

EAST AYRSHIRE

Health & Social Care Partnership

ANNUAL PERFORMANCE REPORT



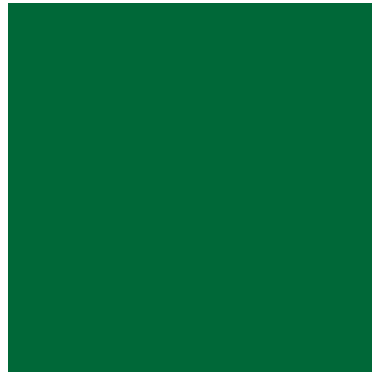
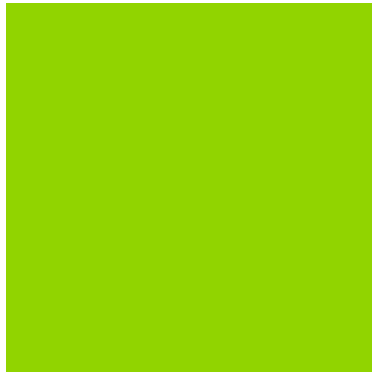
2024/25

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1



Introduction

Welcome to the East Ayrshire Health and Social Care Partnership's Annual Performance Report, which reflects on the 2024/25 reporting period. This Report conveys a wide range of qualitative and quantitative information regarding local service provision, developments and achievements to demonstrate and evidence our performance against the national outcomes for health, wellbeing, children and young people and justice, and in relation to delivering on the priorities identified in our Strategic Plan during 2024/25, our tenth year of operation. The content in this document also links to our previous Annual Performance Reports to provide a year-on-year assessment of our progress over the long term.

We regard the Annual Performance Report as a valuable opportunity to reflect on the past year and to celebrate the work, dedication and achievements of our workforce, services and partners in delivering positive outcomes for the people and communities we serve. The Report also allows us to highlight and consider the main challenges that we currently face and will likely encounter in the future. Our progress continues to be measured through ongoing monitoring of service improvement activities and key performance indicators, in addition to utilising feedback and lived experience to assess the impact of our service provision. A range of measures are included throughout this Report which illustrate various areas of positive progress, and also some of the challenging areas that we have been working on to improve over the medium to long term.

Section 42 of the [Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#) obligates all Partnerships to produce and publish Annual Performance Reports which provide an assessment of local performance in regards to the planning and delivery of their functions. Furthermore, the Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014 ("the Performance Regulations"), sets out specific content that Annual Performance Reports must incorporate.

This Annual Performance Report is produced to meet the East Ayrshire Health and Social Care Partnership's obligation regarding annual performance reporting and is for the benefit of our residents and communities. The Report retains a focus on our performance under integration and our performance against the National Health and Wellbeing Outcomes, Outcomes for Children and Young People and Justice Outcomes, in addition to achieving our strategic priorities. The main body of this Report is therefore structured around these key themes. The Report fully adheres to [national guidance](#).

Our Annual Performance Report is delivered in the context of the national and local policy frameworks: the East Ayrshire Community Plan 2015-30 and the East Ayrshire Health and Social Care Partnership's Strategic Plan 2021-30. A comprehensive time series and assessment of our local performance across numerous themes is available within our [Performance Matrix](#), which can be accessed at www.east-ayrshire.gov.uk.

The East Ayrshire Health and Social Care Partnership ("the Partnership" / "HSCP") was established in April 2015, integrating health and care services in East Ayrshire. The Partnership comprises the full range of community health and care services in East Ayrshire and is also the Lead Partnership in Ayrshire and Arran for Primary and Urgent Care Services. The HSCP is a large and diverse organisation, incorporating a range of partners, services and significant resources. The Partnership is responsible for contributing towards achieving local and national objectives, and it is therefore important to transparently report on how we are performing against the outcomes that we aspire to.

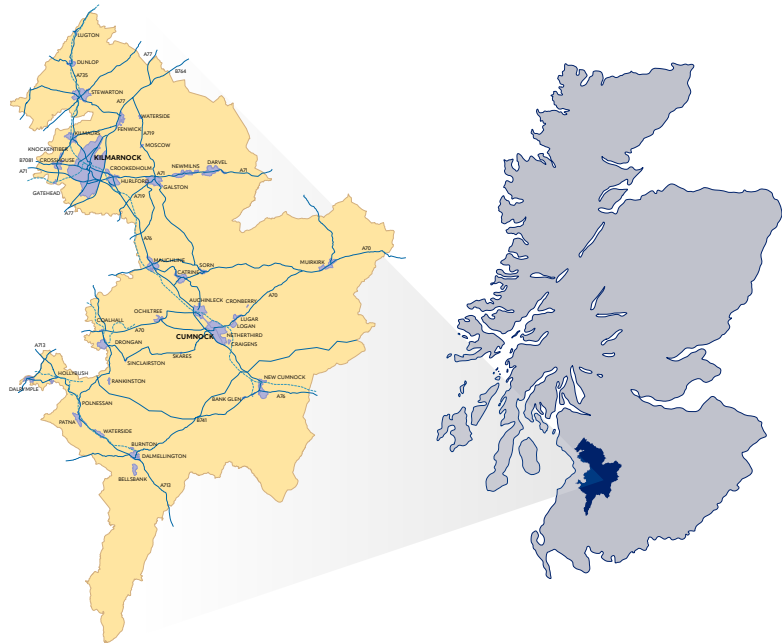
The Partnership's ambitions align with East Ayrshire's Community Plan for 2015-30. In taking forward our objectives, we work towards a vision of:

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

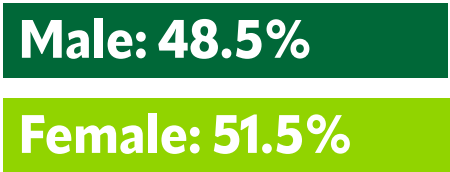
The infographics below display various characteristics of the East Ayrshire population in relation to health and wellbeing, demography and socio-economic factors across the authority. To view a wider range of associated information, please see our [Area Profile](#) available at www.east-ayrshire.gov.uk.

East Ayrshire

- Located in the southwest of Scotland, covering **490 square miles**
- A mix of both urban and rural communities
- Home to **120,750** people, making up **2.2%** of Scotland's total population
- East Ayrshire's population is projected to **decrease** by 1.2% by 2030



Population Profile



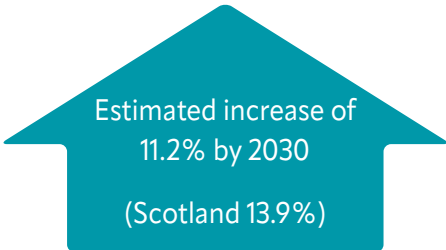
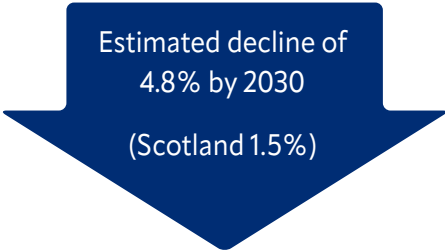
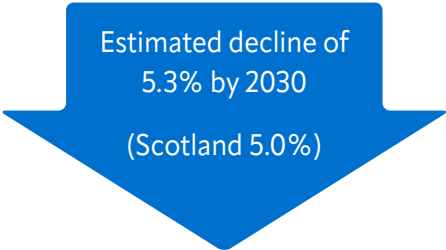
0 - 15 years
20,262
16.7% of population
(Scotland 16.3%)



16 - 64 years
74,131
61.4% of population
(Scotland 63.4%)



65+ years
26,357
21.8% of population
(Scotland 20.3%)



Life Expectancy



Life Expectancy 75.2 years
(Scotland 76.8 years)

Healthy life expectancy
56.8 years
(Scotland 60.4 years)



Life Expectancy 78.6 years
(Scotland 80.8 years)

Healthy life expectancy
59.9 years
(Scotland 61.1 years)

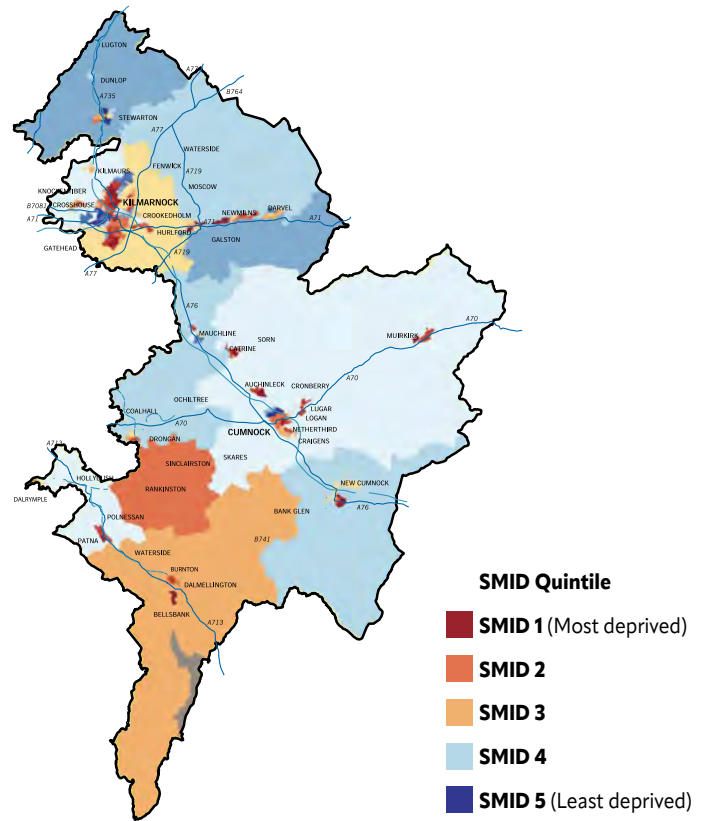
Deprivation

East Ayrshire has the 7th highest level of deprivation amongst Scottish Local Authorities

31.3% of the population of East Ayrshire live within the most deprived Scottish index of Multiple Deprivation Quintile (SIMD)

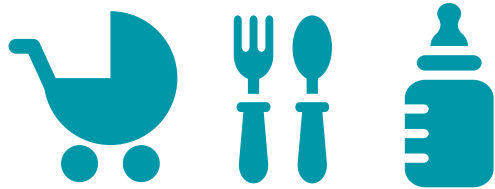


The table below details the percentage of the population within East Ayrshire living in the 2020 Scottish Index of Multiple Deprivation (SIMD) most deprived quintiles for each domain and the ranking of East Ayrshire amongst the 32 Scottish Local Authorities for each domain.



East Ayrshire	Income	Employment	Education	Health	Access	Crime	Housing	Overall
% of population	28.8%	32.5%	25.8%	28.2%	24.5%	22.7%	2.5%	31.3%
Rank	7	6	8	8	13	8	25	7

Early Years



21.6% of East Ayrshire babies are exclusively breastfed at the 6-8 week review (Scotland 32.3%)

75.1 % of East Ayrshire children have no concerns across all domains at 27-30 month review (Scotland 77.6%)

75.8% of East Ayrshire children have a healthy weight in Primary 1 (Scotland 76.8%)

69.6% of children within East Ayrshire have no obvious dental decay in Primary 1 (Scotland 73.8%)

Health and Wellbeing



36.7% of adults in East Ayrshire have at least one long term illness (Scotland 22.1%)

63% of adults in East Ayrshire consider their health to be good or very good (Scotland 72%)

The rate of multiple emergency hospital admissions aged 65+ years is 8,254 per 100,000 population in East Ayrshire (Scotland 6,676)

The rate of premature deaths in East Ayrshire (under 75 years) is 491.2 per 100,000 population (Scotland 441.5 per 100,000)

Mental Health



22.9% of East Ayrshire residents are prescribed medication for Anxiety/Depression/Pyssosis (Scotland 20.9%)

The rate of psychiatric hospitalisations in East Ayrshire is 167.5 per 100,000 population (Scotland 216.1)

787 East Ayrshire Child and Adolescent Mental Health Service referrals were received between 2024-25.

Within East Ayrshire the rate of **deaths by suicide is 19.1 per 100,000 population** (Scotland 14.4)

Harmful Behaviours



During the period 2022-24 an average of 13.1% of mothers in East Ayrshire smoke during pregnancy (Scotland 9.6%)

The rate of alcohol related hospital admissions in East Ayrshire is 485.1 per 100,000 population (Scotland 548)

During 2023, there were 31 drug related deaths in East Ayrshire, a rate of 25.7 per 100,000 (Scotland 21.4)

131.5 incidents of domestic abuse were recorded in East Ayrshire per 10,000 population (Scotland 116.3)

Economic Status



In 2024 20.6% of children within East Ayrshire were living in low-income families (relative), down from 25.5% in 2022.

71.1% of East Ayrshire residents are in employment (Scotland 74.5%)

3.6% of the 16-64 population in East Ayrshire claim out of work benefits (Scotland 3.1%)

15% of economically inactive East Ayrshire residents are actively seeking employment (Scotland 16.8%)

Our Communities



The crime rate in East Ayrshire is 536 per 10,000 population (Scotland 550)

The rate of non-accidental fires in East Ayrshire is 365.9 per 100,000 population (Scotland 244.6)

In East Ayrshire, the rate of **antisocial offences is 109 per 100,000 population** (Scotland 88)

95% of adults in East Ayrshire rate their neighbourhood as a very/fairly good place to live (Scotland 95%)

Sources: National Records of Scotland; The Scottish Public Health Observatory; Public Health Scotland; Scottish Index of Multiple Deprivation; Scottish Government Statistics; NOMIS; Internal Recording Systems; and The Scottish Health Survey.

East Ayrshire Community Plan 2015-30

The East Ayrshire Community Plan 2015-2030 is the sovereign planning document for East Ayrshire, providing the overarching strategic policy framework for the delivery of public services by all partners in the authority. The vision set out in the Community Plan is that:

“East Ayrshire is a place with strong, safe and vibrant communities where everyone has a good quality of life and access to opportunities, choices and high quality services which are sustainable, accessible and meet people’s needs.”



A three-yearly review of the Community Plan was concluded in June 2024, resulting in Community Planning Partnership (CPP) Board endorsement of a new [Local Outcomes Improvement Plan 2024-2027](#), which reflects the CPP priorities of: Growth, Wellbeing, Fairness and Sustainability. Three thematic Delivery Plans for 2024-2027 were also developed, which set out the key actions identified to support delivery of the shared CPP priorities:

[Economy and Skills](#) [Safer Communities](#) [Wellbeing](#)

The HSCP is responsible for leading on the Wellbeing theme, however it also contributes towards the delivery of the Economy and Skills and Safer Communities Plans. The Wellbeing priorities during 2024-2027 are: **Starting Well, Living Well, Aging Well and Dying Well.**

The Partnership’s commissioning intentions maintain a focus on the ‘triple aim’ of the national [Health and Social Care Delivery Plan](#):

- **Better Care** - improving the quality of care by targeting investment at improvement and delivering the best, most effective support;
- **Better Health** - improving health and wellbeing through support for healthier lives through early years, reducing health inequalities and focusing on prevention and self-management; and
- **Better Value** - increase value and sustainability of care by making best use of resources, ensuring efficient and consistent delivery, investing in effectiveness and focusing on prevention and early intervention.

Health and Social Care Partnership Strategic Plan 2024-27



Our fourth [Strategic Plan](#) is in place for 2024-27 and aligns with the Community Planning Partnership's vision and strategic objectives. A strategic framework of enablers and local priorities, alongside the Partnership's core values, are well established

to deliver our strategic objectives and to achieve our vision. Section 3 within this Report evidences our progress in relation to the priorities set out in our Strategic Plan. Following comprehensive consultation with the public, partners, our workforce and other stakeholders, a refreshed Strategic Plan covering 2024-27 was developed and subsequently approved by the Integration Joint Board (IJB) in June 2024. The Plan comprises six strategic priorities to deliver the best possible outcomes for people at all life stages:

- 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.



