inspectorate reports
- Visits to providers, including observing care and support and looking at records and documents

The information below represents how services are performing, monitored via the contract management framework and ensures services are safe, effective and most of all, that they meet people's needs.

Ensuring an acceptable level of support is provided to all service users our contract monitoring team undertake assessment for quality assurance.

Registered Services: Minimum Grades Across All Themes		Current lowest grade in any assessed quality theme						
Care Service	Subtype	1 - Unsatisfactory	2 - Weak	3 - Adequate	4 - Good	5 - Very Good	6 - Excellent	Total
Adoption Service						1		1
Adult Placement Service						2		2
Care Home Service	Older People			6	9	4		19
	Children & Young People			2	4	1	2	9
	Learning Disabilities				4	1		5
	Mental Health Problems			1				1
Fostering Service					2			2
Housing Support Service			1		5	9	3	18
School Care Accommodation Service					2	5		7
Support Service	Care at Home		1	1	8	13		23
	Other than Care at home				8	1	1	10
Total			2	10	42	37	6	97

<https://www.careinspectorate.com/index.php/publications-statistics/93-public/datastore>

Care services provided by Partnership teams

The services that the Partnership provides undergo inspection from the Care Inspectorate. In 2019–20, 12 internal services were inspected, 2 scheduled and 10 unscheduled, and the table below shows the care grades awarded.

The highlights of the inspections over the last year have been:

- 'Very Good' grade awarded to Achnamara Children's House.
- 'Very Good' grades awarded to our Adoption Service and Fostering Service
- 'Excellent' grades awarded to Three Towns, North Coast and Arran CAH Service and Irvine, Garnock Valley & Comm Alarm
- 'Very Good' grade for Anam Cara
- 'Very Good' grade for Stevenson Day Care & Resources

Children & Families		
Service	Care Inspectorate Number/Inspection Date	Quality Theme – Care Grades (Out of 6)
Canmore (U)	08 May 19 CS2003001160	Quality of Care & Support – 4 Quality of Environment – 4 Quality of Management & Leadership – 3
Adoption Service (A – Short Notice)	04 June 19 CS2004080741	Quality of Care & Support – 5 Quality of Management & Leadership – 5
Fostering Service (A – Short Notice)	04 June 19 CS2004085341	Quality of staffing – 5 Quality of Care & Support - 5
Canmore Children's House (U) - <i>Follow up visit</i>	15 August 2019 CS2003001160	Gradings from May 2019 Quality of Care & Support – 4 Quality of Environment – 4 Quality of Management & Leadership – 3
The Meadows Children's House (U)	27 August 2019 CS2007142325	Quality of Supporting Wellbeing – 4 Quality of Leadership – 3 Quality of Care & Support – 4
Achnamara Children's House (U)	6 February 2020 CS2007142322	Quality of Supporting Wellbeing – 5 Quality of Care & Support - 5

Community Care		
Service	Care Inspectorate Number/Inspection Date	Quality Theme – Care Grades (Out of 6)
Anam Cara (U)	02 May 19 CS2008177877	Quality of Care & Support – 4 Quality of Supporting Wellbeing – 5
Stevenson Day Care & Resource (U)	08 May 19	Quality of Care & Support – 5 Quality of Staffing – 5 Quality of Environment - 5
Montrose House (U) – Follow up visit	11 July 2019 CS2003001167	Quality of Supporting Wellbeing – 4 Quality of Care & Support – 4
Three Towns, North Coast and Arran CAH Service (U)	18-Feb-20 CS2008192560	Quality of Leadership – 6 Quality of Care & Support - 5
Irvine, Garnock Valley & Comm Alarm (U)	18 February 2020 CS2008192553	Quality of Leadership – 6 Quality of Care & Support - 5
Dementia Support Service (U)	3 February 2020 CS2012306108	Quality of Staffing – 4 Quality of Care & Support - 4

One of the Scottish Government's suite of National Indicators is the proportion of care services graded as 'good' (4) or above in Care Inspection grades.

At the end of 2019-20 there had been 3 inspections of 2 services where 1 quality theme resulted in a value below 4.

All reports on inspected Partnership services are reviewed within the applicable service groups led by senior management. Further assurance and oversight will be performed by the Social Work Governance Board to ensure inspection recommendations and actions are met and reviewed as necessary.

