EAST AYRSHIRE

Health & Social CarePartnership

ANNUAL PERFORMANCE REPORT



















Introduction

Welcome to the East Ayrshire Health and Social Care Partnership's Annual Performance Report Summary document, which covers the 2024/25 period, our tenth year of operation.

The Annual Performance Report provides an opportunity to reflect on the past year and to celebrate the work, contributions and achievements of our services, staff and delivery partners. It also allows us to highlight key challenges that we have faced over this period and will likely encounter in the future. Our progress against local and national objectives is measured through tracking actions, work plans and indicators, in addition to outlining areas that we have undertaken focused work on and the difference made for people in our communities, with a range of delivery examples and feedback conveyed to illustrate this impact.

The East Ayrshire Health and Social Care Partnership formed in April 2015, bringing together health and care services in East Ayrshire. The Partnership is responsible for meeting local and national objectives, therefore it is important to publicly report on how we are performing against the outcomes that we aspire to. In taking forward our ambitions, we work towards a vision of:

"Working together with our communities to improve and sustain health, wellbeing, care and promote equity."

Section 42 of the <u>Public Bodies (Joint Working) (Scotland) Act 2014</u> obliges Partnerships to produce Annual Performance Reports which set out an assessment of performance in relation to planning and delivering their functions. The <u>Annual Performance Report for 2024/25</u> is produced to fulfil the East Ayrshire Health and Social Care Partnership's obligations relating to annual performance reporting and is for the benefit of our residents and local communities.

A core section of the Report focuses on our performance against the <u>National Health and Wellbeing Outcomes</u>, <u>Outcomes for Children and Young People and Justice Outcomes</u>, with alignment to our strategic priorities. A comprehensive assessment and time series of our local performance across numerous areas is also available in our published <u>Performance Matrix</u>.

The Report fully adheres to the <u>National Guidance</u> and is delivered in the context of national and local policy frameworks, the <u>East Ayrshire Community Plan 2015-30</u> and the <u>East Ayrshire Health and Social Care Partnership Strategic Plan 2024-27</u>.

Craig McArthur

Director, East Ayrshire Health and Social Care Partnership

Performance Summary

Since January 2018, Partnerships have worked towards local objectives and trajectories specified by the Ministerial Strategic Group for Health and Community Care (MSG) for monitoring improvement relating to six key indicators, with the aim of providing a whole system overview of performance.





Throughout 2024/25, reports aligned to the MSG indicators were regularly presented to our Audit and Performance Committee and the NHS Ayrshire and Arran Health Board, which analysed performance in respect to pressures across the health and care system associated with unscheduled care demand.

Table 1 - East Ayrshire Performance Against MSG Indicators: 2023/24 - 2024/25 Financial Years

	East Ayrshire 2023/24	East Ayrshire 2024/25	024/25 Variance	
MSG01 - Unscheduled Admissions (all ages) (rate per 1,000 total population) *	136.1	138.5	1.7%	
MSG02 - Occupied Bed Days Unscheduled Care (all ages, acute specialities) (rate per 1,000 total population) *	903.2	902.6	0.1%	•
MSG03 - Emergency Department: compliance with the four-hour standard (all ages)	67.8%	66.2%	1.6pp	•
MSG04 - Delayed Discharge Bed Days (including code 9s) (rate per 1,000 18+ population)	110.0	118.4	7.6%	
MSG05 - End of Life Care – proportion of the last 6 months of life spent in community setting *	89.3%	89.6%	0.3рр	
MSG06 - Balance of care: Percentage of population in community or institutional settings - Proportion of 65+ population living at home (supported and unsupported) **	96.5%	96.4%	0.1pp	•

^{*}Figures for MSG01, MSG02 and MSG05 reflect calendar year 2024. Calendar year 2024 figures are used as a proxy for 2024/25 due to the national data for 2024/25 being incomplete, following guidance issued by Public Health Scotland.

In 2024/25, two of the six core MSG indicators showed slight improvement in performance when compared to the previous year, as displayed in the table above. During calendar year 2024, unscheduled care occupied bed days decreased by 0.1% and the proportion of the last 6 months of life spent in community settings increased by 0.3 percentage points.