Strategic and Performance Frameworks

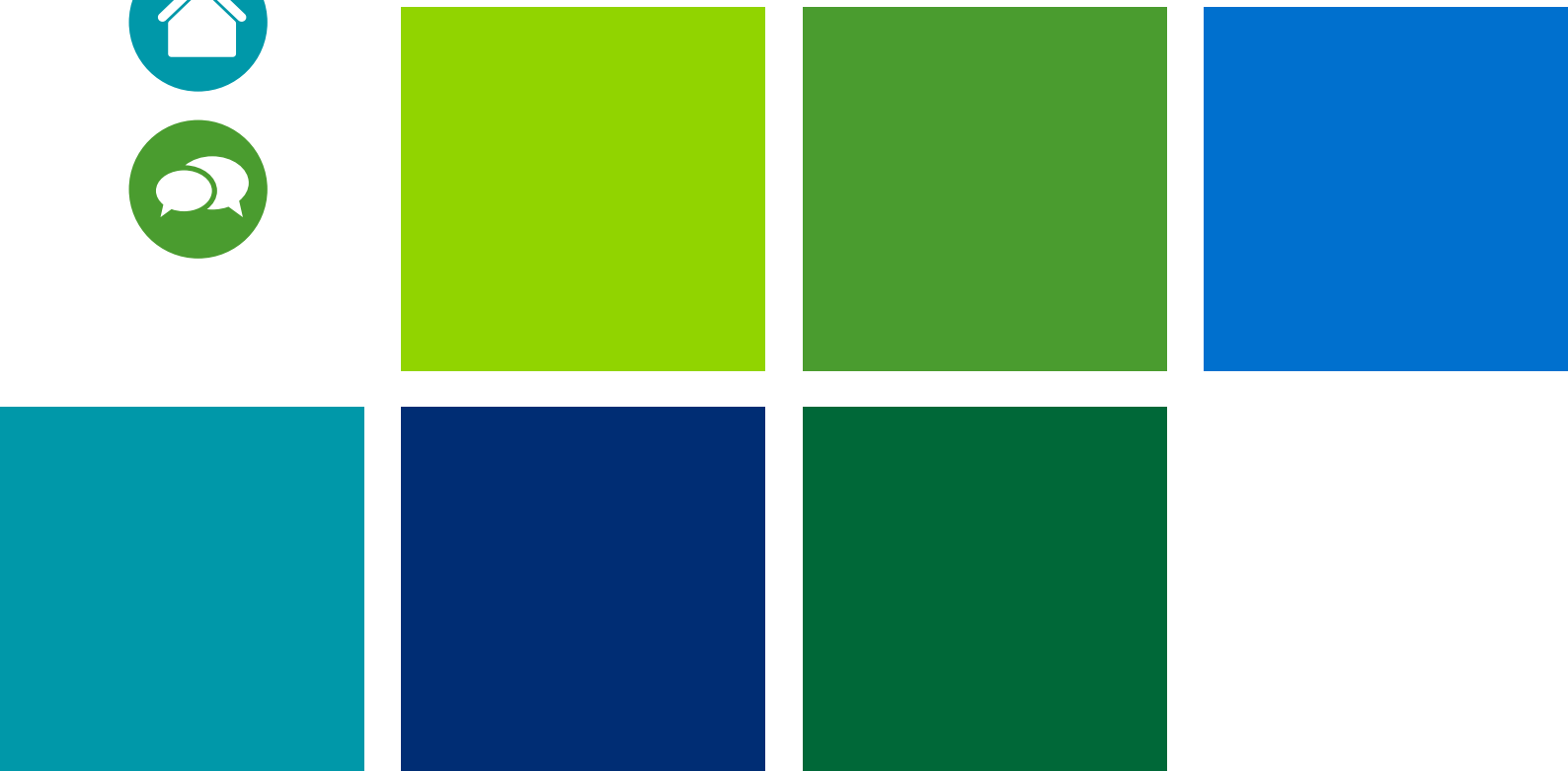
The extensive range of content within this Report illustrates the extent to which delivering our Strategic Plan has contributed towards the National Outcomes, through assessing our performance against key indicators, demonstrating the impact of our service provision on personal outcomes and in relation to the principles of integration. Our [Strategic and Performance Framework](#) can be viewed at www.east-ayrshire.gov.uk.

National Outcomes - Health and Wellbeing, Children and Justice

The [15 National Outcomes](#) for Health and Wellbeing, Children and Justice, provide a robust framework for planning health and social care services, and continue to frame our local delivery, improvement work and ambitions. Evidence of our performance aligned to these outcomes is set out in section 3 within this Report.



2



Measuring Performance Under Integration

All Partnerships have been working towards local objectives and trajectories set out by the Ministerial Strategic Group for Health and Community Care (MSG) since January 2018, for monitoring improvement in relation to six key indicators which provide a whole system overview of performance. Narrative regarding our annual performance against the MSG measures is included within this Report and is summarised in the tables below.

This information reflects a range of activities under the umbrella of 'unscheduled care', work that supports people to remain in their own homes, return to their own homes as quickly as possible when hospital treatment is required, prevention of related re-admission to hospital and end of life care. Unscheduled care is a fundamental component of the health and social care system and as such, our services need to be responsive to demand whilst being transformative over the long term. This includes moving patient contact from reactive to proactive planned engagement and from hospital settings to the community where appropriate.

Activity reports relating to the MSG indicators were regularly presented to the Audit and Performance Committee and NHS Ayrshire and Arran Health Board throughout 2024/25, which analysed performance in respect to pressures within the health and care system due to local demand for unscheduled care.

Table 1. East Ayrshire MSG Trajectories and Performance: 2024/25

MSG Measure	Performance	Status
Unscheduled Admissions*	2024/25 Trajectory: reduce rate of growth to 5% 2024 Performance: number of admissions decreased by 1% from baseline	✓
Occupied Bed Days Unscheduled Care (acute)*	2024/25 Trajectory: reduce by 4% 2024 Performance: number of bed days (acute) increased by 5% from baseline	●
Emergency Department- Compliance with 4 hour standard	2024/25 Trajectory: 95% admitted, discharged or transferred within 4 hours 2024/25 Performance: 66.2% admitted, discharged or transferred within 4 hours	●
Delayed Discharge bed days (including Code 9)	2024/25 Trajectory: reduce delayed discharges (all reasons) by 20%; reduce delayed discharges (code 9) by 25%; reduce delayed discharges (other) by 8% 2024/25 Performance: number of bed days increased by 96% (all reasons) and 119% (code 9). Number of bed days increased by 42% for all other reasons	●
End of Life Care- Proportion of last 6 months of life spent in community setting*	2023 Calendar Year Trajectory: Increase to 91.7% 2024 Calendar Year Performance: 89.6%	●
Balance of care: Percentage of population in community or institutional settings - Proportion of 65+ population living at home (supported and unsupported)	2022/23 Trajectory: N/A 2023/24 Performance: 96.4% of population aged 65+ living at home (supported and unsupported)	—

* Calendar year 2024 is used as a proxy for 2024/25 due to the national data for 2024/25 being incomplete, following guidance issued by Public Health Scotland.

Table 2. East Ayrshire Performance Against MSG Indicators: 2023/24 – 2024/25 Financial Years

MSG Indicator	East Ayrshire 2023/24	East Ayrshire 2024/25	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%	0.3pp	▲
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.

** Figures for MSG06 compares 2023/24 to 2022/23 due to data availability, 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.

Table 3. MSG Indicator Benchmarking: 2024/25

MSG Indicator	Scotland	East Ayrshire	Eilean Siar	Dundee City	North Ayrshire	North Lanarkshire	Inverclyde	West Dumbartonshire	Glasgow City
MSG01 - Unscheduled Admissions (all ages) (per 1,000 population) *	108.2	138.5	107.2	138.0	139.9	139.6	111.2	120.0	106.1
MSG02 - Occupied Bed Days Unscheduled Care (all ages, acute specialities) (per 1,000 population) *	751.4	902.6	1099.4	637.5	1092.5	783.1	1010.1	1071.3	880.9
MSG03 - Emergency Dept: compliance with the four-hour standard (all ages)	66.8%	66.2%	93.0%	87.7%	65.0%	58.0%	75.5%	72.2%	66.3%
MSG04 - Delayed Discharge Bed Days (including code 9s) (per 1,000 18+ population)	160.9	118.4	344.7	64.1	247.7	129.7	48.7	163.6	159.8
MSG05 - End of Life Care – proportion of the last 6 months of life spent in community setting *	89.4%	89.6%	88.8%	90.8%	88.8%	89.6%	86.8%	88.3%	88.0%
MSG06 - Balance of care: Percentage of population in community or institutional settings - Proportion of 65+ population living at home**	96.4%	96.4%	96.6%	96.3%	96.7%	97.0%	95.6%	95.9%	95.2%

* 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.

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

The table above displays East Ayrshire performance alongside comparator areas throughout 2024/25 within our benchmarking 'Family Group' developed by the Local Government Benchmarking Framework and the Improvement Service. The figures indicate that East Ayrshire has performed well in relation to the delayed discharge bed days, balance of care and end of life care measures. However, the data highlights that local improvement is required regarding unscheduled admissions, unscheduled care occupied bed days and compliance with the four-hour emergency department standard.

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

Table 4. CSII (Outcome Indicators) Benchmarking: 2023/24

CSII Indicator	Scotland	East Ayrshire	Eilean Siar	Dundee City	North Ayrshire	North Lanarkshire	Inverclyde	West Dumbartonshire	Glasgow City
CSII-01: Percentage of adults able to look after their health very well or quite well	90.7%	89.1%	91.7%	88.3%	89.1%	87.4%	88.9%	88.4%	87.6%
CSII-02: Percentage of adults supported at home who agree that they are supported to live as independently as possible *	72.4%	81.2%	78.9%	77.1%	67.5%	67.7%	75.9%	62.7%	72.3%
CSII-03: Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided *	59.6%	69.5%	69.0%	65.1%	50.6%	57.1%	67.8%	59.1%	61.5%
CSII-04: Percentage of adults supported at home who agree that their health and social care services seemed to be well co-ordinated *	61.4%	70.4%	63.2%	63.9%	55.5%	56.0%	68.7%	54.3%	65.2%
CSII-05: Percentage of adults receiving any care or support who rate it as excellent or good *	70.0%	78.6%	76.1%	68.0%	68.4%	65.8%	70.7%	66.9%	71.2%
CSII-06: Percentage of people with positive experience of care at their GP practice	68.5%	55.7%	85.5%	71.2%	60.0%	52.8%	65.0%	63.8%	73.7%
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 *	69.8%	74.0%	67.0%	71.3%	67.6%	67.7%	73.6%	64.0%	69.7%
CSII-08: Percentage of carers who feel supported to continue in their caring role	31.2%	36.0%	32.6%	34.3%	31.6%	28.5%	31.9%	26.7%	34.5%
CSII-09: Percentage of adults supported at home who agree they felt safe *	72.7%	75.8%	75.8%	76.5%	67.5%	68.4%	72.7%	66.7%	72.6%

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

The table above provides a comparison across the CSII 'Outcome Indicators' (sourced from the most recent 2023/24 Health and Care Experience Survey), within East Ayrshire's 'Family Group' of comparators. The figures demonstrate that East Ayrshire has performed well in most areas relative to the family group. In particular, the impact of home care provision has been positive, with a relatively large proportion of adults agreeing that they are supported to live at home as independently as possible and agreeing that their services are well co-ordinated. A large percentage of people receiving care or support also rated their services as excellent or good. Despite being a challenging area nationally, East Ayrshire performed relatively well in terms of the percentage of carers who feel supported to continue in their caring role. However, the figures highlight experience of care at GP practices to be an area for improvement in East Ayrshire.

Table 5. East Ayrshire Performance Against CSII (Outcome Indicators): 2021/22 – 2023/24

CSII Indicator	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 ▼
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 ▼
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, the 2023/24 results for indicators 2, 3, 4, 5, 7 and 9 are not comparable to the same indicators for previous years.

The table above provides the data for the CSII 'Outcome Indicators'. Due to definitional changes in the 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.

It should be noted that the CSII 'Outcome Indicators' are sourced from the most recent Health and Care Experience (HACE) Survey in 2023/24, which is distributed to GP practice populations across Scotland. Local and national feedback suggests that increased levels of demand and operational pressures has had a negative impact on patients' overall experience of GP services in recent years. It should also be noted that there were a significantly 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 of the wider East Ayrshire population than in previous years.

Table 6. CSII (Data Indicators) Benchmarking: 2024 Calendar Year / 2024-25 Financial Year

CSII Indicator	Scotland	East Ayrshire	Eilean Siar	Dundee City	North Ayrshire	North Lanarkshire	Inverclyde	West Dumbartonshire	Glasgow City
CSII-11: Premature mortality rate per 100,000 (2022) *	442	491	461	549	507	545	532	487	591
CSII-12: Emergency admission rate per 100,000 (2023) **	11,559	14,738	13,005	15,134	15,142	12,683	12,937	13,628	11,800
CSII-13: Emergency bed day rate for adults per 100,000 (2023) **	113,627	125,635	142,814	105,532	155,896	120,763	146,476	147,797	129,781
CSII-14: Emergency readmission to hospital within 28 days of discharge (per 1,000 discharges) (2023) **	103	111	87	139	106	112	83	85	92
CSII-15: Proportion of last 6 months of life spent at home or in the community (2023) **	89.2%	89.6%	87.5%	90.9%	87.6%	88.9%	88.2%	87.0%	87.6%
CSII-16: Falls rate per population aged 65+ (2022) **	22.5	21.3	23.8	34.0	23.0	22.1	24.1	22.2	28.9
CSII-17: Proportion of care services graded 'Good' (4) / better in Care Inspectorate Inspections (2023/24 FY)	81.9%	88.1%	84.6%	82.6%	86.6%	77.5%	83.6%	79.4%	89.6%
CSII-18: Percentage of adults with intensive care needs receiving care at home (2023) **	64.7%	70.1%	54.3%	65.9%	77.0%	65.6%	66.6%	70.1%	62.0%
CSII-19: Number of days people aged 75+ spend in hospital when ready to be discharged, per 1,000 population (2023/24 FY)	952	652	1,848	245	1,266	825	340	1,022	1,107
CSII-20: Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency (2019/20 FY) ***	24.0%	26.6%	19.8%	23.6%	30.0%	21.6%	25.3%	23.0%	25.8%

* 2023 calendar year figures have 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 previously 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 considered appropriate to include this information.

The table above provides a comparison across the CSII 'Data Indicators' within East Ayrshire's 'Family Group' of comparators. The figures indicate that East Ayrshire has performed well in a number of areas in relation to comparators, including: the premature mortality rate, emergency bed days, proportion of last 6 months of life spent at home or in the community, falls for those aged 65+, proportion of care services graded 'Good' or better in Care Inspectorate inspections, percentage of adults with intensive care needs receiving care at home and the number of days people aged 75+ spend in hospital when ready to be discharged. However, East Ayrshire has had relatively high rates of emergency admissions and emergency readmissions to hospital within 28 days of discharge in 2024, relative to comparator and national levels.

Table 7. East Ayrshire Performance Against CSII (Data Indicators): 2023 / 2023/24 – 2024 / 2024/25

CSII Indicator	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 (2022/23 v 2023) **	14,639	14,738	0.7% ▲
CSII-13: Emergency bed day rate for adults (per 100,000 population) (2022/23 v 2023) **	132,215	125,635	5.0% ▼
CSII-14: Emergency readmission to hospital within 28 days of discharge (per 1,000 discharges) (2022/23 v 2023) **	110	111	0.9% ▲
CSII-15: Proportion of last 6 months of life spent at home or in a community setting (2022 v 2023) **	89.3%	89.6%	0.3pp ▲
CSII-16: Falls rate per population aged 65+ (2022/23 v 2023) **	19.0	21.3	12.1% ▲
CSII-17: Proportion of care services graded 'Good' (4) or better in Care Inspectorate Inspections (2022/23 v 2023/24)	78.0%	88.1%	10.1pp ▲
CSII-18: Percentage of adults with intensive care needs receiving care at home (2022 v 2023) **	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 (2022/23 v 2023/24)	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.

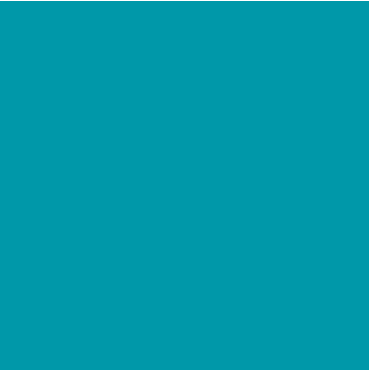
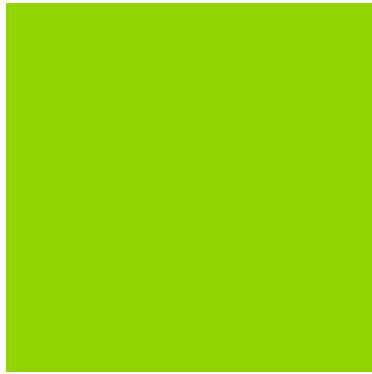
*** NHS Boards were not able to provide detailed cost information for 2020/21 due to changes in service delivery during the pandemic. As a result, Public Health Scotland have not provided information for indicator 20 beyond 2019/20. Public Health Scotland previously published information to calendar 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 considered 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.

An extended time series of all the data presented above is available within our [Performance Matrix](#), which can be viewed at www.east-ayrshire.gov.uk.