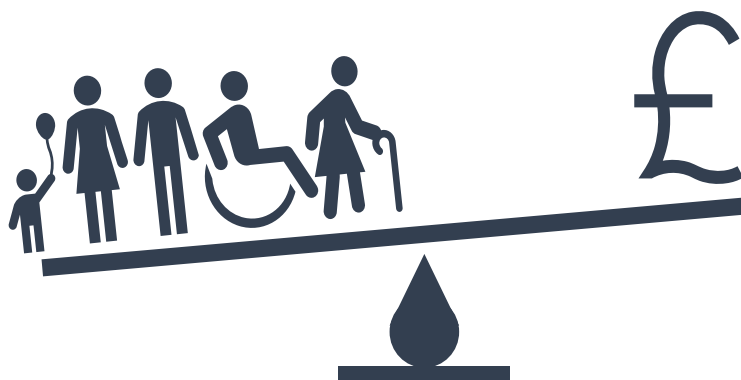
All inspection reports are available via the Care Inspectorate web site here -> [Inspection Reports](#).

8

Financial Performance and Best Value

Financial information is part of our performance management framework with regular reporting of financial performance to the IJB.

This section summarises the main elements of our financial performance for 2019/20.



Partnership Revenue Expenditure 2019/20

The overall financial performance against budget for the financial period 2019-20 was an overspend of £0.154m (£1.250m over in social care services and £1.096m underspend in health services). This position includes the £1.486m budget being held on behalf of the IJB by the Council for debt repayment, as this was required to be transferred back to the IJB at the financial period-end.

This overspend will add to the historic debt carried forward from previous years.

The IJB plans during 2019-20 were that prior to the £1.486m set aside for debt repayment being reallocated to the partnership that the IJB would work towards delivering financial balance in-year which would have allowed the full amount set-aside to be allocated towards the debt at the period-end. The full repayment was not possible during 2019-20.

2018-19 Budget £000	2018-19 Actual £000	Variance (Fav) / Adv £000		2019-20 Budget £000	2019-20 Actual £000	Variance (Fav) / Adv £000
65,900	65,952	52	Health and Community Care	71,521	72,051	530
73,308	72,982	(326)	Mental Health	77,490	78,245	755
35,591	35,705	114	Children, Families and Justice	35,392	36,665	1,273
48,916	48,839	(77)	Primary Care	53,154	53,007	(147)
4,636	4,588	(48)	Allied Health Professionals	5,200	5,089	(111)
6,821	5,970	(851)	Management and Support Costs	9,456	7,114	(2,342)
2,623	2,290	(333)	Change Programme	1,579	1,435	(144)
237,795	236,326	(1,469)	TOTAL EXPENDITURE	253,792	253,606	(186)
(237,795)	(237,795)	0	TOTAL INCOME	(253,792)	(253,792)	0
0	(1,469)	(1,469)	OUTTURN ON A MANAGED BASIS	0	(186)	(186)
0	524	524	Lead Partnership Allocations	0	133	133
0	(945)	(945)	OUTTURN ON AN IJB BASIS	0	(53)	(53)
0	277	277	Earmarking	0	207	207
0	2,562	2,562	FINAL OUTTURN POSITION	0	154	154

Table 1: Financial Performance for 2018/19

The main areas of variance during 2019-20 are noted below:

Health and Community Care – overspend of £0.530m mainly relates to an overspend in care at home placements, models of care and elderly in-patients partially offset by underspends in care homes, adaptations, district nursing and health care packages.

Mental Health – overspend of £0.755m which relates to an overspend in learning disability care packages partly offset by underspends in community mental health and the Lead Partnership for mental health (psychology, child and adolescent mental health services (CAMHS), Action 15 and psychiatry).

Children, Families and Justice – overspend of £1.273m is mainly related to an overspend in residential and secure placements.

In general, the areas above are overspent within the social care aspect of service provision which is demand led and subject to fluctuations throughout the period. These are at times difficult to deliver within budget as some services by their nature can be low in volume but at very high cost.

Management and Support Costs – underspend of £2.342m mainly relates to the period-end allocation of the £1.5m for the debt repayment and budget pressure funding where spend commitments were delayed and therefore funding was not transferred to services in-year.