When compared to the previous reporting period, unscheduled admissions increased by 1.7%, compliance against the four-hour standard in the emergency department decreased by 1.6 percentage points and the percentage of the 65+ population living at home declined by 0.1 percentage points. The rate of delayed discharge bed days increased by 7.6% in 2024/25, however this still represents an area of sustained strength, being significantly lower than the national level.

The Core Suite of Integration Indicators (CSII) draw together measures that reflect the whole system under integration to provide an indication of progress towards key outcomes that can be compared across Partnerships and described at a national level.

^{**} Figures for MSG06 compares 2023/24 to 2022/23 due to data availability, following guidance issued by Public Health Scotland.

Table 2 - East Ayrshire Performance Against CSII (Outcome Indicators): 2021/22 - 2023/24

	East Ayrshire 2021/22	East Ayrshire 2023/24	Variance	
CSII-01: Percentage of adults able to look after their health very well or quite well	89.5%	89.1%	0.4pp V	
CSII-02: Percentage of adults supported at home who agree that they are supported to live as independently as possible *	76.1%	81.2%	5.1pp	
CSII-03: Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided *	71.0%	69.5%	1.5pp	
CSII-04: Percentage of adults supported at home who agree that their health and social care services seemed to be well co-ordinated *	60.0%	70.4%	10.4pp	
CSII-05: Percentage of adults receiving any care or support who rate it as excellent or good *	79.6%	78.6%	1.0pp	
CSII-06: Percentage of people with positive experience of care at their GP practice	56.9%	55.7%	1.2pp V	
CSII-07: Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life *	75.7%	74.0%	1.7pp	
CSII-08: Percentage of carers who feel supported to continue in their caring role	27.6%	36.0%	8.4pp 🛕	
CSII-09: Percentage of adults supported at home who agree they felt safe *	73.0%	75.8%	2.8pp 🛕	

^{*}Due to changes in the HACE survey question definitions, 2023/24 results for indicators 2, 3, 4, 5, 7 and 9 are not comparable to previous years figures.

The table above provides data for the CSII 'Outcome Indicators'. Due to definitional changes in the Health and Care Experience (HACE) survey, previous years figures are only comparable for indicators 1, 6 and 8. Of these, the percentage of adults stating that they are able to look after their health either very or quite well has decreased slightly by 0.4pp, and the percentage of people with positive experiences of care at their GP practice has also decreased slightly (1.2pp). There has been a substantial increase of 8.4pp in the percentage of carers who feel supported to continue in their caring role. The CSII 'Outcome Indicators' are sourced from the most recent HACE survey in 2023/24, which is distributed to GP practice populations across Scotland. Feedback suggests that increased levels of demand and operational pressures have impacted negatively on patients' overall service experience in recent years. There were a lower number of East Ayrshire responses to the HACE Survey in 2023/24 (1,877) compared to the previous 2021/22 reporting period (2,387), which could mean that the most recent findings are less representative than in previous years.

Table 3 - East Ayrshire Performance Against CSII (Data Indicators): 2023 / 2023/24 –2024 / 2024/25

	East Ayrshire 2023 / 2023/24	East Ayrshire 2024 / 2024/25	Variance	
CSII-11: Premature mortality rate per 100,000 (2022 v 2023) *	521	491	5.8%	•
CSII-12: Emergency admission rate per 100,000 (2023/24 vs 2024) **	14,639	14,738	0.7%	
CSII-13: Emergency bed day rate for adults (per 100,000 population) (2023/24 v 2024) **	132,215	125,635	5.0%	\blacksquare
CSII-14: Emergency readmission to hospital within 28 days of discharge (per 1,000 discharges) (2023/24 v 2024) **	110	111	0.9%	
CSII-15: Proportion of last 6 months of life spent at home or in a community setting **	89.3%	89.6%	0.3pp	
CSII-16: Falls rate per population aged 65+ (2023/24 v 2024) **	19.0	21.3	12.1%	
CSII-17: Proportion of care services graded 'Good' (4) or better in Care Inspectorate Inspections	78.0%	88.1%	10.1pp	
CSII-18: Percentage of adults with intensive care needs receiving care at home (2023/24 v 2024) **	71.6%	70.1%	1.5pp	•
CSII-19: Number of days people aged 75+ spend in hospital when they are ready to be discharged, per 1,000 population	671	652	2.8%	•
CSII-20: Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency (2018/19 v 2019/20) ***	29.0%	26.6%	2.4pp	•

^{* 2023} calendar year figure has been applied for indicator 11 due to 2024 data not being available at the time of reporting.