3



Our Performance 2024/25

National Outcomes 1-3:

- Our children and young people have the best start in life
- Our young people are successful learners, confident individuals, effective contributors and responsible citizens
- We have improved the life chances for children, young people and families at risk

East Ayrshire HSCP Strategic Priorities:

- Starting Well, Living Well & Dying Well
- People at the Heart of What We Do

Our Performance



Babies born at a healthy weight has remained static at 80.6%



P1 children with a healthy weight has declined slightly from 76.8% to 75.8%



Slight decline in local Foster Carer recruitment during 2024/25



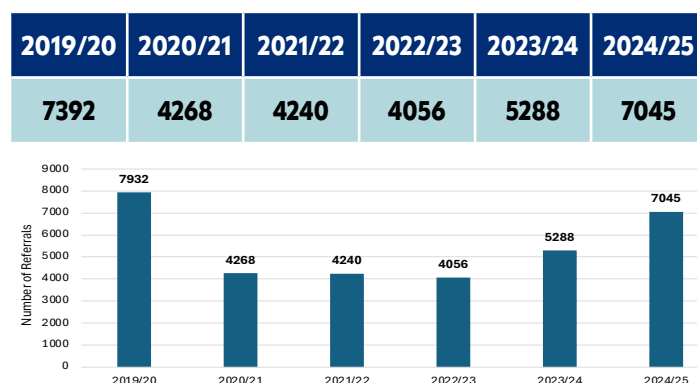
looked after and accommodated children with 3 or more moves declined from 24.2% to 17.5%

Delivering our plan & What matters to you

Our Children and Families Services provide compassionate and person-centred support for children, young people and families who require social work intervention to safeguard their wellbeing. In delivering this support, our staff continue to apply the principles of Getting It Right For Every Child (GIRFEC) and the values of 'The Promise' to ensure our young people grow up loved, happy and safe. The number of Children and Families Service referrals received has increased significantly over the last two years, following a period of decline between 2020/21 and 2022/23, as displayed in the chart below. The number of referrals is now closer to pre-pandemic levels.



Chart 1: Children and Families Service Referrals Received 2019/20 to 2024/25



The Supported Care service has been subject to significant development and change work over the past year. This has involved implementing improvements around how we recognise and support carers who provide continuing care to young people, which has resulted in a realignment of those carers from the Supported Care service over to the Fostering service.

This has created an opportunity to redevelop the functions and processes of our Supported Care service. Supported by involvement and input from panel members through a development session, along with refreshing the service's paperwork to better reflect the spirit and foundations of The Promise, a recruitment campaign targeting new supported carers will be launched in the near future.

Our Fostering service has continued to deliver core functions in 2024/25 to support approximately 70 families across East Ayrshire, whilst undertaking wider social work duties during a period of increased demand for foster care placements in a backdrop of significant foster carer recruitment and retention challenges being experienced nationally. In response, the service has concluded two fostering assessments in this reporting period and anticipates further new approvals early in 2025/26. The service has been closely engaged with national efforts led by the Scottish Government to improve fostering recruitment rates, including a national recruitment campaign launched in May 2025. The Fostering service webpage has also been updated and a new local campaign, along with new e-information packs for prospective carers, have been developed to promote and generate new interest from the public.

Despite these considerable pressures, the service has ensured that the vast majority (approximately 90%) of foster carer reviews are being held within twelve months, which exceeds our local target. This allows us to hear the voices and experiences of the carers and young people in our care and to ensure that their needs are being met. Feedback from carers consistently tells us that they value the support offered by their supervising Social Workers and the Fostering service more broadly.



The service has continued to develop the range and medium of training opportunities offered to carers, which has included the launch of: Permanency training; Ask, Tell, Save a Life; and an enhanced range of self-care and wellbeing supports for foster carers such as mindfulness sessions.

These have been co-developed with foster carers from a short life working group centred on carer wellbeing. An online Padlet has also been developed to enable carers to access a greater range of training materials at home.

Carers and young people have enjoyed coming together across a range of events over the last year, including the annual foster carer recognition celebration held in Kilmarnock and our carer-led Easter and Christmas parties.



The Fostering service has made significant strides over the last year in identifying, assessing and approving Familial Short Break carers who can provide short breaks to children in our care, as ideally in circumstances where carers or children require a break, children can spend time with someone known to them within their fostering family network, rather than being placed with unknown carers. Our shift away from 'respite' to 'familial short breaks' is driven by messages within The Promise and our service is now well placed to offer more natural, family-like breaks for children and young people.

Importantly, a number of our children and young people have been permanently matched with their foster carers over the past year, illustrating our drive to create predictable and stable childhoods. We continually recognise and celebrate the significant commitment and contributions of our foster carers and the work undertaken by those supporting them to achieve permanence for our children.

Our Kinship service continued to develop during 2024/25, while responding to significant demand for assessment of prospective kinship carers and providing intensive support for kinship families facing various challenges. The service remains connected to national developments in this area, including adopting the Scottish Government Kinship Assessment Framework within our local practice. The Kinship service continues to offer a broad range of training for carers and continually promotes participation in formal learning opportunities offered in conjunction with the Fostering service.



We celebrated Kinship Care Week in March 2025 through locally promoting the 'What Now?' booklet developed by the Kinship Care Advice Service for Scotland as a means of offering advice and guidance to new and longstanding kinship carers in East Ayrshire regarding finances, wellbeing and navigating the care system. Our service staff also attended a local Kinship carer event held in Kilmarnock, with many of our carers in attendance.

Adoption is a lifelong commitment and undoubtedly has a significant impact on people's lives. Our Adoption service has a key role in ensuring that the needs of individuals across the age spectrum who have been affected by adoption are met. This support ranges from assessing prospective adopters, to supporting birth mothers and assisting adoptees with origins enquiries. This work is often emotional and highly rewarding. We have been recognised for the innovative and compassionate practice that underpins children being placed for adoption with carers in East Ayrshire.

The Adoption service has continued to receive many enquiries from people who are interested in becoming adopters, as well as progressing numerous adoption assessments in the last year. Adoption support groups and preparation groups have also continued to operate over this period, which have important roles in supporting people through this process.

An often 'unseen' element of this service's remit is roots counselling and our staff have been focussing on supporting young people to better understand their life story, the reasons for coming into our care and the decisions made to support their wellbeing thereafter. The team are also supporting a number of children and families who are experiencing difficult circumstances by undertaking innovative and proactive approaches to reduce the likelihood of adoption breakdowns. This is a

challenging area of practice that the team are focussing efforts on to address.

The Adoption service has also worked alongside East Ayrshire Advocacy Services to better understand the needs of birth parents whose children have entered the care system, including being adopted. The service continually seeks better ways of offering effective support to birth parents through a collaborative approach with our community partners. The service also took part in an online adoption exchange day in August 2024, which provided adopters with a good understanding of our children and proved to be a successful means of progressing discussions between local authorities and prospective adopters.

Our Children's Houses continue to meet and champion the needs of the most vulnerable children in East Ayrshire to ensure that they grow to their potential in every aspect of life. We want to keep 'The Promise' by ensuring that our children grow up safe, loved and respected, especially when their personal circumstances are challenging.

Our three Children's Houses endeavour to ensure that our young people have all the opportunities and experiences that their peers have. Over the last year, this has included enjoying activities and holidays ranging from trips to Disneyland and Spain, to holiday parks closer to home, whilst making sure our young people are thriving in education environments. We are particularly proud of our cohort of young people who have recently transitioned on to further education at Kilmarnock college.





We are keen to see our young people fully participating in their local communities and having their voices heard in relation to what it means to be care experienced. As such, our young people are regularly involved in a range of groups including 'ArtClub?', football clubs and various youth clubs.

We work hard to ensure that our workforce is well equipped to understand that our young people, as well as being able to achieve fantastic achievements, are often vulnerable and in need of protection. A key focus this year has therefore been on ensuring that our Children's House staff are trauma informed and are able to understand and respond to these needs as they arise. We also continue to work closely with a wide range of colleagues, including: Speech and Language Therapists, Occupational Therapists, Educational Psychologists, Schools, School Nurses, Activities Coordinators, Police Scotland and national specialist residential groups, to create a web of support around our Houses, carers and young people.

We are passionate about further embedding the aspirations and values of 'The Promise' across our services. Despite changes to our Promise Participation team, we have continued to support our care experienced young people over the last year to maintain the Care Experienced Cabinet and ensure it both functions and grows. Working with the Chair and the Partnership's Planning and Performance team, the Cabinet recently agreed new perimeters for its functions and how it reports back to our young people, with the aspiration to complete the cycle of the Lundy model of participation (Article 12) around Space, Voice, Audience and Influence. Children and young people are also working to refresh the original East Ayrshire Connecting Voices 'Promise' at the time of reporting.

'ArtClub?', the co-curated group led by care experienced young people with an interest in contemporary visual art and activism, continues to flourish. The group won the UK Parliament Speaker's Art Fund for 2024/25 and were also invited to participate in the 'Big Art Show' in Paisley

in August 2024, at which they won the Outspoken Arts Award. The group provides young people from various care backgrounds with an opportunity to creatively engage with issues and interests that affect them, creating a pathway into other participation work such as the Care Experienced Cabinet. We have also seen young people with care experience provide feedback to national consultations such as 'moving on', both with Who Cares Scotland? and within our own Cabinet context.



The team continues to promote 'The Promise' and build strong relationships with various partners, including: SL33, East Ayrshire Leisure, Ayrshire College, East Ayrshire CVO, Haus of Seisay and Action for Children regarding Ayrshire's Bairnshoose. The team has also forged a strong partnership with the Scottish Fire and Rescue Service in East Ayrshire, with one of our young participants having successfully applied for an 'Access For All Arts Fund', a grant to create artworks in collaboration with the Kilmarnock Station later in 2025.

The Participation team delivered 55 Promise Participation activities in the reporting period, including: one-to-one sessions, home visits, external events, group participation events, various meetings and social events.



Our Children's Services Wellbeing Model is an innovative approach to improve how children and families are supported in East Ayrshire. Its vision is to ensure that our children and

families can access support at an early stage within their community, in a way that challenges discrimination and stigma. Multi-disciplinary team working and the GIRFEC principles are central to this model, and it was given the name 'HEART' (Help Everyone At the Right Time). HEART was developed as a strategic driver for change in response to feedback from families who were struggling to obtain help when and where they need it. The model fundamentally seeks to improve the way that children and families are supported, ensuring they get help at an early stage and in the communities in which they live, through a 'no wrong door' approach.

A wide range of local services, including: Education, Early Years, School Nursing, Health Visiting, CAMHS, Vibrant Communities, Social Work, Housing and Allied Health Professionals, formally started to come together on a regular basis from April 2022 in locality based HEART meetings. As part of a four year Plan, a place-based HEART approach has been undertaken within the Shortlees community, where we have since seen evidence of greater collaboration between local partners, third sector organisations and the local community through focused work including holiday activities, back to school events, social activities, parental workshops and information sessions.

Further HEART workstreams during 2024/25 included implementing the Family Group Decision Making and Restorative Practice training and the Request for Assistance Team within our Children's Social Work service. The HSCP commissioned Children 1st to provide restorative family approaches at an early intervention and prevention stage, linked to the development of the HEART model.

At an early stage of development, it was agreed that the service would initially link to the newly established Social Work Request for Assistance (RFA) team. An analysis of data identified a significant need for crisis intervention at point of RFA, therefore service delivery shifted from our original aim of early intervention to crisis intervention and prevention of escalation through the system as more families required detailed multi-agency plans at an earlier stage than is currently the case. This has enabled the service to provide the appropriate support to families when they need it.

The introduction of the Social Work Request for Assistance (RFA) Team in March 2024 was under a 'test for change' initially implemented in the North locality. In October 2024, this was rolled out to the South locality to then become an authority-wide service. Throughout the 'test for change', we have analysed the RFA's to understand need and deploy our resources to best support this. This work has produced a rich source of data including locations, reasons and sources of referral, age, gender and outcomes, as well as supporting the introduction of the Signs of Safety programme.

During 2024/25, the East Ayrshire Child Protection Committee (CPC) has continued to work collaboratively with the multi-agency and pan Ayrshire Partnership on a range of matters, including embedding the pan Ayrshire Multi Agency Child Protection Guidance (2023) locally. Subgroups of the CPC have also progressed quality assurance actions in relation to the implementation of the pan Ayrshire and National Guidance for Child Protection which have included revisions of the IRD process, developing child friendly materials for children and young people and the early development of an East Ayrshire approach to contextual safeguarding and vulnerable young people. The impact of the National Child Protection Guidance and Pan Ayrshire Multi Agency Child Protection Guidance continues to be evaluated to inform the CPC's ongoing improvement work.



The CPC continues to prioritise building multi-agency workforce confidence, awareness and partnership collaboration in relation to child exploitation, awareness of contextual safeguarding and the findings identified from completed learning reviews. This was achieved through delivering five multi-agency shared learning events which took place across Kilmarnock and Cumnock during October and November 2024.

Going forward into 2025/26, the CPC will support the implementation of the 'Signs of Safety and Healing' programme across East Ayrshire Children's Services. The first cohort of the five-day training was delivered across February and March 2025 for the core implementation team and we will drive forward the implementation of this model throughout the coming year.



The Early Years service's seven 'Babychat' groups situated across East Ayrshire have continued to deliver health information, infant feeding advice and support to infants aged six weeks to six months and their carers on a range of topics. Families

are identified by their Health Visitor to access support and are invited into the six to eight week programme. These sessions continue to be undertaken through a collaborative approach involving various partners such as Speech and Language Therapists, Dietetics and Community Practitioners, and are delivered by Health Visitor Support Workers. Infant massage and 'Bookbug' are also core elements of the programme.

Parent:

"I'm getting out and having a safe space to chat to other mums...advice from professionals especially when suffering from maternal anxiety"

The service receives regular feedback from parents and carers to ensure it is meeting their needs and to inform the content covered within future sessions. Frequent comments received include a reduction in feelings of social isolation, improved knowledge of safe feeding practices, supporting mothers with breastfeeding and improved mental health.

In partnership with Education colleagues, the Early Years service delivered the 2-5 year old flu vaccine during 2024/25 within all nursery settings with one exception, across East Ayrshire where parents gave consent but did not have to be present. Parents also had the option to support their child whilst having their vaccines. The service's dedicated team of staff nurses delivered the flu vaccines over a 6 month period, as well as 27 routine immunisations per week. Nationally, the overall flu uptake across pregnant women, older people and staff groups was lower this year, however our staff have worked closely with Pharmacies, Public Health and Portering services to meet the demands of the programme and to promote local uptake of the vaccine.

Parent:

"This suits me better as I work full time and would have difficulty getting time off for an appointment"

The service achieved an uptake rate of 57.8% in East Ayrshire this year, which is lower than last year's uptake (62.2%), however benchmarks favourably against national (50.3%), North Ayrshire (48.2%) and South Ayrshire (51.1%) rates respectively. Due to our relatively successful campaign, Public Health Scotland and the Scottish Government are keen to review our delivery method with a view to replicating this practice nationally. Feedback from parents suggested that this method was more convenient than having to take time off work to attend other appointments within GP surgeries, community clinics or having to return to nurseries. Staff within nurseries also reported that the process was efficient and less stressful for the children.

NHS Ayrshire and Arran's Child Healthy Weight team has continued to support children and their families to achieve a healthy weight through the well established Jumpstart programme. Jumpstart works with families of children aged 5-17 years old and children with additional support needs, delivering four programmes: Junior (ages 5-9), Senior (ages 10-13), Teens (ages 14-17) and Jumpstart Plus (additional support needs). A total of 46 referrals were received during 2024/25 for children living in East Ayrshire, accounting for 32% of all referrals to the Ayrshire and Arran wide service. The referrals received were evenly split in terms of gender, with 23 male and 23 female. Of the 46 referrals, the majority originated from SIMD 1 and 2 (82%), with the remaining 18% from SIMD 3 and 4. No referrals were received from SIMD 5 areas. In addition, the team also supported 6 teenagers through a Teen Fit programme, delivered 92 group based physical activity and health education sessions and attended 14 events to promote the service over the last year.

During 2024/25, the Children and Young People Speech and Language Therapy service remodelled the way in which it delivers services by adopting a locality-based approach in line with the HEART Model, enabling the service to be more accessible within communities. This work increased local capacity by realising benefits such as regular clinic slots and reduced travel time, and has significantly reduced waiting times for children and families, from over 52 weeks previously, to 11 weeks at the time of reporting. A service improvement project has also been undertaken within the Neonatal Unit to encourage cue-based feeding within the reporting period. This targeted work has been found to reduce the length of time that babies require neonatal care by 71 days, to reduce the time taken to support babies with oral feeding from 18.5 days to 13.7 days, and to reduce the level of feeding problems reported by parents and carers on discharge from hospital.

A number of the service developments and activities outlined above reflect the GIRFEC Principles and the key messages outlined by the Independent Care Review Reports published in February 2020, particularly in relation to embedding the aspirations and values of 'The Promise' in our local practice. We are committed to further embedding these elements in our service delivery to ensure the best possible outcomes for children and families in East Ayrshire.