It is disappointing that the IJB end the financial period with a relatively small increase (£0.154m) to the debt owed to North Ayrshire Council, taking the total closing debt balance to £5.293m. Despite this there were a number of key successes for 2019-20:

- Continue to demonstrate the IJB position being accounted for in a truly integrated way with resource shifting from the NHS budget to offset Social Care pressures;
- Implemented the financial recovery plan and the actions therein contributed to a steady reduction to the forecast overspend through the year, despite new demands for services partly offsetting the financial impact of the plan;
- Savings totalling £4.5m were delivered in-year, against an approved plan of £6.1m, with savings delivered in excess of those being assessed as low risk for delivery at the start of the financial year;
- Progress with reducing the financial overspends specifically for care home and children's residential placements which will have a significant impact on the financial plans and sustainability for future years; and
- Further work has been undertaken to establish where there are areas where there has been a significant variation and movement during the period which has resulted in a re-alignment of the opening budget moving into 2020-21.

Moving into 2020/21, the Partnership is proactively working to provide safe and effective services for the residents of North Ayrshire within the financial envelope. However, the main risk to the partnership moving into the new financial period is the uncertainty around the **Covid-19** pandemic.

From the outset of the pandemic the HSCP acted very swiftly to respond by reprioritising resources to protect and adapt core services to support the safety of our staff and communities.

Whilst responding to the specific needs of North Ayrshire communities our approach is informed by the extensive and continually evolving range of national guidance which has been produced at pace by the Scottish Government and other agencies. It has been a real challenge for the North Ayrshire HSCP, and for partnerships across Scotland, to operate in this unprecedented environment, keeping up with the evolving position and associated demands and impacts on services.

The HSCP developed a mobilisation plan detailing the additional activities to support our response to COVID-19, alongside the estimated financial impact. The plan provides a focal point for the partnership's response to the pandemic and this set out clearly from the start how we would adapt and mobilise services to either expand or retract, re-prioritise activities and resources and highlights the areas of greatest risk.

Key areas of the **mobilisation plan** submitted to the Scottish Government include:

- Reducing the level of delayed discharges for patients in acute, Mental Health inpatients and community hospitals;
- Island resilience with planning supported by a Multi-Disciplinary Team approach including local GPs;
- Our community hospital response to managing potentially high bed occupancy levels, alongside staff availability and the flow from acute;
- Maintain as far as possible mental health services, with community provision limiting face to face contact and flexibility of resources for in-patient services to ensure no cessation of services;
- Resilience and sustainability of current levels of care at home provision, alongside increasing capacity to facilitate hospital discharge and support shielded individuals;
- Step Up/Step Down residential provision, establish provision of temporary residential or nursing care provision to both facilitate quicker hospital discharge and to avoid further hospital admissions from the community, including planning for contingency surge capacity;
- Supporting adults with complex needs by ensuring alternative community supports on closure of respite and day services alongside social distancing requirements;
- Maintaining existing levels of care in our children's services to protect vulnerable children and adopting new ways of keeping in touch with vulnerable children;
- Established "enhanced" locality-based Community Hubs to support vulnerable individuals, including those shielding; and
- Sourcing and establishing reliable supply chains of Personal Protective Equipment (PPE).

The mobilisation plan is monitored regularly and updates on the costs associated with the NAHSCP response to COVID-19 are submitted to the Scottish Government.

Financial outlook, risks and plans for the future

In October 2018, the Scottish Government published the **Medium-Term Health and Social Care Financial Framework** which sets out the future shape of Health and Social Care Demand and Expenditure.

Within the report it outlined that the Institute of Fiscal Studies and Health Foundation reported that UK spending on healthcare would require to increase in

real terms by an average of 3.3% per year over the next 15 years to maintain NHS provision at current levels, and that social care funding would require to increase by 3.9% per year to meet the needs of a population living longer and an increasing number of younger adults living with disabilities. The report recognised that despite additional planned investment in health and social care the system still needs to adapt and change.

The focus of the financial framework is on the main health and social care expenditure commitments, as set out below.

- Over the course of this parliament, baseline allocations to frontline health boards will be maintained in real terms, with additional funding over and above inflation being allocated to support the shift in the balance of care.
- Over the next five years, hospital expenditure will account for less than 50% of frontline NHS expenditure. This relates to the policy commitment to 'shift the balance of care', with a greater proportion of care provided in a setting close to a person's home rather than in a hospital.
- Funding for primary care will increase to 11% of the frontline NHS budget by 2021–22. This will amount to increased spending of £500 million, and about half of this growth will be invested directly into GP services. The remainder will be invested in primary care services provided in the community.
- The share of the frontline NHS budget dedicated to mental health, and to primary, community, and social care will increase in every year of the parliament. For adults, and in some cases for children, these services, along with unscheduled hospital care, are now managed by Integration Authorities.