^{** 2024} calendar year figures have been applied for indicators: 12, 13, 14, 15, 16 and 18. Calendar year 2024 figures are used as a proxy for 2024/25 due to the national data for 2024/25 being incomplete, following guidance issued by Public Health Scotland.

^{***} NHS Boards were not able to provide detailed cost information for 2020/21 due to changes in service delivery during the pandemic. As a result, Public Health Scotland have not provided information for indicator 20 beyond 2019/20. Public Health Scotland published information to calendar year 2020 using costs from 2019/20 as a proxy however, given the impact of the pandemic on activity and expenditure, it is no longer appropriate to include this information.

East Ayrshire has achieved improved performance across the majority of the 'data' indicators within the CSII when comparing the latest period of reported data to the previous period. The premature mortality rate decreased by 5.8%; the emergency bed day rate declined by 5%; the proportion of care services graded 'Good' or better increased by 10.1 percentage points, the number of days people aged 75+ spend in hospital when they are ready to be discharged decreased by 2.8%; and the proportion of last 6 months of life spent at home or in a community setting increased by 0.3 percentage points. Local performance against four CSII 'data' indicators has regressed in the latest reporting period, including: the emergency admission rate which increased by 0.7%; emergency readmissions to hospital within 28 days of discharge increased by 0.9%; the falls rate for people aged 65+ increased by 12.1%; and the percentage of adults with intensive care needs receiving care at home decreased by 1.5 percentage points.

A longer time series of the data presented above in addition to a range of further measures, is available within our published <u>Performance Matrix</u>.

Out with the CSII and MSG indicators, we are reporting positive performance across various areas in this period, including:



Zero hospital discharges over two weeks (standard delay reasons) during 2024/25. This remains unchanged for a number of years, representing sustained long-term performance despite whole system pressures



The percentage of looked after and accommodated children with three or more moves declined from 24.2% in 2023/24 to 17.5% in 2024/25



The proportion of child protection re-registrations within twelve months fell from 4.5% in 2023/24 to 3.1% in 2024/25



99% of people started drug/alcohol treatment within three weeks during 2024/25 (target = 90%).



96.1% of Community Payback Orders were successfully completed in 2024/25, up from 92.5% in 2023/24.

The Partnership is committed to continuous improvement and a number of challenging areas have been identified within the reporting period, including:



The percentage of reports submitted to the Scottish Children's Reporters Administration (SCRA) by the due date decreased from 61.6% in 2023/24 to 52.7% in 2024/25.



63.1% of our Personal Carer workforce were qualified to Scottish Social Services Council (SSSC) standards in March 2025



The number of bed days lost as a result of delayed discharge has increased from 10,767 in 2023/24 to 11,586 in 2024/25. However, despite this increase East Ayrshire benchmarks strongly against comparator areas



40.5% of adult patients waited less than four weeks for MSK services in March 2025 (national target = 90%).



48% of our workforce had an active / signed-off FACE (annual development review) in March 2025 (target = 95%)

A more detailed overview of <u>our performance</u> and the Partnership's <u>Strategic and Performance Framework</u> can be found at www.east-ayrshire.gov.uk.

Our Workforce

The Health and Social Care workforce is our greatest asset, which continues to be demonstrated in the work that we do, with the compassion, commitment and flexibility of our staff being crucial to delivering high quality services which safeguard and improve the wellbeing of the people we serve. Our workforce planning activity continues to support the implementation of the Partnership's Strategic Plan and to address the challenges of recovery, growth and transformation as identified in the National Workforce Strategy for Health and Social Care in Scotland. The Partnership's new Workforce Plan 2025-28 sets out the vision for our workforce and is fundamentally based on the five pillars of the Workforce Journey, namely: Plan; Attract; Train; Employ; and Nurture.

Caring for our workforce is a key strategic priority for the Partnership and we are fully committed to supporting the wellbeing and development of all our staff to enable them to fulfil their roles to the highest standard. We are also committed to meeting staff wellbeing needs through providing a comprehensive and accessible range of wellbeing supports. This has included numerous supports and opportunities in 2024/25, including: regular distribution of employee wellbeing newsletters containing resources and signposting, access to various themed wellbeing courses, free physical health checks, holistic wellbeing and activity sessions delivered at Dumfries House, and access to supports delivered by the Partnership's Health and Wellbeing Coordinator.