National Outcome 4:

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

East Ayrshire HSCP Strategic Priorities:

- Starting Well, Living Well & Dying Well
- People at the Heart of What We Do

Our Performance



89.1% of adults able to look after their health very or quite well, down slightly from 89.5%



Long-term decline in alcohol-related hospital admissions (484.3 per 100,000 population)



Significant reduction in drug-related hospital stays over last 5 years (228 per 100,000 population)



99% of people started drug/alcohol treatment within 3 weeks (target = 90%)

Delivering our plan & What matters to you

NHS Ayrshire and Arran's Quit Your Way (QYW) Smoking Cessation service continued to support people within hospital and pharmacy settings throughout East Ayrshire during 2024/25. 1,150 referrals were received over this period with 789 quit dates set, an increase from last year. A number of new targeted smoking cessation programmes were also delivered within key settings across East Ayrshire over the last year. This has included the delivery of an information session on smoking and vaping to modern and young apprentices within Emergency One in Cumnock, which led to a weekly smoking cessation clinic being established in this workplace. A new smoking cessation group was also established at HALO in Kilmarnock.

Service User:

"I'm glad I had help and support to stop vaping. Thanks to my advisor for helping and to my workplace for letting me attend the sessions"

QYW Officers delivered several information sessions to modern apprentices employed by East Ayrshire Council and also engaged with young people at SL33 in Kilmarnock and SL66 in Cumnock regarding smoking and vaping behaviours to raise awareness of the associated dangers on health, which were well received by the attendees. Furthermore, the QYW service has developed stronger links with local addiction services over the last year and was invited to the East Ayrshire Campus Police's 'Pitching in' programme to deliver a workshop on smoking and vaping for young people who generally do not engage well with education.



NHS Ayrshire and Arran's Better Health Hub continued to provide support, signposting and onward referrals throughout 2024/25 to address issues which impact negatively on

people's health and wellbeing, including: mental and physical health, weight management, menopause, smoking cessation, financial wellbeing, food insecurity, housing and discharge aids. The service in East Ayrshire is delivered from the Staff Wellbeing Centre at University Hospital Crosshouse, with staff, patients and the public being the key target groups. Over the last year, the Better Health Hub has supported 39 staff members and 111 patients / members of the public with initial enquiries, with common themes including weight loss, being more active, smoking cessation and financial issues.

In 2024, the Better Health Hub secured space for a half day afternoon session in University Hospital Crosshouse for patients and the public to access health and wellbeing information on a drop-in basis. In addition to the new drop-in service, post boxes have been located within pre-op and outpatient departments within the hospital for patients to refer themselves to the Better Health Hub service using wellbeing prescription pads to select which type of health and wellbeing advice they would like to receive. The individual is then contacted by the service to discuss the wellbeing elements they identified on the wellbeing prescription pads. The Hub has also created links with the Child Asthma Team and the Abdominal Aortic Aneurysm Screening programme to offer Better Health Hub services to patients and their family members.

Supported Person:

"You have been a lifeline for me. I appreciate everything that you have done for me. I do not know how I would have coped if you had not been able to assist me"

The Community Connectors service commissioned by the East Ayrshire HSCP and delivered by East Ayrshire Council of Voluntary Organisations (CVO), continued to connect people in the community with non-medical support services and resources to safeguard and improve their health and wellbeing, with 953 residents being supported by the Connectors throughout 2024/25.

The most frequent reasons for referral over this period included: welfare benefits, social activities, anxiety, depression and social isolation, however these issues are often interlinked. The team of 8 Community Connectors have been in post for 10 years and are aligned with GP practices, Health Practitioners and the University Hospital Crosshouse Emergency Department to promote joint working and relieve pressure on other services across the health and social care system.

The Community Connectors work holistically through a person-centred approach to identify individual needs and to encourage people to access suitable services within their local communities to achieve positive wellbeing outcomes and personal goals. The Community Connectors have forged strong links across most of East Ayrshire's statutory and third sector organisations, including direct links into East Ayrshire Advocacy and services that support children and families. Over the last year, they have worked closely with agencies in connection with refugees, immigrants and displaced families to support people out of poverty and deprivation. The Connectors have also attended joint forums and meetings with other partners, including HSCP Social Work Front Door Hub meetings, which supports the continuity of services and enables timely action to be taken to support people when required.



The Council's [Wellbeing in East Ayrshire](#) website continued to be regularly updated throughout 2024/25 to support our residents to improve their mental and physical health, alongside other wellbeing themes. The website includes a range of practical resources and links in relation to numerous topics, including: general wellbeing, mental health, physical exercises, social activities, financial help, and children, young people, parents and carers. In addition, the HSCP's [Living Well in East Ayrshire](#) website also provides useful resources to support people on their journey towards living well, by incorporating content on numerous themes such as: working well, healthy lifestyles, keeping safe, staying connected, mental health, growing up well, staying fit and financial wellbeing. Similarly, NHS Ayrshire and Arran also continued to provide a range of wellbeing material on it's Better Health website, with a

particular focus on the following areas: alcohol, physical activity, smoking, mental health, oral health, green health and cost of living support.

The Alcohol and Drug Partnership (ADP) Peer Outreach Worker Initiative continued to make a significant and positive impact in supporting people affected by alcohol and drug use in the local area of Auchinleck at the Auchinleck Community Development Initiative (ACDI), with the Peer Outreach Worker playing a vital role in delivering person centred support for people at various stages of recovery during 2024/25.

Regular outreach sessions were also held in Auchinleck and surrounding rural areas over this period, with the Peer Worker offering 1:1 support, harm reduction advice and signposting to other services including RADAR, housing, benefits, and mental health services. The presence of a consistent, friendly face in the community has proven to be a valuable asset, contributing towards a more holistic approach to support and recovery. In partnership with other local organisations, ACDI continues to offer a safe environment where people can access peer support groups, structured activities and reconnect with their community, promoting social inclusion and personal development opportunities for the individual they are supporting.

As part of an award-winning Opiate Replacement Therapy Micro Dosing project, 53 people in East Ayrshire were successfully titrated off methadone onto a new, more manageable treatment in 2024/25. Our Specialist Pharmacist in Substance use Management has collated the clinical data from the project and this evidence will be used for validating microdosing in an upcoming research paper. Very positive feedback has been received from people who have transitioned from Methadone to Buprenorphine through the micro dosing pathway.

Patients:

*"Best thing I've ever done...
wish I had done it sooner!"*

*"I have had a new lease of life and have
managed to do activities such as going
shopping for the first time in over a year"*

National Outcome 5:

- 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

East Ayrshire HSCP Strategic Priorities:

- Caring for East Ayrshire
- Starting Well, Living Well & Dying Well
- People at the Heart of What We Do

Our Performance



81.2% of adults supported to live as independently as possible, up from 76.1%



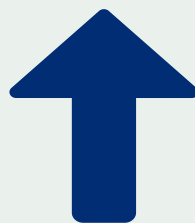
Annual bed days lost to delayed discharge increased from 10,767 to 11,586



Emergency admission rate increased from 14,639 to 14,738 per 100,000 population



Emergency bed day rate fell from 132,884 to 125,635 per 100,000 population



Rate of emergency readmission within 28 days increased slightly from 110 to 111 per 1,000 discharges



89.6% of people's last 6 months of life spent at home or in a community setting



96.4% of older people aged 65+ live in housing rather than a care home or hospital



Bed days relating to Asthma, COPD, Heart Failure and Diabetes declined to 6,987 per 10,000 population

Delivering our plan & What matters to you

The Care at Home service is a fundamental aspect of social care provision which supports over 1,600 people in East Ayrshire to live independently and safely in their own homes. During 2024/25, our Community Care Officers continued to deliver high quality, compassionate and person-centred care, which has been reflected in survey feedback gathered, noting that *"staff go above and beyond every day"* and with people commenting that they *"simply couldn't live without them"*.

Family Member:

"Our family wanted to let you know that we appreciate everything the carers do for mum and particularly during the recent Storm Eowyn, they always go the extra mile."

The service has continued to navigate challenging situations over the last year, with several measures implemented to improve the consistency and capacity of the workforce, including a review of shift patterns and enhanced and targeted recruitment. Through work undertaken alongside other teams in line with new eligibility for social care, the balance of workforce capacity and work demands has improved by over 2.5% in our Locality Care at Home teams. Despite this, the Care at Home service remains in a challenged financial position. Various measures have been implemented to ensure staff retention and attendance levels improve as well as working conditions and capacity, whilst achieving safe, effective and sustainable delivery within available resources.

A new collaborative Care at Home Framework was also established in April 2024, with five independent providers working closely with East Ayrshire Care at Home provision to increase capacity and relieve some of the demands on the internal Care at Home service. From a baseline of 6,600 monthly hours (9% of total hours) provided by independent providers in April 2024, this has risen to 9,400 hours in March 2025, representing 12% of total provision.

CASE STUDY



Mr Y expressed how well looked after he feels from both his family and the Community Care Officers and like the previous year, wanted to verbally express how **“magnificent, kind and caring”** his regular carers are. He advised that they **“go above and beyond”** to ensure that he and his wife are supported

and well cared for in the community. There is nothing that he would change in relation to his provision of care and he had no issues to raise, only praise, regarding the quality of care received.

The HSCP's Reablement team has continued its strong performance in 2024/25. 180 referrals were received in this period, with 155 (86%) people completing reablement. Of this cohort, 86 (55%) did not require a package of care following the intervention.

Service User:

“I am so appreciative of the support I received from the carers... I would not have made such a quick recovery without it”

Of the 69 (45%) people that needed continued care, 6 required an increased weekly package of care, 23 maintained the same package of care and 40 had a reduction in the weekly hours required. The total cost of the packages of care for the 155 people that participated in reablement was, on a projected annual basis, the equivalent of £1,150,755. Post reablement, this total projected cost was reduced to £385,573, a 66% reduction. To achieve this, the total cost of the reablement intervention was £168,267, of which £164,647 were cost of reablement care and £3,620 were equipment costs. At the end of the financial year, the net cost avoidance on a projected annual basis was £596,915.

Service User:

“They made me feel motivated to be independent to not need someone assisting me with tasks. Doing them gave me confidence to self-care and reassurance they were there if I needed them”

Importantly, the outcomes Reablement has helped people to achieve have been overwhelmingly positive, with a focus on exploring ways of people maintaining and improving their function and independence being central to the team ethos, alongside demand management. Satisfaction with Reablement also remained high, with over 90% of people reporting “very” or “fairly” satisfied after the intervention, in addition to other positive outcomes outlined below:

- 87% of participants felt significantly safer;
- 91% of participants felt they were able to stay as healthy as possible;
- 90% of participants felt the service helped them to increase their independence at home; and
- 82% of participants felt their quality of life improved significantly.

Family Member:

"We became involved when my husband fell resulting in a nasty arm fracture. They were very reliable and most helpful to my husband"

Our Intermediate Care Team (ICT) continued to deliver crucial care and support for older residents throughout 2024/25 to enable timely hospital discharge, reduce avoidable hospital admissions and promote independence at home through identifying and contributing towards personal goals. The work of the team also made significant contributions to Whole System Intervention events in acute hospitals in regards to Discharge without Delay objectives. These efforts supported people to return home more quickly and promoted alternative pathways which allow patients to return home directly rather than remaining in hospital for longer or awaiting a rehabilitation bed, which are associated with more positive health and wellbeing outcomes. The service has also worked to re-establish links with community and acute 'front door' partners to raise awareness of ICT criteria and the supports available to avoid unnecessary hospital admissions and enable people to return home promptly.

Our Community Alarm Emergency Response team provide a 24-hour emergency care service for residents in East Ayrshire who experience a fall, an unplanned care need or technical emergencies relating to their equipment. There are approximately 4,000 people in the authority who use Telecare services and the Community Alarms service continues to respond to critical needs, with staff working compassionately and flexibly to provide timely care for vulnerable people.

Three Adult Day Service centres continue to operate in East Ayrshire: Balmoral Road (Kilmarnock), Riverside (Cumnock) and the Sir Alexander Fleming Centre (Kilmarnock). This service carefully considers people's abilities and personal interests to deliver bespoke and person-centred support, learning opportunities and social activities to meet individual outcomes. The three day centres continue to work collaboratively, share information and support each other operationally, which has been important for ensuring consistent and high quality service provision in recent years.

The centres also work closely with other Council, Health and Education services, in addition to collaborating with local communities to deliver various opportunities which improve wellbeing and reduce health and social inequalities for adults with learning disabilities in East Ayrshire. The service aims to support people with learning disabilities to lead a more independent and fulfilling life, and in doing so, promotes inclusion, personal choice and people's right to make their own decisions. The day centres continued to deliver and organise a wide range of activities during 2024/25, including:

- organising and supporting various outings and activities at community venues, such as sports sessions, pool, bowling, swimming, music groups, shopping and lunches;
- delivering numerous building-based activities including quizzes, gardening, arts and crafts, sensory baking, physical exercise, sensory room, karaoke and dancing;
- parent/carer and volunteer-led evening clubs;
- fundraising activities;
- holding parties throughout the year including Christmas and Halloween;
- celebrating events such as Learning Disability Week and Animal Therapy Day;
- contributing towards local foodbank initiatives; and
- providing work experience and volunteering opportunities.



These activities have provided a number of observable positive outcomes for our attendees over the last year, including improved: independence, physical mobility, decision making abilities, communication skills and community links, in addition to creating new friendships and relationships.



In May 2022, the Scottish Government issued a new specification for the delivery of annual health checks for people with learning disabilities. This specification was an enhanced health check from what was previously delivered by GP Practices. Scottish Government funding enabled an identified workforce to provide these health checks in Ayrshire. To date, 499 health checks have been offered, with 292 completed in East Ayrshire.



The HSCP was awarded the Platinum Digital Telecare Implementation Award by Digital Telecare for Scottish Local Government in January 2025 in recognition of the completion of its local Analogue to Digital Telecare Transition project. To achieve the Platinum award, a Telecare service provider must have successfully rolled out a live digital telecare service to 100% of its service users, while operating successfully without serious issues or call failures for at least 8 weeks.

We acknowledge the importance of transitioning the Community Alarm service from analogue to digital. Following the announcement by telephony companies regarding the discontinuation of copper analogue lines and the shift to digital, the HSCP initiated immediate planning for this transition, including the recruitment of the Analogue to Digital team, tasked with overseeing the transition of the Community Alarm service and associated equipment. The Analogue to Digital team comprises a Coordinator, 3 Technicians and a Support Worker, who have led the transition programme and forms part of the Partnership's Thinking Differently Programme, with a focus on embedding a 'tech first' approach across our health and social care services. Since receiving the Bronze Digital Telecare Implementation Award in January 2023, the team has concentrated on the procurement and deployment of new digital-ready Community Alarm units, thereby reinforcing our position as the transition progressed.

The work undertaken by the team to complete the transition will ensure that East Ayrshire residents have uninterrupted access to a digitally enabled telecare that will continue to operate when analogue communications are deactivated, enabling supported people to continue to live as independently as possible in their own homes.

National Outcome 6:

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

East Ayrshire HSCP Strategic Priorities:

- People at the Heart of What We Do
- Digital Connections

Our Performance



78.6% of adults receiving care or support rate it as 'good' or 'excellent' (national average = 70%)



55.7% of people had a positive experience of GP-provided care, down slightly from 56.9%

Delivering our plan & What matters to you



Care Opinion is a non-profit organisation that has led the way in online, independent feedback since 2005, and has been

utilised by all health boards in Scotland over the last decade, with thousands of stories having been shared to date, informing many positive service improvements. This platform enables people to share their experiences

of the care that they received in a simple, safe and confidential way, in addition to providing an opportunity to view other people's care experiences.

A Care Opinion feedback profile was created for East Ayrshire Health and Social Care services in April 2022. Since then, Care Opinion has been a valuable source of evidence for evaluating our service delivery, recognising our strengths and identifying areas for improvement in ensuring that we deliver positive outcomes and service experiences for people. 163 stories have been shared on the platform to date in relation to our services, with an 86% response rate to the last 100 stories from professionals. 109 members of staff are currently engaging with the platform. Some of our areas of strength highlighted include the care, friendliness and helpfulness of our staff, the positive impact of our services and the activities offered, while areas for improvement identified include a lack of communication between services and Mental Health service provision, as illustrated below.

Service Users:

"Friendly staff and selection of activities"

"The staff can not do enough... they are absolutely brilliant"

"The care I received from start to finish was excellent"

Service Users:

"I feel this is a good service, very helpful, [the CCO] is kind, caring, easy to talk to. I will miss her visits"

"My time with the service has been so reassuring to me, his guidance and encouragement has helped me greatly and his friendship has been so valuable to me"

A Care Opinion Promotion Working Group was established in August 2024 to improve local engagement with the resource. Some promotion activities undertaken to date include internal team communications, service integration, external engagement with service users and ongoing internal promotion through distribution of Care Opinion materials across HSCP premises. Display areas have also been set up, highlighting monthly feedback stories, and Care Opinion posters, cards and leaflets have also been widely distributed. Furthermore, there has been ongoing external promotion through 'Feedback Friday', in which stories are shared on our social media platforms to encourage service users to access Care Opinion, and engagement dates have also been planned throughout 2025/26 to support people to share their stories.