The **Ministerial Strategic Group (MSG)** for Health and Community Care published a report following the Review of Progress with Integration of Health and Social Care (February 2019). Within the integrated finance and financial planning area the proposals include:

- Health Boards, Local Authorities and IJBs should have a joint understanding of their respective financial positions as they relate to integration
- Delegated budgets for IJBs must be agreed timeously
- Delegated hospital budgets and set aside requirements must be fully implemented
- Each IJB must develop a transparent and prudent reserves policy



- Statutory partners must ensure appropriate support is provided to IJB Section 95 officers
- IJBs must be empowered to use the totality of resources at their disposal to better meet the needs of their local populations.

The Partnership has a responsibility, with our local hospital services at University Hospital Crosshouse and University Hospital Ayr, for planning services that are mostly used in an unscheduled way. The aim is to ensure that we work across the health and care system to deliver the best, most effective care and support. Service areas most commonly associated with unplanned use are included in the '**Set Aside**' budget. Set Aside budgets relate to the strategic planning role of the Partnership. Key areas within this budget are:

- Accident and emergency
- Inpatient services for general medicine
- Geriatric medicine
- Rehabilitation
- Respiratory
- Learning disability, psychiatry and palliative care services provided in hospital

Acute Services within NHS Ayrshire and Arran continue to face budget pressures around the costs of covering a high level of medical vacancies and the increasing needs of patients requiring nursing support above funded levels. There have been a high number of unfunded beds in use to meet demands and this pressure has been managed in-year by NHS Ayrshire and Arran in line with the Integration Scheme. The ability to plan with the overall resource for defined populations and user groups and to use budgets flexibly is one of the hallmarks of integrated care.

It is recognised that there is a need to understand the progress that is being made towards planning across the full pathway of care, including the acute hospital component and the way in which the statutory guidance on the use of delegated hospital budgets is being applied in practice.

Set Aside resources, as well as Lead Partnership were recognised as areas requiring further development as part of the review of the Integration Scheme carried out in 2017 and in the Strategic Planning, Commissioning and Delivery of Health and Social Care Services within NHS Ayrshire and Arran report to the IJB on 13 June 2018.

This report sets out arrangements for the next steps in respect of 'fair share' commissioning within the NHS Ayrshire and Arran health and social care system. The report also outlines future developments in respect of **Directions** as per the model provided by the Public Works (Joint Working) Scotland Act 2014 for IJBs to commission services from Councils and NHS Boards.

Pan-Ayrshire workshops have been held with representatives from the Scottish Government to take forward a national pilot project on '**fair share**' commissioning using Directions. This national pilot will ensure that delegated hospital budgets and Set Aside budget requirements will be fully implemented. The Ministerial Strategic Group for Health and Community Care Review

of Progress with Integration of Health and Social Care report published February 2019 set this out as a key proposal under integrated finances and financial planning requirements.

The Scottish Government issued Statutory Guidance in January 2020 outlining the requirements for the use of **Directions** from Integration Authorities to Health Boards and Local Authorities. The guidance sets out how to improve practice in the issuing (by IJBs) and implementation (by Health Boards and Local Authorities) of directions issued under the Public Bodies (Joint Working) (Scotland) Act 2014. This new guidance **supersedes the Good Practice Note** on Directions issued in March 2016. The Scottish Government worked closely with IJB Chief Officers to better understand the diversity of practice across Scotland surrounding directions and to identify good practice. They also discussed the use of directions with a range of local systems at regular partnership engagement meetings, including with Health Board and Local Authority Chief Executives. The three Ayrshire HSCPs supported Scottish Government colleagues to develop the guidance and provided feedback on its practical application.

Preparatory work is well underway with the support of the Scottish Government, NHS Ayrshire and Arran and the other Ayrshire HSCPs to progress and develop the set-aside arrangements and lead partnership services to fully implement the legislative requirements. Including arrangements in relation to the use of Directions, Commissioning Plans and overall progress towards a **Fair Share allocation of resources**. Progress with this work has been delayed due to focussing on the COVID-19 response and will require to be progressed later in 2020-21.

In March 2017, the IJB approved the first **Medium Term Financial Plan** covering the period 2017-2020. This is being refreshed and will be presented to the IJB during 2020, this was planned to be presented to the IJB in June 2020, however this has not been possible due to focussing on the COVID-19 response and also the ongoing uncertainty over costs and funding not only for 2020-21 as part of the response but also the impact on future funding for the public sector.