Integration Joint Board – Governance and Decision-Making

The Public Bodies (Joint Working) (Scotland) Act 2014 sets out the membership of the Integration Joint Board (IJB). The Voting Members of the IJB are appointed through nomination by NHS Ayrshire and Arran and East Ayrshire Council. The IJB is routinely informed when any NHS Board Executive Member's terms expire and they are reappointed for a further three-year term. The IJB was informed that East Ayrshire Council, at its meeting on 27 February 2025, had reviewed the Council appointed Voting Members and had made one change to these Members.

The IJB continued to develop defined powers within the Public Bodies Act as set out in sections 26 to 28 of the Act, which takes the form of binding (legal) Directions. These Directions clearly outline how the Health Board and Local Authority are required to action Strategic Commissioning Plans and delegated budgets from the Integration Joint Board. It was agreed at the March 2025 IJB meeting to undertake a review of the current Directions template to allow for more information to be incorporated. Directions continue to be issued to integration parties by all three Ayrshire IJBs. Directions given in 2024/25 reflected a number of areas, including: the review of eligibility criteria for care and support, the HSCP's Strategic Plan, commissioning and contracting arrangements, the Care at Home service, and the GP Primary Care service in HMP Kilmarnock.

Financial Performance

The IJB must comply with national financial regulations, codes of practice and guidance. The unaudited Annual Accounts 2024/25 were approved by the IJB on 25 June 2025. The net cost of provision of services in 2024/25 was £323.618m. The net revenue expenditure represents the running costs of the IJB and indicates the significant size and complexity of the organisation. Directly managed expenditure for the 2024/25 financial year is £2.186m greater than the budget delegated to the IJB and increases by an adjustment of £1.695m in respect of the Partnership's share of services managed on a pan-Ayrshire basis on Lead Partnership arrangements, resulting in a population based overspend £3.881m for 2024/25 prior to earmarking. In total, £2.140m has been earmarked for specific commitments in future financial years. Earmarked funding commitments are set out within the Notes to the Annual Accounts. After taking account of earmarked commitments, there is a net overspend for 2024/25 of £6.021m.

Cost pressures and additional demand pressures, as well as under-achievement of approved cash releasing efficiency savings in various budgets, and under-achievement of in-year Financial Recovery Plan savings, have contributed to the Partnership spending more in 2024/25 than originally budgeted. These pressures have been partially offset by non-recurring balances drawn down from the IJB Reserve, as well as cost reductions in certain service areas, including in-year Financial Recovery Plan savings achieved. Additional non-recurring delegated funding contributions from East Ayrshire Council £5.869m and NHS Ayrshire and Arran £0.152m offset the £6.021m overspend, resulting in an overall balanced position for 2024/25.

Best Value

The Partnership's Strategic Commissioning Board continued to drive forward our transformational change ambitions and activities in 2024/25, with ongoing oversight from the Audit and Performance Committee. The Strategic Commissioning Board adopts a strict evidence-based approach to inform investment and disinvestment decisions and is guided by national advice in relation to important matters. Detail regarding service specific improvement and transformational change work undertaken in this period is set out in our Service Improvement Plans.

The HSCP is committed to securing continuous improvement and sustainability in the delivery of all its services, which are intrinsically linked to delivering positive outcomes for people and to meeting objectives set out within the IJB's Financial Recovery Plan and Strategic Plan. A key mechanism for achieving this is through implementing Best Value Reviews. The Strategic Commissioning Board approved a new programme of HSCP reviews for the 2025-27 period in December 2024, with the aim of securing service improvement and operational sustainability through identifying more effective and efficient methods of delivery. The Partnership will undertake a cross-cutting approach to implementing this review programme, in recognition that changes in one service area will likely impact on other service areas.

Caring For Ayrshire

The <u>Caring for Ayrshire Programme</u> continues to deliver on its long-term vision of creating a sustainable, person-centred health and care system that supports people to live well, closer to home. Progress has been made during 2024/25 to capture and understand the need for change within our health and care system and to determine the necessary steps to ensure that services can effectively meet future demands. Through comprehensive analysis, key challenges have been identified that shape the rationale for transformation. Fully understanding the need for change has enabled the Programme to scope how demand for services is expected to evolve over time.