Service Users:

"I feel the mental health system is broken, not much support in the community as there should be"

"The service was let down by poor communication between health and social care"



In it's 30th anniversary year, the East Ayrshire Advocacy Service continued to support vulnerable people in our communities to ensure that their voices were heard and their views were known when decisions were being made about their lives. Demand for the service remained high

during the last year, despite a slight decrease in overall referral numbers, from 1,337 in 2023/24 to 1,287 in 2024/25. The most frequent referral partners were Housing, Mental Health Officers, self-referrals and Social Work services, while the most common advocacy support areas that people were referred for were Housing (16%), Care Planning (9%), DWP (7%) and Correspondence (7%).

Service Users:

"It saved my life, I am so, so lucky I am alive and I truly believe that if it was not for Social Work finding me I would be dead and buried"

"My Advocacy Worker attended hospital appointments and explained the information in a way I could understand. This allowed me to discuss my wishes for my ongoing treatment"

The service continued to operate a waiting list throughout the year, whilst prioritising referrals involving legislation. The average duration of advocacy support fell from 6.5 months in 2023/24 to 5.5 months in 2024/25, reflecting the team's commitment to working at pace despite the continued high volume of new referrals. Over the reporting period, 75% of referrals were closed as the issues were resolved, 15% were closed due to non-engagement, 3% were inappropriate, and the remaining 7% were closed due to the referred individual either moving out with the authority, being liberated from prison or passing away.

The East Ayrshire Advocacy Service continued to be closely involved in a number of HSCP projects and meetings, including: the Adult and Child Protection Committees and associated sub-groups, multi-agency self-evaluation groups, GIRFEC, the Thinking Differently Programme Board, the IJB Stakeholder Forum and the Adult Support and Protection Lived Experience Project. Its Scottish Government-funded Children's Hearing Advocacy service was also subject to a successful evaluation in the year, and the service participated in the national Together (Scottish Alliance for Children's Rights) State of Children's Rights 2024 research report.

The HSCP published its current [Independent Advocacy Strategic Plan 2024-27](#) in 2024, which sets out our shared ambitions for improving opportunities for everyone in our communities to have their voice heard regarding matters that are important to them. Developed collaboratively following comprehensive engagement with stakeholders, the Plan describes the nature of independent advocacy and the different types of advocacy that are available to support people to convey their views. It also sets out the scope of current advocacy provision in East Ayrshire provided by the East Ayrshire Advocacy Service and WhoCares?Scotland, in addition to information about local partnership working and regional activities.

Our Digital Health Project, which promoted using Technology Enabled Care (TEC) as a key enabler for people to manage their long term health conditions and to improve health and wellbeing, concluded in March 2025. Between November 2023 and March 2025, two part time Digital Health and Care Support Workers (DHCSWs) supported 103 people through various initiatives including: utilising a TEC Backpack to build confidence and digital skills, providing access to devices such as Komp that can address social isolation and loneliness, managing health and wellbeing information screens in GP practices, and supporting people to attend online multi-disciplinary group consultations. During this period, the DHCSWs have also:

- raised the profile of their role and TEC, adapting to the needs of people and communities;
- undertaken an extensive mapping exercise of the northern locality;
- presented a TEC Backpack talk on the national 'Lunch Time Learning Bites' forum;
- delivered an 'open house' satellite session as part of the national programme;
- provided people with practical support such as demonstrating how to order prescriptions online and downloading apps onto devices;
- linked with and delivered talks to a number of local groups across the Irvine Valley; and
- established a Facebook page to share information about TEC, health and wellbeing and accessing safe and trusted information online.

Based in Ross Court, Galston, the HSCP's Smart Hub provides an innovative and homely setting to showcase a range of smart home technologies and digital telecare equipment to help keep people feeling safe and independent within their own homes. These technologies promote and enable an early intervention and prevention approach, by supporting people before there is an escalated situation or need for social care involvement. Natural support networks are also included within this work, ensuring a holistic approach.

Worker:

"The Hub has an amazing range of products / ideas for how to support vulnerable people. The rooms are well set out which makes it easier to find the right products for your home. The staff are so knowledgeable and aware of the challenges we face at home. A really good resource"



The Smart Hub has remained open every Wednesday from 9am to 5pm on an appointment only basis and people can attend with their allocated Worker. The Hub has also welcomed members of the public to the space (referred by the Front Door service), to hold person centred conversations around family circumstances and how technology can serve as an alternative to formal services. Since opening, more than 250 people have visited the Hub and it has become a valuable resource for upskilling people regarding the benefits of technology enabled care, which has been reflected in the positive feedback received. The Smart Hub has also been visited by external and third sector partners, who are interested in the exciting local work undertaken around technology enabled care.

CASE STUDY



Following a visit to the Smart Hub, a gentleman has gone on to purchase his own Alexa Show 10 and smart plugs to make his home more accessible for him and so he can keep in contact with his family and friends, therefore reducing loneliness and isolation. This has also avoided the need for a community alarm package.

The Partnership received a total of 194 complaints in 2024/25, an increase from 140 in the previous year. 12% of the complaints received were upheld or partially upheld, and 5% were withdrawn. Withdrawn complaints are usually attributable to: duplicate complaints received; an issue that has already been managed; or where a person has chosen to withdraw the complaint. The most common complaint theme in the last year was 'Care at Home', accounting for 47 complaints. The second most common theme was 'Employee', where a dissatisfaction was expressed about services and supports provided, and specific members of staff were named as part of the complaint, which accounted for 44 of the complaints received. The third most common theme was 'Service', covering all service areas, and where general dissatisfaction had been expressed about the level of service received, accounting for 35 complaints.

Over the last year, the time taken to close stage one complaints has increased from an average of 7.5 days to 13.6 days, and for stage 2 complaints it has increased from an average of 25.5 days to 40.9 days. Stage 2 escalated complaints timescales have also risen from 40.1 days to 41.2 days during this period. The percentage of complaints being closed within Scottish Public Services Ombudsman timescales also decreased for stage 1 complaints (from 59.7% to 33%), stage 2 complaints (from 45.8% to 16.3%), and stage 2 escalated complaints (from 80% to 20%). A significant proportion of the complaints were generated in response to the changes made regarding the eligibility criteria for paid services, and an emerging trend where the initial reaction to dissatisfaction has generally been to submit a complaint rather than to contact allocated Workers to discuss.

As at 31 March 2025, 36 complaints remained open, however not necessarily out with Scottish Public Services Ombudsman timescales.

In April 2024, the waiting time for treatment within the East Ayrshire Primary Care Mental Health Team was 24 weeks, however by May 2025 the waiting time had reduced to 2 weeks across all localities. The team were able to achieve this by maximising clinic capacity whilst investing time in staff wellbeing, which included working closely with Mental Health Practitioner and Community Mental Health colleagues to improve their understanding of the service, resulting in more appropriate referrals. The team also introduced new staff meetings to improve collaborative working within a predominantly lone working role, which has also improved shared learning and decision-making, in addition to enhancing the quality of care delivered.

National Outcome 7:

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

East Ayrshire HSCP Strategic Priorities:

- **Starting Well, Living Well & Dying Well**
- **People at the Heart of What We Do**
- **Digital Connections**

Our Performance



74% of adults supported at home agree their support is improving or maintaining their quality of life (national average = 69.8%)



88.1% of care services graded 'good' or better, up from 78%

Delivering our plan & What matters to you

The CVO's Connect Call is a befriending service which provides free and confidential support over the telephone, offering friendship opportunities, signposting and assistance to anyone in East Ayrshire who may feel socially isolated. Connect Call has continued to help reduce social isolation and loneliness in our communities during 2024/25, in addition to promoting safety for vulnerable people who previously received nuisance calls that had been blocked. At the time of reporting, there

are currently 12 trained volunteers working within the service who contact 228 people on a weekly basis, with new referrals being received daily from over 30 different local agencies. The volunteers hold these weekly calls with people aged from 29 to 98, illustrating that social isolation and loneliness continues to span across the age spectrum. The Connect Call volunteers also hosted 5 successful tea dances in the last year, which brought people together to enjoy music, dancing, refreshments and social connection.



In addition to its telephone befriending service, the CVO also delivers a weekly 'Brew and a Blether' session at WG13 Kilmarnock, to provide people with an informal

and relaxed space to come together, connect and enjoy free refreshments. Between 14 to 24 people attend these gatherings each week, with a range of positive feedback having been received regarding the positive impact that the group has made to people's lives.

Service Users:

"Wednesday is the most important day of the week, it is the day that I get my weekly call"

"You are the only person that I speak to weekly"

"You bring sunshine into my life"



The NHS Health Information and Resource Service continued to provide quality assured health and wellbeing information over the last year, covering an array of themes which can impact on an individual's quality of life and wellbeing. A total of 613 people from East Ayrshire were recorded using the Health Information and Resources Service, with 51 new users registered in 2024/25. 857 orders were placed from East Ayrshire service users in this period, up from 652 last year. Team members also attended various events throughout the year to promote the service and share information, including a Health and Wellbeing Day at HMP Kilmarnock in March 2025 where 90 people visited the information stall, and NHS Ayrshire and Arran's Physiotherapy Community Appointment Day in August 2024 where 55 people visited the stall. Attendees commented that the information provided was relevant and useful.



Following the success achieved in 2023/24, Allied Health Professionals continued to deliver community appointment days across East Ayrshire to provide people with

local and timely access to assessments, health promotion materials, rehabilitation and voluntary sector support. This included a Podiatry Community Appointment Day held at the North West Kilmarnock Area Centre in April 2024, which was attended by 37 people whom were all 'happy' with their outcome from the day. A further Podiatry Community Appointment Day was delivered at the Dalmellington Community Centre in February 2025, which was attended by 14 patients, representing a 41% attendance rate. 13 of these individuals were discharged with advice which reduced the waiting list by 33% and all attendees were satisfied with the Appointment Day and were 'happy' with their outcome. An MSK Physiotherapy community appointment day was also held in August 2024, which was supported by a range of Allied Health Professionals and other multidisciplinary healthcare professionals with the aim of addressing multiple patient needs within one dedicated appointment. The event was attended by 113 people who also had the opportunity to access a range of community and third sector services to assess their wider health needs and support options within their local community. 16 patients were subsequently discharged from the MSK Physiotherapy waiting list following the event.



Care homes represent another core element in the social care system which provide accommodation, personal and nursing care for people who require additional support. The HSCP continued to work closely with the Independent Sector Lead during 2024/25 as part of oversight and support arrangements, ensuring that all available supports were offered inclusively and equitably to our partner care homes in East Ayrshire. Staff across our eighteen partner care homes continue to provide high quality and person centred care and support for more than 700 residents across the authority, demonstrating tremendous commitment and compassion. We also recognise the ongoing flexibility of these staff, with consideration of the increased national scrutiny following the Covid-19 pandemic.

Attendees:

"Brilliant! I saw four experts in one day... this would have taken four visits to hospital!"

"This is a great idea...it brings more people out. Good location"

"Brilliant, lovely people, feet all sorted"

Our partner care homes continued to receive a range of supports from East Ayrshire Council, the HSCP and other partners during 2024/25. We recognise that a number of challenges have remained across the sector over the last year, including difficulties in recruitment and increased levels of auditing, reporting and scrutiny requirements, which have collectively impacted on capacity across care homes. Despite this, our care home providers continue to develop their workforce and improve service provision by utilising the resources made available to them by the Partnership, including the Care Home Professional Support Team. Some of our care homes experienced changes in management in the last year, with the HSCP and Independent Sector Lead having supported these successful transitions. The relationships between care home providers and the HSCP remain strong, supportive and collaborative, ensuring the best possible experience for our residents.

A number of social activities took place during 2024/25 including the second annual 'Great East Ayrshire Care Home Bake Off' event, which was hosted by Thorntoun Care Home in Crosshouse. Sixteen of our care homes participated this year, providing many delicious options for the panel of judges comprised of Local Councillors and Partnership Officers. The event continues to grow in size and popularity and is now firmly established in the care home social calendar. The second East Ayrshire Care Home Olympics event was also held at the Kilmarnock Athletics arena, with contestants from all eighteen care homes taking part. Participants showcased their skills in a variety of sporting challenges and competed fiercely, demonstrating that age is no barrier to physical activity, achievement and enjoyment.



A Silver Pride conference was held in June 2024, which brought together 30 organisations and over 180 people from various sectors including the community, health, and social care. This gathering celebrated inclusivity and diversity, highlighting the importance of supporting and empowering marginalised groups.

Attendees engaged in meaningful conversations about fostering a more inclusive society, sharing resources and collaborating on projects that promote equality and understanding across all communities. The conference served as a powerful reminder of the strength found in diversity and the collective effort required to ensure a more equitable future for everyone. 229 Social Care Workers from across East Ayrshire have since completed associated informal training which originated from this event.





Within the reporting period, the East Community Mental Health Team (CMHT) recruited two Health and Wellbeing Assistants on a full-time permanent basis to undertake physical health monitoring of patients open to the team. The CMHT have also established clinics which operate on a weekly basis for a variety of physical health checks, blood monitoring procedures and side effects monitoring. These include a clinic specifically focused on the management of patients on long-term antipsychotic medications such as Clozapine and Antipsychotic Depot medications, in addition to monitoring of stimulant medications prescribed for the management of ADHD. Within the clinics, staff are able to assertively reach out to patients who find it difficult to attend appointments or engage in looking after their physical wellbeing. On average, 25 clinic appointments are offered weekly across East Ayrshire to ensure positive health outcomes for people with complex mental health presentations who are prescribed psychotropic and stimulant medication.

Getting it right for everyone (GIRFE) is a multi-agency approach that places people at the centre of decisions regarding their health and care, ensuring that support is coordinated, person-centred, and based on early intervention to improve health and social care outcomes.

The East Ayrshire HSCP was previously one of eight pathfinders in Scotland that locally piloted GIRFE, which included testing the approach within its delivery models and comprised four main workstreams: Frailty; Primary Care; Recovery; and Justice. This co-design process incorporated four stages:

- **Discovery** - Journey mapping and sensemaking sessions held with lived experience participants and carers to identify key challenges;
- **Ideation** - Collaborative sessions in which participants generate ideas based on system challenges, with five sessions held across the workstreams with community and staff groups participating;
- **Prototyping** - Development of tools and testing prototypes such as care coordination models, with five prototype design sessions and four user testing sessions held; and
- **Continuous Feedback Loop** - Findings from East Ayrshire were integrated into national reports to identify common themes across Scotland.



As part of this work, a prototype test of change was undertaken to introduce the 'Near Me' video consulting service to HMP Kilmarnock for people receiving Opiate Replacement Therapy. This was found to have positive outcomes for most people with planned liberations, to improve continuity of prescribed medications, and to strengthen collaboration between RADAR and HMP Kilmarnock staff, with expansion to other clinical areas planned. The HSCP continues to collaborate with the Scottish Government and other areas to implement and expand prototypes locally, including utilising the Scottish Government's GIRFE toolkit to support implementation work and sharing our progress and findings.

National Outcome 8:

- **Health and Social Care Services contribute to reducing health inequalities**

East Ayrshire HSCP Strategic Priorities:

- **Starting Well, Living Well & Dying Well**
- **People at the Heart of What We Do**

Our Performance



Male life expectancy at birth increased slightly between 2021-2023 (75.2 years)



Female life expectancy at birth decreased slightly between 2021-2023 (78.6 years)



Rate of early death from cancers remained static at 150 per 100,000 population



Rate of early death from Coronary Heart Disease increased slightly from 69 to 71 per 100,000 population

Delivering our plan & What matters to you

The Ayrshire Out of Hours Social Work team continued to deliver critical services for Ayrshire residents 365 days a year, including weekends, evenings and all public holidays. Throughout 2024/25, the team responded to 9,455 referrals, with 3,353 of these being in relation to

East Ayrshire residents. The peak times for referrals were between 5pm and 11pm, within which 1,410 of the East Ayrshire referrals were received. The peak days for referrals were Friday, Saturday and Sunday, which accounted for 1,801 of the East Ayrshire related referrals received in this period. Of the 3,353 East Ayrshire referrals, 37% were in relation to a child concern / welfare issue, 11% related to an adult concern / welfare issue and 11% related to young people missing from home.

The team maintains strong working relationships with partner agencies, including: Police Scotland, Out of Hours Housing services, Out of Hours GP services, District Nurses, Children's Houses, the Care at Home service and colleagues within the Risk Management Centre. Some examples of this partnership working includes:

- working closely with Police Scotland regarding missing adults and children;
- supporting a young mother to get to the local maternity unit when there was no public transport, in addition to supporting her partner to attend the birth;
- assisting a young person who required urgent mental health support during the out of hours period by working with Health colleagues to ensure she received appropriate care, guidance and reassurance during a distressing time; and
- ensuring residents had access to a Mental Health Officer during the out of hours period.