Availability of funding for public services correlates with economic growth, which continues to be weak with continuing uncertainty on the impact of **Brexit** and the **COVID-19 pandemic**. The partnership is supporting the continuing work within the Council and NHS Ayrshire & Arran to minimise the impact of Brexit and the COVID-19 pandemic. An area of risk to the partnership is the consequence of the funding pass through from the Council and NHS and the availability of workforce. The implementation of new policy initiatives and the lifting of the public sector pay cap also impact on the funding available for core services and the flexibility to use resource in line with local requirements.

The most significant risks faced by the IJB over the medium to longer term, alongside mitigation, are summarised below:

Impact of budgetary pressures	Delivery of the Change Programme	Culture and practice
<p>•Mitigation</p> <ul style="list-style-type: none"> •Medium Term Financial Plan •Strategic Plan •Change Programme/Service Redesign •Active Demand Management •COVID-19 Funding 	<p>•Mitigation</p> <ul style="list-style-type: none"> •Transformation Board •Programme Leads •Strategic Planning Officers Group (SPOG) •Transformation Team Project Management Support 	<p>•Mitigation</p> <ul style="list-style-type: none"> •Thinking Different, Doing Better HSCP experience •Multi Disciplinary Team Approach •Strategic Workforce Plan •Valued Health and Social Care Services

These risks emphasise the importance of effective planning and management of resources. It is therefore crucial that we **focus on early intervention, prevention and recovery** if we are to work within the total delegated partnership budget.

To achieve its vision, the Partnership recognises it cannot work in isolation. The Partnership will continue to strengthen relationships with colleagues within the Community Planning Partnership to ensure a joint approach to improving the lives of local people.

Most importantly, the Partnership must **work more closely with local people** and maximise the use of existing assets within communities to improve the overall health and wellbeing of people in North Ayrshire.

Best Value

North Ayrshire IJB is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for and used economically, efficiently and effectively.

The governance framework comprises the **systems** and **processes**, and **culture** and **values** by which the IJB is directed and controlled and the activities through which it accounts to, engages with and leads the community. It enables the IJB to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.

Regular performance information is provided to the Performance and Audit Committee, IJB members and operational managers. Benchmarking is used to compare performance with other organisations to support change and improvement. The contribution towards the national outcomes is monitored through its quarterly and annual performance reports. The budget also

recognises the need to link expenditure to outcomes, but there is still a need to improve the links between budget and outcomes. There is evidence of transformation taking place at strategic and operational level within the partnership.

We have begun to see some of the benefits of integrated system working for example in supporting older people to remain at home or get home from hospital as soon as possible.

Some of our achievements in 2019/20 include:

- The **Community Link Worker** service provided **6,273** links to local and national supports and services.
- The **Money Matters Team** undertook 4,951 and achieved financial gains of over **£15million** for individuals
- Our new **Facebook** page launched in February. The page will enable the partnership to reach a wider audience, sharing our news and events with more people within our communities. www.facebook.com/NorthAyrshireHSCP.
- Work began on the new **ASN Campus** which will provide respite and residential accommodation for young people with additional support needs.
- **The Alcohol and Drug Partnership** produced a new 5-year Alcohol and Drug Strategy 2019-2024 focussed on the prevention of harm across communities.
- **Justice Services** appointed a dedicated Desistance Officer to support people in the justice system to integrate meaningfully within local communities.
- Joint working between the Health and Social Care Partnership, North Ayrshire Council's Communities Directorate and partners has led to the creation of a North Ayrshire **Intergenerational working** case study booklet
- In collaboration with Carers UK/Scotland, a **Digital resource for Carers** has been launched to provide comprehensive information and support for carers.
- The Police Triage Pathway is now fully rolled out with regular referrals through the **Crisis Resolution Team**.
- **Child and Adult Mental Health Service (CAMHS)** the wellness model was implemented in the Largs locality.
- NHS Ayrshire and Arran and the three Integration Joint Boards of the health and social care partnerships in East, North and South Ayrshire launched their "**Caring for Ayrshire**" vision, outlining how health and care services could be delivered over the next ten years across Ayrshire and Arran.