The need for change is framed around four key themes, which collectively guide the Programme's approach to transforming health and care services across Ayrshire and Arran: People; Services; Infrastructure; and Communities and partners. In looking ahead, a whole-system plan has been drafted and submitted to the Scottish Government for consideration, outlining the direction of travel for the transformation of services. This plan will provide the foundation for discussions with the Scottish Government, with the aim of securing their support and alignment to ensure that our local plans are shaped by national priorities and frameworks. The Programme's aim remains clear: to ensure that people across Ayrshire and Arran receive the right care, in the right place, at the right time, now and into the future.

Inspections

The Partnership welcomes evaluation and scrutiny from external audit and inspection agencies, recognising that these assessments provide valuable and constructive feedback to build on our internal self-evaluation work, further contributing towards our continuous improvement ambitions. 88.1% of East Ayrshire care services were graded 'Good' (4) or better in Care Inspectorate inspections in 2024/25, which is a 10.1 percentage point increase from our performance in 2023/24 and is notably higher than the national average (81.9%) in this period. The latest Care Inspectorate inspection results for our <u>registered services</u> and details of the most recent inspections of <u>registered care homes</u> in East Ayrshire can be viewed at www.east-ayrshire.gov.uk.

16 care homes were inspected by the Care Inspectorate during 2024/25, achieving an average grading of 4.3 across the inspection themes, which continues an upward trend in quality grades achieved in recent years. Over this period, requirements were identified for 2 care homes following inspection, no enforcements were issued and a total of 5 complaints were upheld. 9 of our registered services, including: Care at Home services, Adult Day services, Community Reablement and a Children's Residential House, were inspected by the Care Inspectorate during 2024/25, achieving an average grading of 3.8 across the inspection themes. Over this period, requirements were identified for 2 registered services following inspection, no enforcements were issued and a total of 2 complaints were upheld.

A joint inspection of services for children at risk of harm in the East Ayrshire Community Planning Partnership area took place between September 2024 and March 2025, covering a range of partners that have a role in meeting the needs of children and young people at risk of harm and their families. The overall evaluation of quality indicator 2.1 was 'good', and a number of local strengths were identified which impacted on children and young people's experiences. Several areas for improvement were also identified to ensure better consistency in experiences and outcomes for children and young people at risk of harm. The findings were reviewed in detail and a comprehensive action plan has been developed with a focus on key areas identified for improvement, with specific priority areas for the Partnership to take forward including work in relation to chronologies, the use of AYRshare and children's plans.



Audit and Performance Committee

In 2024/25, the Audit and Performance Committee considered internal audit reports from the IJB Chief Auditor and external auditor reports from Audit Scotland. In respect of financial assurance, the Committee received a clear audit report from Audit Scotland, as the external auditor, having considered four dimensions: financial sustainability, financial management, governance and transparency, and value for money. The Committee considered and provided a view on the governance and assurance arrangements and performance reporting to the IJB. The Committee also received regular reports on performance, management and financial arrangements, including the IJB's Risk Register throughout the reporting period.

The Committee held additional meetings in 2024/25 to review and monitor the progress of the Financial Recovery Plan. The Committee also received regular updates on the progress of Service Improvement Plans for all service portfolio areas. Good progress was noted across all of the Plans and at each alternate meeting, individual services were subject to a detailed progress review. A survey was issued in February 2025 to those who regularly attend or engage with the Audit and Performance Committee to assess the effectiveness of the Committee and to inform improvements going forward.

Locality Planning

A key component of the Public Bodies (Joint Working) (Scotland) Act 2014 is the requirement to plan service delivery at a locality level within the integrated structure to contribute towards improving local outcomes. In 2024, delivery partners agreed to conduct an assessment and review of the HSCP's Locality Planning Arrangements, which was aligned with the Council's work on establishing a place-based approach to the provision of services.

The findings indicated that the previous model was ineffectual in addressing community priorities. Partners therefore agreed to design and implement a new shared delivery model for Locality Planning in East Ayrshire to facilitate a more integrated approach between the HSCP and the CPP, focusing on cross organisational delivery of improvements that address community concerns and priorities.