The team's resilience and importance were particularly evident during Storm Eowyn, as they continued to provide vital emergency support while working closely with colleagues to ensure the safety and wellbeing of vulnerable local residents.

The Financial Inclusion Team (FIT) have continued to deliver income maximisation services for the residents of East Ayrshire throughout 2024/25. During this period, the FIT focused on three core models: Child Wellbeing; Employability; and Health, however due to non-recurring funding and budget restraints, some projects under these models came to an end. In the 2024/25 financial year, the FIT managed 1,671 referrals, resulting in a total of £5,589,628 in financial gains for East Ayrshire residents.



Under the Child Wellbeing model, the Early Years project supported Health colleagues working with families and young children to ensure their income was fully maximised. The project worked with families with children from pre-birth to pre-school and referrals were received directly from Health Visitors through an agreed referral pathway. Between April and September 2024, the Early Years project assisted 83 families with financial gains totalling £637,510.

Under the Employability model, the Employability team continued to support unemployed people, lone parents and low income households through self-referrals and referrals received from other agencies such as Employability partners. The project supported clients with income maximisation as well as breaking down barriers to allow people to move into positive financial destinations. During the reporting period, the Employability project received 128 referrals, with financial gains of £226,853 generated for 101 people and families. The In-Court Advice team assisted members of the public involved in civil court cases, providing advice and representation for people subject to court proceedings in relation to their tenancies, primarily due to rent arrears and facing the threat of eviction. The team also assisted with simple procedure cases up to September 2024. In 2024/25, the In-Court Advice team received 260 enquiries and accepted 111 new referrals, resulting in £18,049 being generated in financial gains, in addition to the team assisting people with £336,978 of debt.

CASE STUDY



A local authority tenant was struggling to make payments to her rent account due to an earnings arrestment that was in place due to council tax arrears. In-Court Advice worked closely with the client and assisted with stopping the wage arrestment and instead set up an affordable payment arrangement. This allowed the client to then cover her rental cost and set up a payment arrangement for rental arrears. As well as assisting the client with her earnings arrestment and arrears, it was discovered that the client's income was not fully maximised and advice was given on how to claim Scottish Child Payment.

CASE STUDY



Mrs A was 5 months pregnant and was looking for assistance and advice to overcome the employment barriers she was facing to allow her to be able to sustain employment. She was contracted to work 36 hours a week however was often having to work 42 hour weeks due to staffing issues. Mrs A was looking

to reduce her hours, however needed assistance on how this would affect her income and was looking for benefit entitlement checks. The barriers Mrs A was facing was the number of hours worked per week, public transport issues which were increasing her working day by a further two hours and child care for when her child was born.

The Financial Inclusion Officer made contact with Mrs A and carried out "what if" calculations. The calculations showed what her income may be if she was to reduce her hours to part-time and what benefits this would then entitle her to.

A breakdown was provided of what her wages may look like based on a 16 hour week and what her Universal Credit entitlement would be both before and after her child was born. Statutory Maternity Pay projections were also provided to show both full-time and part-time equivalents. A breakdown of Scottish benefits were also provided to the client including Best Start Grant payments and Scottish Child Payment. The information provided to Mrs A empowered her to make a more confident decision and allowed her to be able to sustain her employment. Once fully informed, she was able to claim Universal Credit and Scottish Benefits once her child was born to maximise her income.

Under the Health model, the Communities team (EA Money), continued to support East Ayrshire residents over the last year through referrals received from the EA Money website, EA Money phonenumber, the Liquidlogic social work system and other sources.

The Community team worked with people to assist with income maximisation and undertook home visits to assist vulnerable people with benefit issues. Over 2024/25, the EA Money helpline assisted 1,318 East Ayrshire residents. Following triage, 442 referrals were made to the Communities team, generating financial gains totalling £1,516,485. The Macmillan project supported people living with cancer through self-referrals and referrals received from Cancer Nurse Specialists, to ensure that their income was fully maximised to ease the financial burden that can occur following a cancer diagnosis. In 2024/25, the Macmillan project received 504 referrals, resulting in financial gains of £1,033,793 for people.



The CVO has delivered a number of community hubs across East Ayrshire during 2024/25, including: Community Routes in Cumnock; Our Wee Place in Shortlees; Irvine Valley Community Hub in Galston; Open

Doors in Kilmarnock; and GRAFT in Kilmarnock. The community hubs provide a space for numerous social, employability and developmental activities and group work such as Cultural Connections, knitting, wellbeing, craft and music groups. In addition, they are also available for other third sector and partner agencies to deliver local outreach services.

Attendee:

"When I got to Open Doors the welcome was so nice and they were really friendly and they gave my children a treat, a drink and a book. I remember coming home with the parcel, putting the food in my cupboards and it felt like they were nearly full...it lifted a weight off my shoulders until I got paid from work again"

Attendees:

"Wow! This initiative has been a huge success. Patients feel relaxed coming to their appointments. It is so convenient for patients and staff to seek support"

The Irvine Valley Hub was opened within the reporting period and undertakes a partnership approach to providing various opportunities and resources for local residents and people from surrounding areas, particularly those impacted by poverty, unemployment, and social isolation. The Hub also provides opportunities for developing other local third sector organisations to realise shared benefits to ensure that no one is left behind, and there is also an open, flexible space for community use.

The Dalmellington Community Health Hub opened in October 2022 and following a two-year pilot, now provides a fortnightly service held on Wednesdays in the Dalmellington Community Centre, where a range of NHS, HSCP and third sector organisations offer appointments and drop-in services.

Throughout 2024/25, the Hub continued to host a range of wrap around services, with: diabetic eye screening, Community Treatment and Care Nurses, Quit your Way (smoking cessation), weight management, Vibrant Communities, oral health, and Feet First (foot care service) all delivering from the Hub on a regular basis. Furthermore, there has been a notable expansion of the range of services offered at the Hub over the last year, including: The Zone, Megan's Space, a carers group, the HSCP's Front Door Service, alongside several others. NHS Ayrshire and Arran also maintain a dedicated webpage for the Dalmellington Community Health Hub with a calendar of the services available.

National Outcome 9:

- 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 well-being

East Ayrshire HSCP Strategic Priorities:

- Starting Well, Living Well & Dying Well
- People at the Heart of What We Do

Our Performance



36% of carers feel supported to continue their caring role, up from 27.6%

Delivering our plan & What matters to you

Unpaid carers provide a selfless and invaluable service to relatives and friends, whom may be dependent on their frequent support to fulfil daily tasks and to enjoy a good quality of life. This responsibility is commonly considered a part of everyday life for many people, however some may not recognise themselves as a 'carer', which could mean that they may not be aware of, or receive available supports that could help them in their caring role. Research indicates that three in five people will become carers at some point in their life and that one in ten people are already fulfilling a caring role, which underlines the significance of supporting people who undertake such essential duties.

Supporting unpaid carers in East Ayrshire to carry out their caring role and to look after their own health and wellbeing while doing so, is a key priority for the HSCP, and is reflected in our strategic commissioning intension 'People at the Heart of What We Do'. Working collaboratively with local third sector organisations has remained central to achieving this during 2024/25.

The East Ayrshire Carers Centre continues to be a key partner which provides valuable assistance for both adult and young carers across the authority. The activities and supports delivered throughout 2024/25 were wide ranging and included:

- 7,510 instances of 1:1 support for adults;
- 21,266 instances of 1:1 support for young people;
- completing 602 Adult Carers Support Plans;
- completing 46 Young Carers Statements;
- 673 new adult registrations;
- 137 new young people registrations;
- 462 benefit applications completed on behalf of adult carers;
- delivering weekly age specific respite groups in Kilmarnock, Cumnock, New Cumnock and Dalmellington, incorporating various supportive, training and social activities, in addition to hot meal provision;
- delivering themed training sessions and employability opportunities;
- provision of information, advice, resources and signposting to other organisations;
- undertaking outreach work, including home visits;
- coordinating special events including day trips, parties, BBQs and festive celebrations;
- gifting Christmas presents to 420 young carers and their siblings;
- 135 successful Blue Badge applications;
- 296 adult carers supported to access the Time to Live Fund to get short breaks from their caring role;
- working within schools to address stigma experienced by young carers and to raise awareness of the challenges they face, and identifying 'Carers Champions' (named Teachers) within each school in East Ayrshire.

These supports have delivered numerous positive outcomes for unpaid carers in East Ayrshire over the last year, including: reducing social isolation; increasing carers' confidence, resilience and self-esteem; improving health and wellbeing; reducing levels of stress and anxiety and improving financial circumstances, collectively empowering carers to enjoy a better quality of life while caring.



The East Ayrshire Carers Centre continued to have Hospital Discharge Carer Link Workers based in University Hospitals Crosshouse and Ayr, in addition to regularly working from East Ayrshire Community Hospital and Biggart Hospital during 2024/25. Their role is to support carers to understand their rights under The

Carers (Scotland) Act 2016, ensuring they are fully involved in the planned discharge of their loved ones. Supporting carers to understand the discharge process also helps them to identify what assistance they may need from statutory and voluntary services to enable them to provide sufficient care and support, and to live a full life alongside their caring role. This also supports their wellbeing and contributes towards preventing readmission. The Link Workers held 908 informative conversations with East Ayrshire residents in the hospitals during the last year, resulting in 148 new registrations for unpaid carers to get the support they needed to start or continue a caring role.

The East Ayrshire Carers Centre also continued to network with a range of local organisations during the reporting period, including: Citizens Advice, The Zone, YiP World, Kilmarnock Railway Heritage Trust, East Ayrshire CVO, NHS Ayrshire and Arran, Developing the Young Workforce, Ayrshire Colleges and Skills Development Scotland, which led to and strengthened established referral pathways.

Unpaid Carer:

"I've made so many good pals at the weekly support groups, it's my lifeline. I go home ready to face the week!"

Unpaid Carer:

"It's the highlight of my week, those two hours where I can simply escape, have a cup of tea, and engage in meaningful conversations with others"

CASE STUDY



Mr. S, a young person who cares for his mother with epilepsy, plays a vital role in providing her with emotional support. He is protective of his mother as she struggles to control her seizures. Her neurodiversity also brings various complications, so he ensures that people are patient with her. Additionally, he makes

an effort to understand and empathise with her feelings. He has attended weekly young carers groups in recent years and recently joined an additional music group. It has been remarkable to witness his growth in confidence. Initially, he was reserved and hesitant to sing or participate in dancing, however in recent months he has progressed significantly. He now has solos in shows and actively participates in the dances. Moreover, he has become more comfortable and engaged in group conversations, even helping others when he notices someone struggling.



CASE STUDY



Mrs. Q, an older adult carer, who was feeling isolated due to a decline in friendships as a result of her caring role, attended a registration session and chose to be supported to complete an Adult Carer Support Plan. Her feelings of loneliness meant she wanted to connect with other carers who shared

similar interests. To achieve this, she began attending support groups in Kilmarnock every Tuesday. These sessions proved to be a source of great joy and fulfilment for her, as she has formed meaningful friendships and taken part in activities that have supported her wellbeing.

The HSCP's Thinking Differently team also have an important role in supporting unpaid carers in East Ayrshire and a range of work was taken forward throughout 2024/25 to deliver on this. The Thinking Differently team and key partners including the East Ayrshire Carers Centre, continued to engage through the Partnership Working Group over the last year, with the aim of promoting improved partnership working and process links between the local authority and third sector partners in relation to delivering Self Directed Support to ensure supported people and carers receive the right support at the right time. The team have also continued to strengthen relationships and work closely with professionals and partners such as: Social Work colleagues, Health colleagues, East Ayrshire Carers Centre, Shared Care Scotland, Coalition of Carers, and other community partners, to support our unpaid carers and meet the needs and outcomes outlined in the legislation over the last year.

This has included regularly engaging with carer groups across East Ayrshire. They are also well connected to the changing policy context and attend national Self Directed Support and Care Lead meetings, frequently sharing updates with wider teams within the HSCP.

The team have also worked closely with the Personal Outcomes Network and Matter of Focus to review our current practice in relation to personal outcomes, strength based and community led approaches and Self Directed Support, to inform and embed good practice across the Partnership in a backdrop of significant capacity and financial challenges. This work has involved a number of themed workshops and meetings with staff to assess current circumstances and co-produce a refreshed approach for how local social work practice and 'changing the conversation' can contribute towards improved outcomes for supported people and unpaid carers in East Ayrshire. Phase 3 of this work concluded in 2024/25, with key findings including: strong support for outcome focused, strength-based practice, the need for more opportunities for sharing experiences and reflecting on practice, the need for long term investment in culture and systems and the need to record and understand outcomes more consistently.

Member of staff:

"Forms could be more focused on what matters to the person, not what service they are receiving"



The Thinking Differently team have led on developing the new East Ayrshire Carers Strategy during the reporting period, which has been informed by comprehensive consultation with stakeholders and overseen by a dedicated working group with representatives including: three unpaid carers, Education, various independent organisations, Social Work staff, Scottish Care, Coalition of Carers, the Alcohol and Drugs Partnership and NHS Ayrshire and Arran. Consultation on the draft East Ayrshire Carers Strategy took place between March and April 2025 through a multi-faceted approach including online, in-person, targeted and light-touch engagement to encourage and generate meaningful feedback from stakeholders, with a particular focus on targeting: unpaid carers, people who use our services, staff, governance groups, third sector organisations and the wider public. Some findings from this consultation included: overall support for the priorities identified, however with the need for more clarity regarding the associated actions; concerns around delivering the Strategy in the current financial climate; the need for more clear information on services and supports available for carers; and consideration regarding the range of constraints faced by carers. Going forward, the Thinking Differently Team will support the associated Delivery Plan and will continue to raise awareness of unpaid carers in the HSCP and within the community.

The East Ayrshire Independent Sector Lead, in partnership with Age Scotland and the HSCP's Engagement Officer, coordinated a series of dementia-friendly conversations across our three localities in 2024/25, aiming to engage with people who provide informal care within local areas.

These discussions highlighted the importance of understanding the unique challenges faced by caregivers, such as the need for flexible support services, access to respite care and the availability of resources tailored to the specific needs of people with dementia. Participants emphasised the value of creating a supportive network that fosters communication and collaboration among caregivers, healthcare professionals and community organizations. The Partnership is focused on enhancing such supports by developing targeted initiatives that address these needs, ensuring that carers receive the recognition, resources and assistance they require to continue their vital role in the community. Our sustained emphasis on strong interagency working has significantly bolstered relationships across health and social care sectors in recent years, fostering a collaborative environment that benefits our communities and residents. By integrating services and encouraging open communication amongst agencies, we have created an established network of support that addresses the diverse needs of our population. This collaborative approach has led to more efficient resource allocation, reduced duplication of efforts and improved outcomes for people requiring care and their relatives and carers.

National Outcome 10:

- **People using health and social care services are safe from harm**

East Ayrshire HSCP Strategic Priorities:

- **People at the Heart of What We Do**
- **Safe and Protected**

Our Performance



75.8% of adults supported at home feel safe, up from 73%



Falls rate has increased from 19 to 21.3 per 1,000 65+ population

Delivering our plan & What matters to you

Public protection matters in East Ayrshire continue to be overseen by a Chief Officers Group, which comprises the following representation: the Alcohol and Drugs Partnership (ADP), the Child Protection Committee (CPC), the Adult Protection Committee (APC), the Protection and Learning Team, the Violence against Women Partnership (VAWP) and the Multi Agency Public Protection Arrangements (MAPPA) Oversight Group.

Multi-Agency Public Protection Arrangements (MAPPA) is a statutory framework which joins up the agencies responsible for managing the risk posed by people who are Registered Sex Offenders, Restricted Patients and other violent offenders who pose a risk of serious harm to the public.

The Management of Offenders etc (Scotland) Act 2005 places a statutory duty on Police, Local Authorities, the Scottish Prison Service and the NHS to establish joint arrangements for assessing the risk from sex offenders including the effective sharing of information. Health Services are included in relation to Mentally Disordered Restricted Patients.

The East Ayrshire Social Work Justice Service is responsible for managing people while they are subject to statutory supervision. Once this process ends, the Police become the lead agency and together, they provide robust risk assessments and management plan to address the identified risks. Our Justice Social Work services work closely with people to address their harmful behaviour to reduce the risk of future offending through robust risk management plans, along with partners to ensure community safety. The three management levels in MAPPA are:

- **Level 1** - Routine Risk Management (mainly single agency);
- **Level 2** - Multi-Agency Risk Management; and
- **Level 3** - Multi Agency Public Protection Panels.

Those managed under these arrangements may be in custody or in the community. There was a total of 10 MAPPA referrals received in 2024/25, of which 1 was not progressed and there were no repeat referrals. In the reporting period, there were 89 Registered Sex Offender (RSO) notifications received, averaging 23 per quarter, and of these, 88% were new cases to MAPPA.