- Around 150 key partners, stakeholders and members of the community including emergency services, charities and community groups attended a **Drugs Death Summit** to collectively explore what is currently being carried out locally and nationally and discuss what else can be done collectively to prevent drug related deaths.
- The new state-of-the-art **Trindlemoss** day opportunities service and residential accommodation unit for North Ayrshire residents with learning disabilities is now up and running. It offers the chance for people with learning disabilities to take part in a host of activities and learn new skills whilst promoting their independence.
- The interactive staff and public experience **Thinking Different Doing Better** has welcomed staff, community and students to challenge how we all work together to improve the health and wellbeing of our population.

The fifth year as an integrated Health and Social Care Partnership has seen progress towards achieving financial balance and overall service sustainability. The IJB has a deficit of £5.293m (2018-19 £5.139m) as it moves into 2020-21. There is a repayment plan to allow the deficit to be recovered over the medium term to support the financial sustainability of the Partnership.

The IJB recognises it must deliver services within its financial envelope for 2020-21 and our transformation programme will continue with delivery of the savings plan and service redesign, albeit with some delays due to services prioritising the COVID-19 response.

There is a focus on the integration of services to **deliver real change** to the way services are being provided, with a realism that maintaining the status quo is no longer sustainable and changes need to be made in the way services are accessed and provided. The scale and pace of change will be accelerated as services need to adapt to 'the new normal' following the COVID-19 pandemic, however the requirement to change and re-design services to improve outcomes for individuals would exist despite the financial and pandemic pressures.

There is an expectation that within North Ayrshire the pattern of spend will change and there will be a shift in the balance of care from institutional to community settings. The integration of health and social care provides a unique opportunity to change the way services are delivered, it is an opportunity to put people at the heart of the process, focussing on the outcomes they want by operating as a single health and social care service.

The IJB through the Strategic Plan outlines the belief that together we can transform health and social care services to achieve the joint vision for the future “**all people who live in North Ayrshire are able to have a safe, healthy and active life**”. Moving into 2020-21, we are working proactively to address the financial challenges, while at the same time, providing high-quality and sustainable health and social care services for the communities in North Ayrshire.

Reporting on Localities

The Partnership has arrangements to consult and involve localities via their locality forums. The IJB has established six Locality Planning Forums, reflecting the previously agreed local planning areas. These provide Board Members with the opportunity to be involved in

considering the priorities for each area and outline the role for each Community Planning Partner in meeting these priorities in conjunction with the local communities.

This spend has been split into localities by initially allocating spend which could be directly identified to a locality and the remainder which was not locality specific was allocated on a population basis. Per the table below 38.1% of spend was allocated based on population which means at this stage the spend per locality can only be used as a guide and will not fully reflect actual locality usage of services. This is an area which developed during the year with Children and Justice Services moving to a locality-based approach in late 2019/20. The full impact of this will be seen in 2020/21.

The population information used is given below and was taken from the 2018 mid-year population statistics (sourced from NRS).

Age Group	Irvine	Kilwinning	Three Towns	Garnock Valley	North Coast & Cumbrae	Arran	TOTAL	% of spend allocated on this basis
Children age 0-15	31.1%	13.0%	25.5%	14.1%	13.8%	2.5%	100%	12.3%
Adults aged 16-64 years	29.9%	12.1%	24.6%	15.2%	15.1%	3.0%	100%	24.3%
Older People aged 65+	25.6%	10.2%	21.9%	13.8%	23.6%	4.9%	100%	17.2%
Share of total population	29.1%	11.8%	24.2%	14.7%	16.7%	3.4%	100%	8.1%
Total allocated on population basis								61.9%
By locality								38.1%
Total								100%

This resulted in the following spend per locality:

	Irvine £000's	Kilwinning £000's	Three Towns £000's	Garnock Valley £000's	North Coast £000's	Arran £000's	TOTAL £000's
2018/19 Expenditure	74,679	28,266	58,860	36,975	42,655	12,171	253,606
% share of spend	29.4%	11.1%	23.2%	14.6%	16.8%	4.8%	100.0%
% of total population	29.1%	11.8%	24.2%	14.7%	16.7%	3.4%	100.0%

Where to find more information

If you would like more information on IJB strategies, plans and policies and our performance and spending, please refer to the following websites.