The new shared delivery model will be implemented from April 2026 and will enhance the way we work across organisational boundaries to delivery effective services and achieve best value, while maximising opportunities for collaborative working across the HSCP, the CCP and our communities. The integration of the CPP and HSCP Locality Planning arrangements will also provide an opportunity to establish new individual Locality Plans for each of the three Locality areas. These Plans will provide a holistic view of the areas to inform and direct resources to the people and communities in the greatest need. The Locality Plans will also underpin our HSCP Strategic Plan and other Partnership strategies and will focus on bridging the gap between the high-level strategic direction of the Council and the HSCP and the aspirations and priorities of local people, communities and groups.

Lead Partnership Arrangements

Lead Partnership arrangements continue to be in place across Ayrshire and Arran. The East Ayrshire HSCP has lead responsibility for Primary and Urgent Care Services. This responsibility relates to: General Medical Services, Community Pharmacies, Community Optometry, Dental Practices, Public Dental Service and the Ayrshire Urgent Care Service. The North Ayrshire HSCP is the lead Partnership in Ayrshire for specialist and in-patient Mental Health services and some Early Years services. The South Ayrshire HSCP is the lead Partnership in Ayrshire for the Integrated Continence Service, the Family Nurse Partnership and the Community Equipment Store.



A number of updates are provided in the Annual Performance Report regarding the delivery and development of Primary and Urgent Care Services over the last year, including:

- General Practices continued to experience high patient demand in 2024/25, which at times outweighed the clinical capacity available;
- Implementation of the Primary Care Improvement Plan progressed, with additional demonstrator site work undertaken relating to the Primary Care Phased Investment Programme;
- The Ayrshire Urgent Care Service continued to develop models and pathways with key partners to meet the urgent care needs of communities;
- There are now 50 Independent Prescribers based within 28 Community Optometry Practices who can manage complex eye issues by prescribing medicines; and
- Community Pharmacies experienced a significant increase in activity during 2024/25, with the number of items dispensed under Pharmacy First having increased to 321,713 from 289,170 in the previous year.

Looking Ahead

The Partnership's Strategic Plan 2024-27 outlines our commitment to meeting the needs of local communities and to deliver the best possible outcomes for people at all stages in life. A number of key enablers are associated with the Strategic Plan, including the HSCP's Workforce Plan 2025-28, Communications Strategy 2024-27, Property and Asset Management Strategy 2024-27, and our Thinking Differently approach. To achieve our ambitions, the Partnership has set out short, medium and long term objectives aligned to six core strategic commissioning intentions: Starting Well, Living Well and Dying Well; Caring for East Ayrshire; People at the Heart of What We Do; Caring for Our Workforce; Safe and Protected; and Digital Connections.

Service Improvement Plans were established in 2016/17 and are a core element of the Partnership's Performance Management and Improvement Framework, setting out the arrangements for delivering targeted improvement activities across the HSCP's five main service portfolios. The current Service Improvement Plans cover the three-year period from 2024-27 across: Locality Health and Care Services, Wellbeing and Recovery Services, Children's Health, Care and Justice Services, Primary and Urgent Care Services and Allied Health Professional Services. The Service Improvement Plans intrinsically align with our Strategic Plan and priorities.

In looking ahead to 2025/26, the HSCP faces significant challenges, stemming from financial pressures, increasing service demands and demographic shifts. These factors, along with ongoing policy reforms, create a complex and evolving landscape for the Partnership to navigate.







These financial challenges have been identified in successive annual reports, with Audit Scotland highlighting financial sustainability as a key issue going forward. It is recognised that the financial position will need to be kept under ongoing review and that system and demand pressures will require to be carefully managed within the available resources. Implementing our programme of cross-cutting best value reviews will support this over the next year.

The Care Reform (Scotland) Bill, passed by Scottish Parliament in June 2025, will introduce further social care reforms focusing on targeted improvements. These include introducing: Anne's Law, which gives care home residents the legal right to an essential care supporter; legal rights to breaks for unpaid carers; and schemes for better information and data sharing. The Bill also establishes the National Care Service Advisory Board, which will provide independent advice to Scottish Ministers on the development, improvement and operation of care services in Scotland.

Our approach to digital innovation and technology enabled care has gathered pace over the last year, including the launch of the Total Mobile platform and the Technology Enabled Care programme. These developments align with our ambition to make greater use of digital solutions to better support our workforce and to improve outcomes for people. The continued expansion of technology will support more people through an early intervention and prevention approach, and will provide meaningful, accessible and cost-effective ways for them to manage their own wellbeing in the community.







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