The Ayrshire MARAC commenced operationally in August 2022 and has continued to make a significant contribution to improving the safety of victims of domestic abuse at risk of significant harm or death across Ayrshire throughout the last year. There are three local MARAC meetings, with one in each of the Ayrshire local authority areas, which are centrally and consistently supported by the MARAC Coordination Team. In East Ayrshire, all agency representatives including: Education, Police Scotland, Housing, Women's Aid, ASSIST, Children and Young Peoples' services, Adult services, Justice services, Health services and the Scottish Fire and Rescue Service, continue to support the local meetings and several new agency representatives have been trained and supported to join the MARAC during 2024/25.

MARAC meetings take place monthly in East Ayrshire, with 12 being held in 2024/25 and 155 cases referred over this period (vast majority related to females).

The Ayrshire wide MARAC Governance Group provides strategic direction from MARAC leads. This Group meets quarterly and reports into the East Ayrshire Violence Against Women Partnership. In addition, a local Agency Representatives Group has continued to meet after every East Ayrshire MARAC to provide support to representatives and allow a two-way feedback process to the MARAC Coordination Team. This local Group meets quarterly and can also convene as required to support the agency representatives. The programme of local MARAC training has now become an integrated part of the East Ayrshire Violence Against Women Partnership annual training calendar.

A number of developmental and improvement activities have taken place throughout 2024/25, overseen by the MARAC Governance Group. Following a reflective learning and development session in June 2023, an action plan was developed to support identified improvements. Actions completed in 2024/25 include: improving the interface between MARAC and Adult Support and Protection; improving the alignment of MARAC and Safe and Together; and expanding MARAC learning opportunities to a wider group of agencies across Ayrshire. Work relating to numerous other improvement actions has also continued, including:

- gathering information to understand the impact of the MARAC process for people;
- improving the MARAC information flow with Primary Care services, including MARAC markers;
- developing local perpetrator mapping and intervention tools in respect of MARAC risks;
- exploring and increasing local confidence in relation to specific risks and safety involving perpetrators and repeat referrals; and
- developing a proportionate programme of regular self-evaluation and quality assurance work to support improvements in MARAC practice and governance.



- Progress activities to create cultural change around VAWG within key community settings; and
- Deliver sustainable, informed and safe specialist and universal service responses.



The East Ayrshire Violence Against Women Partnership (EAVAWP) continued to contribute towards the outcomes set out in the national Equally Safe Strategy for preventing and eradicating violence against women and girls throughout 2024/25. The EAVAWP continues to comprise a proactive and comprehensive group of members to collaboratively take forward key work. Some examples of actions undertaken over the last year are set out below.

The EAVAWP's new Strategic Plan covering 2024-27 was developed in 2024. This work was informed by self-assessment activities supported by the Improvement Service and comprehensive stakeholder consultation which included Practitioners and women with lived experience, resulting in the identification of four priority themes for the Plan:

- Undertake a strategic needs assessment to gain a better understanding of the prevalence and impact of VAWG on our communities, what support is available and where there are key areas of unmet need;
- Create meaningful and trauma-informed opportunities for victims and survivors of VAWG to play a key role in shaping and monitoring the work of EAVAWP;



The international campaign of 16 Days of Action to Eradicate Gender Based Violence ran between 25 November and 10 December 2024 and a number of activities were delivered in East Ayrshire to mark this campaign locally. White Ribbon events commenced on 25 November with the launch of East Ayrshire's White Ribbon campaign, which was supported by ScotRail and the British Transport Police. The public engaged well with the event held at Kilmarnock Train Station, which saw hundreds of pledges being made to never condone, commit or remain silent about violence against women.

As part of the commitment to engage with the community, the 16 Days of Action Planning Group undertook work with young people to raise awareness of gender-based violence, which was led by the Star Centre: Rape Crisis Ayrshire, East Ayrshire Women's Aid and Police Scotland. Staff from the Star Centre: Rape Crisis Ayrshire team in collaboration with East Ayrshire Women's Aid, visited SL33 in Kilmarnock to engage with young people to discuss gender-based violence, culminating in the creation of vibrant posters. A similar workshop took place at SL66 in Cumnock, where young people also expressed their hopes for a violence-free world through poster making. East Ayrshire Women's Aid also delivered a gender-based violence session at The Hive in Cumnock, which resulted in three gender-based violence videos being made for the 16 Days of Action campaign. Police Scotland engaged with young people during the 16 Days of Action across four of East Ayrshire's education establishments, with S6 pupils participating in White Ribbon signing pledges. The Reclaim the Night march also took place in Kilmarnock on 26 November 2024 and was well attended by members of the public and representatives from: Police Scotland, Star Centre: Rape Crisis Ayrshire, Scottish Fire and Rescue Service, East Ayrshire Women's Aid, the HSCP, the Environmental Service and Elected Members, with approximately 80 people participating in the event.

Attendee:

"My boy understands why it is important for women to reclaim the night. He is part of the change, he will talk to his friends and call them out if need be"

As with several other areas across Scotland, East Ayrshire has experienced a notable rise in drug-related deaths over the last decade, with our local rates having remained consistently above national levels. 31 people in East Ayrshire died as a result of drug misuse during 2023, which is a slight increase from the previous year (30). Evidence indicates that drug-related deaths in East Ayrshire occur frequently in males aged between 35 to 44, and are often associated with a combination of drugs and health conditions.

A wide range of substance misuse prevention and early intervention work is well established in East Ayrshire, including the East Ayrshire Suspected Drug Death Review Group, which continued to meet regularly during 2024/25 to assess the circumstances within each death to identify any critical themes, patterns or service gaps to inform future local prevention activity.

Further to the work highlighted within Outcome 4 above, a range of targeted activity has been undertaken within East Ayrshire over the last year in response to this concerning trend. Operating from the North West Kilmarnock Area Centre, RADAR is a collaborative effort involving NHS Addiction Services, We Are With You, Ayrshire Council on Alcohol, and East Ayrshire Advocacy Services. This multi-agency approach allows for a comprehensive assessment and tailored support plans that address the unique needs of each individual. The service is accessible to anyone concerned about their own or someone else's drug and/or alcohol use, with referrals accepted from people, families, and professionals.

Ongoing collaboration between the East Ayrshire ADP, the HSCP and third sector organisations has strengthened referral pathways across the East Ayrshire Recovery Network, and has enabled an increase in people receiving timely and appropriate interventions in line with the MAT Standards. Community engagement events and naloxone training sessions have also been facilitated, further promoting a harm reduction approach. Data collected from those using drug and alcohol services has seen significant improvements when analysing using a human rights based approach template (FAIR Model, AAQ and PANEL Principles), with many highlighting the relatability and approachability of Peer Workers as crucial to both engagement and the progress achieved. This evidence will inform improvement plans where there is a desire to expand outreach efforts and strengthen the role of lived experience within service delivery at operational and community levels. The ongoing work through the Peer Outreach Workers continues to demonstrate the value of a compassionate, community-based approach in addressing challenges associated with alcohol and drug use in East Ayrshire.

A notable achievement of RADAR is the Near Me digital platform, developed in partnership with HMP Kilmarnock and NHS Ayrshire and Arran. This initiative provides people in custody with access to virtual support sessions, bridging the gap between being in prison and preparation for reintegration into the community. The platform has been recognised for its innovative use of technology to support individuals on their recovery journey, ensuring continuity of care and reducing barriers to access through a recent Health Award with Digital Lifelines.

The EACH Recovery Matters initiative provides the support and resources that people require to successfully navigate their recovery journey. Its aim is to promote and develop visible recovery groups within East Ayrshire, including activities and opportunities to volunteer and obtain new skills. The initiative continued to deliver a volunteering programme during 2024/25, which provided opportunities for those engaging to become part of the wider recovery community through various events and training available.

EACH Recovery Matters has developed a new Digital Engagement Strategy in partnership with Digital Lifelines, which has been introduced to support people by making digital devices and connectivity more accessible, in addition to delivering a weekly digital inclusion support workshop. In 2024/25, the initiative contributed towards national policy consultations and also considered plans to develop a 'one stop shop' service in Kilmarnock working with partners across sectors.

In terms of impact achieved for people, service user feedback indicates high levels of satisfaction and improved wellbeing following engagement with the Recovery Workers and Peer Outreach Workers based at the EACH Recovery Matters Hub. Going forward, the initiative aims to build on this momentum by exploring new funding opportunities, as well as increased opportunities for women in recovery through its successful women's day group.

The ADP has also been involved in various other pieces of work to support people affected by substance misuse during the reporting period, including:

- coordinating an annual ADP conference in December 2024, attended by Practitioners, Managers, members of the public, third sector providers, and people with living/lived experience met to discuss opportunities for extending and improving joint working to enhance service provision;
- supporting people with lived and living experience in 'getting ready to work' programmes;
- co-delivering a recovery football tournament, demonstrating the power of lived experience in promoting wellbeing, reducing stigma and building inclusive recovery networks across East Ayrshire;
- holding an event to mark International Overdose Awareness Day, which raised awareness of overdose and support services available, in addition to providing a platform for people to remember loved ones who sadly passed away due to overdose; and
- utilising a quality improvement framework to support the implementation of a Suspected Drug Death Review Group data set.



There has been a continued rise in the number of probable suicide deaths in East Ayrshire in recent years, with the local 5-year aggregate rate having increased from 14.6 between 2015-2019 to 19.1 per 100,000 population between 2019-2023. Caution should be taken when interpreting patterns in probable suicide statistics, however this remains an area of significant attention both locally and nationally to improve preventative approaches.



In response to this concerning trend, a wide range of suicide prevention activity was undertaken in East Ayrshire by the Council's Health and Safety team, Vibrant Communities, the HSCP, NHS Ayrshire and Arran, and partners throughout 2024/25, including:

- ongoing promotion of the East Ayrshire Here to Listen campaign, with 353 suicide interventions delivered to date;
- the Suspected Suicide Review Group met regularly to assess probable suicide cases to identify contributory circumstances and provision gaps to inform future prevention work;
- ongoing promotion and maintenance of the East Ayrshire Suicide Prevention website, which contains key information including contact details for: Mental Health Practitioners, local GP Practices, Suicide First Aiders and other supports;
- the HSCP's Suicide Prevention Lead Officer continued to progress numerous local suicide prevention activities through a closely monitored action plan;
- Penumbra continued to help East Ayrshire residents by offering 1:1 support and guidance for people who have lost someone to suicide;
- formation of the Creating Hope Together peer-led bereaved support group;
- distribution of prevention material in the prison setting, including the East Ayrshire Wellbeing booklet and the Staying Well in Prison booklet; and

- 78 East Ayrshire HSCP staff have attended various pan-Ayrshire suicide prevention training courses in the last year, including safeTALK, Skilled Suicide Prevention and ASIST.

Our Adult Learning Disabilities Women's Empowerment Group was established in 2022 and has since supported women with learning disabilities to make informed choices while promoting personal safety, happiness and healthy relationships. The Group aims to raise awareness and develop essential life skills to help adults with learning disabilities protect themselves from harm.

Attendees:

"It's really helpful getting to talk to people about my worries"

"You will be so proud of me, I stood up for myself"

The Group is facilitated by a Support Assistant and provides a safe space to share concerns, ask questions and gain the confidence to manage challenges more independently. Through discussions and education activities, the Group has focussed on the following areas over the last year:

- prevention and early intervention;
- reducing the number of Adult Concern reports related to relationships;
- supporting people in making positive decisions in difficult situations;
- raising awareness of and reducing risks related to domestic violence;
- building trust in services and identifying potential risks;
- highlighting risks and community issues to professionals; and
- raising awareness about the importance of early detection in relation to health matters.

National Outcome 11:

- **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**

East Ayrshire HSCP Strategic Priorities:

- **Caring for Our Workforce**

Our Performance



63.1% of Personal Carers are qualified to SSSC standards, up from 61.5%

Delivering our plan & What matters to you

We aspire to have the right people with the right skills to deliver services in the right place at the right time, which collectively are crucial to achieving the best possible outcomes for people. The Partnership's new Workforce Plan 2025-28 was published in 2025 and outlines how we will fulfil the national ambitions of recovery, growth and transformation of the Health and Social Care workforce in East Ayrshire over the period. The Plan maintains a focus on several key areas, including: supporting the wellbeing of our workforce, attracting skilled people to work in the organisation, retaining experience in the workforce, and investing in learning and development. The Plan also reinforces the integration of health and social care services by promoting multi-disciplinary collaboration, strategic recruitment, continuous skills development and strong leadership. The core actions comprised within the new Workforce Plan remain aligned to the five Pillars of the workforce journey set out in the

National Workforce Strategy for Health and Social Care: Plan; Attract; Train; Employ; and Nurture.

It is important for us as an organisation to reflect on what we consistently do well, however it is also crucial to proactively identify areas for improvement to ensure we attract and retain the best possible workforce in line with our continuous improvement ambitions. Workforce surveys provide evidence to inform this process in terms of key improvement themes, including how our staff feel about their role, their department, the wider organisation and those leading it.

1,645 staff across the Partnership participated in the most recent local workforce survey (iMatter) in 2024, with an overall 59% response rate (down from 64% in 2023). The responses received suggest that the majority of our workforce have a positive experience of working for the East Ayrshire Health and Social Care Partnership, with an overall employee engagement index score of 78 (out of 100) having been achieved.

High scores were recorded in a number of areas including: direct line managers being sufficiently approachable, employees being clear about their duties and responsibilities, management caring about employee health and wellbeing, and employees being treated with dignity and respect. Areas identified for improvement include employees being involved in decisions relating to the organisation, and visibility of board members, which have been consistent themes highlighted for improvement in recent years.

A focus has been retained on increasing the proportion of staff with a completed annual Personal Development Review over the last year across both Council (FACE) and NHS (PDR) services, following a sustained period of decline. Throughout 2024/25, the percentage of NHS staff with a completed PDR has gradually increased towards the set target, while the percentage of Council staff with a signed-off FACE review has remained relatively static over this period, with both cohorts maintaining a notably higher level compared to previous years.



48
employees
completed
the Coaching
Programme

33
employees
completed
one of the
Leadership
programmes

East Ayrshire Council continues to provide Organisational Development (OD) support for HSCP employees. A number of bespoke OD events and programmes were delivered to both Social Work and NHS teams within the Partnership throughout 2024/25, including DISC development sessions, Wellbeing and Resilience development sessions, Team Coaching and various other development sessions including for the Partnership Leadership Team. During this period, Council employees within the Partnership were supported to identify

and access all relevant learning and development opportunities during supervision and within their FACE Time annual review and development process. All employees have access to a wide range of skills development and development courses including face to face and online learning, all of which are aligned to our FACE qualities and behaviours.

The Coaching programme, which promotes a relational way of working by empowering the people we serve, was well attended by HSCP employees. Attendance across our Leadership programmes has also been positive and supports the aims of the Workforce Plan in recruitment and succession planning in terms of leadership roles.

Two new Leadership programmes were introduced in 2024/25: Step into Leadership (for aspiring Line Managers) and Leading with Impact (for experienced Line Managers). In addition, OD worked collaboratively with colleagues in Social Work Learning and Development to deliver a First Line Management programme across the Children's Health, Care and Justice service. Attendees highlighted the benefits of bringing key leaders together across the full service.

Attendees:

"The programme allowed me to develop peer relationships with other managers"

"Learning at all levels should be continued [with] mixed groups of leaders learning from one another"

OD have continued to provide support and advice to working groups during the reporting period, including the MDT Working Group and GIRFE Working Group. A co-ordination role is also undertaken by OD in respect of our 3 localities-based Communities of Practice (COPs) which have a growing and diverse membership. The COPs aim to facilitate the advancement of MDT working in service delivery across East Ayrshire by providing a space for workers to meet, learn and share together.

The Care at Home service continues to exemplify our commitment to ensuring that our workforce is fully supported and sufficiently skilled to deliver a high quality service. Our Care at Home service has continued to lead and direct the Social Care Learning Hub and explore new and innovative ways to create pathways for people into Social Care as a career, particularly within the HSCP and also in supporting our external providers. Relationships with Ayrshire College have continued over the last year, however changes to how the College now delivers its health and social care programmes have meant that the scale of joint programmes has been reduced. Through the Education Pathways Group and in partnership with our employability colleagues, the HSCP is currently exploring employability options, such as Modern Apprenticeships specific to Social Care. Subject to funding, this two-year programme would be piloted in our Reablement, Intermediate Care and Care at Home South teams, supported by the Social Care Learning Hub SQA Assessment Centre and a skilled and qualified Assessor from the Employability team. If successful, this could create new, sustainable pathways into local social care.