www.north-ayrshire.gov.uk/council/strategies-plans-and-policies

www.north-ayrshire.gov.uk/council/performance-and-spending

9

Appendix

Local Indicators

Performance Indicator	2016 -17	2017-18	2018-19	2019-20	Target	Status
People subject to level 1 Community Payback Order (CPO) Unpaid Work completed within three months	93.37%	95.33%	95.6%	98.9%	57%	✓
Individuals subject to level 2 Community Payback Order (CPO) Unpaid Work completed within six months	95.63%	94.27%	97.3%	97.6%	67%	✓
Number of Learning Disability service users in voluntary placements	71	67	58	57	43	✓
Number of bed days saved by ICT, Intermediate Care Team (formerly ICES), providing alternative to acute hospital admission	4,730	5,463	6,563	10,537	3,060	✓
People seen within 1 day of referral to ICT	98.5%	95.66%	100%	99.14%	90%	✓
Number of people receiving Care at Home	1,715	2,021	1,793	1,970	1,703	✓
Number of secure remands for under 18s	1	0	-	-	5	✓
Addictions referrals to treatment within 3 weeks (Alcohol)	93.7% (at Q3)	95%	100%	98.6%	90%	✓
Addictions referrals to treatment within 3 weeks (Drugs)	95.0% (at Q3)	98%	100%	100%	90%	✓
Children who have been through Stop Now and Plan (SNAP) who have been sustained within their local school	100%	100%	100%	N/A	100%	✓
Preschool children protected from disease through % uptake of child immunisation programme (Rotavirus)	95.53%	96.10%	91%	91.1%	92.2%	⚠
Preschool children protected from disease through % uptake of child immunisation programme (MMR1)	96.21%	96%	95%	93.3%	98.2%	⚠
Care at Home capacity lost due to cancelled hospital discharges (shared target with acute hospital services) (number of hours)	7,153	6,305	6,907	6,431.2 7	4,000	✗
Uptake of Child Flu Programme in schools	75.25%	74.70%			72.1%	✓

MSG Indicators

Performance Indicator	2016-17	2017-18	2018-19	2019-20	Target	Status
Emergency admissions to acute hospitals	1,840	1,763	1,622	1,334	1,836	✓
Emergency admissions to acute hospitals (rate per 1000)	13.6	13	12	12	13.6	✓
Admissions from emergency department	1,202	1,131	1,007	638	1,173	✓
Admissions from emergency department (rate per 1000)	8.9	8.4	7.5	8.0	8.7	✓
% people at emergency department who go onto ward stay (conversion rate)	36	34	33	32	33	✓
Unscheduled 'hospital bed days' in acute hospital	12,333	8,798	9,348	9,528	12,320	✓
Unscheduled 'hospital bed days' in acute hospital (rate per 1000)	91	65	69	81	91	✓
Unscheduled 'hospital bed days' in long stay mental health hospital	6,782	5,866 (Mar18)	8,128 (Dec18)	7,149 (Mar20)	6,782	✗
Unscheduled 'hospital bed days' in long stay mental health hospital (rate per 1000)	50	43.3	60	52	50.1	✗
Unscheduled 'hospital bed days' in geriatric long stay	1,665	1,454	943	1,211	1,772	✓
Unscheduled 'hospital bed days' in geriatric long stay (rate per 1000)	12.3	10.7	7	10.2	13	✓
Emergency department attendances	3,385	3,292	3,039	2,527	3,292	✓
Emergency department attendances (rate per 1000)	25	24.3	22.5	24.9	24.4	✗
% people seen within 4 hrs at emergency department	91.4	88.5	87	90	95	✗
Delayed Discharges bed days (all reasons)	781	1,889	1,916	2,073	1,515	✗
Delayed Discharges bed days (all reasons) (rate per 1000)	7.1	17.3	17.5	18.5	13.9	✗
Delayed Discharges bed days (code 9)	308	279	196	372	770	✓
Delayed Discharges bed days (Code 9) (rate per 1000)	2.8	2.5	1.8	2.1	7	✓

Where to find more information

If you would like more information on IJB strategies, plans and policies and our performance and spending, please refer to the following websites.

- www.nahscp.org/partnership-strategies-plans-reports/
- www.nahscp.org/performance/
- www.nhsaaa.net/about-us/how-we-perform/
- www.north-ayrshire.gov.uk/council/strategies-plans-and-policies
- www.north-ayrshire.gov.uk/council/performance-and-spending

Additional financial information for Ayrshire wide services can be found in:

www.east-ayrshire.gov.uk/SocialCareAndHealth/East-Ayrshire-Health-and-Social-Care-Partnership/Governance-Documents.aspx

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