Our Social Care Learning (SCL) Hub has continued to develop the programme of learning for the workforce across Adult and Older People services. Within the reporting period, the SCL Hub has also successfully set up a bespoke training venue in the CEVIC building in Catrine where all learning and development activity can take place within a welcoming and open learning environment. The space comprises two large training rooms, a Moving and Handling Training Suite, office space and a meeting room. All work planned and delivered in the CEVIC Building promotes the values of East Ayrshire Council: Flexible, Approachable, Caring and Empowered (FACE).

Training Attendees:

"I feel a little more excited about heading to training as this is a lovely place to come too"

"I learnt a lot today and have been a CCO for many years. New and fresh perspectives on practice helps a lot"

The SCL Hub in-house team and assessment centre continue to grow from strength to strength, with the SQA Assessment Centre having been subject to a recent inspection where all standards were met and exceeded. A busy year lies ahead for the service, with two planned cohorts totalling 40 new learners joining the centre. Collaborative work undertaken by Human Resources, the SCL Hub and the operational service has led to a supportive approach to guiding learners to complete

their qualifications, in which a new suite of standard operating procedures around recruitment, Scottish Social Services Council (SSSC) qualifications and learners' commitments were successfully applied. The SVQ teams within the SCL Hub are also working closely with Human Resources and Planning and Performance colleagues to improve data quality and how this information is collated, stored and reported. The SSSC and Care Inspectorate guidance and requirements are woven into all improvement work.

The Hub's Programme Planning Group meets bi-monthly to discuss all aspects of learning, development and workforce training needs to swiftly design and implement any changes where identified. The Group continues to incorporate all relevant stakeholders, enabling effective and accountable decisions and implementation. A Content Review Group was also established in 2024/25 to ensure all Care Inspectorate, SSSC and Care Staffing Act requirements are fully reflected within our practice. The SCL Hub has explored the use of virtual reality in training application, with the Dementia Specialist incorporating it within the course content to allow the workforce to have a greater understanding of what it is like living with Dementia. Further opportunities will be explored around experiential learning going forward into 2025/26.



The SCL Hub has continued to increase the skills and knowledge of the workforce and is having a positive impact on the standards of care and support provided to those who need it in our communities. The Hub continues to develop new ways of meeting the needs of our workforce and during this reporting period there has been development work around quality improvement and evaluation to better map learners' journeys within the Partnership. Examples of key work undertaken by the SCL Hub during 2024/25 include:

- delivered 11 x ten-day Induction courses for 98 Community Care Officers;
- supported two cohorts totalling 55 people with their SSSC qualifications, with 17 Community Care Officers having completed their qualifications and the other 38 learners nearing the end of their awards;
- reached 1,178 staff with training tailored to their needs and roles;
- delivered 25 Moving and Handling full day courses in partnership with Physicare;
- developed and implemented a new in-house Moving and Handling training programme;
- delivered 24 Safe Administration of Medication sessions in partnership with NHS Pharmacy staff;
- delivered Dementia Skilled training for 97 Community Care Officers and Play List for Life training for 86 frontline Social Care staff;
- 240 Community Care Officers attended the annual engagement sessions;
- 609 Community Care Officers attended the suite of Best Practice Days;
- organised a training session in collaboration with NHS colleagues in relation to Epilepsy, Motor Neuron Disease and Diabetes;
- ensured that 40 frontline Social Care Workers supporting people with Parkinson's had specialist training with NHS Parkinson's Nurses; and

- delivered a programme of learning and development opportunities, including: Food Hygiene and Nutrition, SSSC Codes of Practice, British Sign Language, Palliative and End of Life Care, Continuous Professional Learning, Best Practice Days, and eLearning suites on LearnPro.

Further information regarding our Health and Social Care workforce can be found in section 4 within this Report.



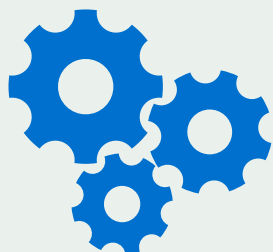
National Outcome 12:

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

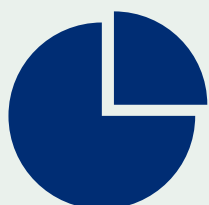
East Ayrshire HSCP Strategic Priorities:

- **Caring for East Ayrshire**
- **People at the Heart of What We Do**
- **Digital Connections**

Our Performance



70.4% of adults supported at home agree their health and care services seem well co-ordinated, up from 60%



Proportion of health and social care resource spent on hospital stays as a result of an emergency down from 29% to 26.6%

Delivering our plan & What matters to you:

Informed by evidence and best practice, the HSCP continues to invest strategically in key impact areas to utilise available resources effectively in line with our strategic objectives and the triple aim of 'better health, better value, better care'.

This has been demonstrated in a number of Locality Health and Care services throughout 2024/25. Significant preparatory work has been undertaken to procure, plan and commence the implementation of a new

scheduling, monitoring and care management system 'Totalmobile', which alongside structure and process changes will transform the way that the Care at Home service is delivered within East Ayrshire. Implementation commenced in February 2025, with full implementation scheduled for May 2025.

2024/25 has been a year of significant change within our Moving and Handling service. Following the recommendations of a working group established to review the service, major changes have been implemented to improve service resilience and capacity, and to return the staff training function to an in-house provision. The service has welcomed two new staff, who are working to meet the varied demands on this small but dynamic team. The Moving and Handling training delivered at the new facility at the Civic Centre will enable a higher volume of quality and consistent training to all frontline staff involved in the care of people in our communities.



Throughout the reporting period, the Community Occupational Therapy service has built upon the work undertaken in early 2024 to revise and update the Equipment and Adaptation criteria. The criteria were approved by the IJB alongside the review of eligibility for accessing social care and now aligns the service more closely with the national guidance, thus empowering our staff to provide clear pathways for service users. Significant work has also been undertaken by the Occupational Therapy service to revise the delivery model across different grades of staff to ensure that waiting lists are as short as possible whilst providing rapid and early intervention to maximise function within available resources.

Family Member:

"Just a wee note to say how blown away we feel as a family with the excellent second to none care and attention and total support shown to my sister and to us as a family...her understanding, compassion and professionalism has to be commended!"

The Community Equipment and Adaptations service has focused on renewing its main contracts and frameworks over the last year. Within this work, new suppliers have been secured for vital services such as stairlifts, bathroom adaptations and equipment supplies. These new contracts along with improving internal processes within the equipment store during 2024/25, have resulted in strong cost controls eliminating the budget deficit experienced in previous years. The Community Equipment service also reviewed the risk assessments and processes for the provision of bed grab handles and has commenced work to visit all individuals with this equipment to ensure they are safe and appropriately installed.

Development work to improve utilisation of the Partnership's social work information system (Liquidlogic) continued during 2024/25. The system is central to the management and storage of records for people in contact with our Social Work services. In collaboration with SystemC (Liquidlogic supplier), we continue to ensure that line of business system

processes and workflow configurations are correctly aligned with and fully support continually evolving health and social care working practices in order to meet the operational requirements of services. A key piece of work over the course of this year has been upgrading to the latest software versions. To further enhance our training portfolio, we have launched the 'MeLearning' online training product which can be designed to fully incorporate our business process workflows. In addition, we have also purchased bespoke Adults and Justice System classroom training for staff, scheduled to run across the first quarter of 2025 and to coincide with the latest Liquidlogic version upgrade in February 2025.

The Business Systems team also provide a day-to-day user support and helpdesk service to support HSCP staff in their use of the Liquidlogic line of business system, as well as providing an in-house report development and building resource. In terms of future system developments, we continue to assess further add-ons to ascertain suitability for use by both frontline staff and service users. Going forward into 2025/26, the Business Systems team will continue with its programme of improvement work, as approved by the Development Board, to build on the progress made to date.

The HSCP's finance system (ContrOCC), is fully established and integrated with the Liquidlogic Adults system universe. This provides a number of operational benefits, particularly in relation to Self Directed Supports and Residential Accommodation payments. Integration with the Children's system universe within Liquidlogic has been progressing at pace over the last year. To date, we have successfully introduced option 1 direct payments, adoption payments, fostering payments and kinship payments. An online financial assessment function is also now live, enabling an individual to input data to determine the cost of care in respect of care homes and non-residential care. Furthermore, work is also underway to introduce the Financial Protection module to support Access to Funds and DWP Appointeeship.

Our Older People's Day service continues to deliver high quality, person-centred social opportunities for older adults in East Ayrshire. Following targeted work originating from a recent review, the service is well attended to ensure effective use of resources, with both North and South Locality areas operating at over 92% of the planned occupancy rate.

To address waiting lists for the service in the North locality, afternoon care now operates in Rosebank Resource Centre, which will deliver an additional 1,248 day care places in the 2025/26 financial year.

Service User:

*"I've been coming here for a year,
it's homely, a true home from home.
Everyone is nice and it's good to be social.
I wouldn't change a thing. The staff go
above and beyond"*

The service management team have also developed service improvement activities over the last year to streamline processes, including digitising the ongoing consultation arrangements. This has been found to increase capacity for focussing on delivering the actions that service users, staff and other stakeholders identify as key to improving service delivery. In addition, the management team have sought to expand the use of Care Opinion to inform ongoing improvements within the service by seeking feedback directly from people as they attend the centres through the use of iPads connected to the Care Opinion website.



Implementation of the Partnership's Strategic Change Programmes continued to progress throughout 2024/25, with oversight from the Senior Leadership Group. This work supports the delivery of positive transformation across adult services to ensure efficient, collaborative and integrated working, with people at the heart of our decisions and processes. A range of work has been taken forward over the reporting period in respect of the Integrated Care Programme workstream, including:

- An implementation plan has been jointly developed to coordinate the implementation of multi-disciplinary teams across the HSCP, which has been enhanced by the recent Getting it Right for Everyone (GIRFE) national publication and supported by the launch of a web-based resource to consolidate development tools and best practice guides;
- The Social Work Front Door service was redesigned to test and implement a locality based integrated outreach model, which successfully provided accessible care and support at a much earlier stage, preventing escalation and crisis situations for many people; and
- Our Communities of Practice have been consolidated throughout 2024/25, with increased networking through membership, meetings and use of the online Knowledge Hub resource.

Regular health and wellbeing promotion events are now delivered at East Ayrshire Community Hospital within a scheduled programme targeting key priority themes specific to the local area. These events are delivered by a wide range of agencies, groups and volunteers, and have been well promoted, attended and received by attendees. The scope and frequency of these events is expected to increase in the near future once the Ayrshire Hospice vacates an occupied space to move to a new premises. A new local Frailty Model has also been developed, which incorporates agreed resources including national standards for frailty, best practice and measures published and tested by pathfinder/collaborative partnerships throughout Scotland. Supported by multi-disciplinary integrated teams and GIRFE resources, the launch of this model is scheduled for the end of July 2025.

A number of Health and Social Care service reviews and implementation of approved recommendations were progressed throughout 2024/25, with the aim of securing improvement by identifying more effective and efficient ways of delivering services, through a person-centred approach based on collaborative design principles. These included our: multi-disciplinary team approach at the initial point of contact for adult services; Family Support and Young People Service; Child Payments; Learning Disability and Mental Health Commissioned Services; Addictions Services; Financial Inclusion Team; Business Support; and Justice Services. The progress and outputs of these workstreams have been presented to the Strategic Commissioning Board on a regular basis, highlighting numerous evidence-based improvements and new delivery models established to enhance service provision and outcomes for people.

National Outcomes 13-15:

- **Community safety and public protection, reduction of re-offending, social inclusion to support desistance from offending**

East Ayrshire HSCP Strategic Priorities:

- **People at the Heart of What We Do**
- **Safe and Protected**

Our Performance



26.4% reconviction rate of offenders in East Ayrshire



96.1% of Community Payback Orders were successfully completed within the year



95.1% of Unpaid Work requirements were completed on time



99.3% of Community Payback Orders with a requirement of unpaid work started within one week

Delivering our plan & What matters to you:

As previously highlighted, public protection matters in East Ayrshire are overseen by a Chief Officers Group, with collaborative work undertaken by: the Alcohol and Drugs Partnership, the Child Protection Committee, the Adult Protection Committee, the Protection and Learning Team, the Violence against Women Partnership and the Multi Agency Public Protection Arrangements Strategic Oversight Group.



A range of social work professional and technical development activities covering diverse content, continued to take place throughout 2024/25, offering our Social Work staff opportunities to have professional practice discussions with a view to increasing knowledge, enhancing skills and allowing time for critical reflection of social work practice and interventions. A key area included supporting the delivery of a development programme for Newly Qualified Social Workers (NQSW) in meeting the requirements of the Scottish Social Services Council (SSSC) introduction of a mandatory first year in practice registration for NQSWs.

Attendees:

"Self-neglect is a significant aspect of my job so good to get deeper understanding and see others' views"

"I'm now far more confident with the concept of child protection"

Numerous training courses were also delivered by the Protection and Learning team within the reporting period, including: Adult Support and Protection 4-day Council Officer training, Child Protection 5-day training, and Care Managing People who Self-Neglect 1-day training, which were well-attended. However, there continues to be competing demands in supporting Social Work Practitioner development activity, particularly in terms of challenges around supporting a high volume of activities to meet SSSC mandatory requirements within available resources.

The Adult Support and Protection (ASP) Lived Experience Project, funded by the HSCP and delivered by East Ayrshire Advocacy Services, continued to grow and develop over the last year. The project aims to assess the support and protection services that adults at risk of harm and their family members/carers have received from the HSCP. This involves asking people questions about their ASP journey and anonymously recording their views and feedback to improve this process going forward, with key themes including opportunities to have their voice heard and feeling listened to. These findings also contribute towards the annual multi-agency self-evaluation of ASP in East Ayrshire. The project continues to attract interest from across Scotland, with awareness sessions delivered to the Shetland Isles and Dumfries and Galloway, in addition to an invitation to present at a national event focused on self-evaluation.

The East Ayrshire Adult Protection Committee marked National Adult Protection Day and our local ASP week in February 2025 by reminding people about the importance of taking care of the wellbeing and safety of our loved ones and of vulnerable adults within our communities.



Having Power of Attorney in place safeguards your financial wishes in the future.
Get it sorted - visit www.mypowerofattorney.org.uk to find out more.
#ASP2025 #endneglectday #endneglect



This campaign also gave details on how to report harm in East Ayrshire, in addition to further information regarding the topic and links to additional supports available for vulnerable people. Key messages conveyed related to financial harm and general awareness raising for Adult Support and Protection, with a full programme of activities being delivered by the multi-agency partners, including:

- Granicus bulletins circulated to staff;
- Two Vicarious Trauma staff sessions delivered;
- Delivery of a social media campaign, covering numerous pertinent topics such as types of harm, power of attorney and Police Scotland support; and
- Information stalls set up in East Ayrshire Community Hospital, North West Kilmarnock Area Centre, Rothesay House and the Johnnie Walker Bond for people to access information on Adult Support and Protection.



422
Adult at Risk
referrals

2,728
Adult
Concern
referrals
received in
2024/25

The East Ayrshire Adult Protection Committee Improvement Plan (EAAPC) for 2023/24 was completed within the reporting period, and a new EAAPC Improvement Plan for 2025/26 has been developed and established from 1 January 2025. A multi-agency ASP self-evaluation audit was undertaken in 2024, which identified a number of strengths, including a consistent standard of local practice in relation to people requiring investigation due to their risk of harm and evidence of early support and intervention helping to reduce the risk of harm for individuals. Evidence was also found of earlier and improved multi-agency decision

making and information sharing between professionals in East Ayrshire, which prevented the risk of harm from increasing for some people. The audit also noted improved referral rates and increased uptake of independent advocacy for people at risk of harm during this period.

Going forward, the annual ASP multi-agency audit in 2025 will have a focus on Learning Disability, with any improvement activity identified to be built into the existing 2025/26 EAAPC Improvement Plan. Furthermore, an analysis of Adult Protection and Child Protection Learning Review activity will be undertaken to identify emerging themes to understand common areas for future consideration and to collaborate in areas for improvement. A self-assessment will also be undertaken in 2025 using the Roadmap for Creating Trauma Informed and Responsive Change, to assess the Committee's readiness to integrate a Trauma Informed Approach. A report on the impact of the promotion of the proactive role of the Neighbourhood Coaches across our multi-agency workforce in respect of sustaining tenancies will also be developed in this period and the Adult Protection Committee will explore face to face learning options to achieve a clearer understanding of the impact of alcohol and drugs on people's ability to safeguard.

A new escalation process was established within the reporting period for victims experiencing repeating incidents of significant domestic abuse and harm, as evidenced by repeated referrals into the Multi-Agency Risk Assessment Conference (MARAC). This was found to contribute towards a reduction in real-time risk of harm from domestic abuse due to improved multi-agency information sharing and timely corresponding protection actions for victims and their children.

In terms of protection challenges experienced in East Ayrshire over the last year, a local service provider was subject to a Large-Scale Investigation regarding ASP in 2024 due to significant concerns about the safe delivery of care and support. In response, a moratorium was placed on new referrals and a multi-agency process was quickly established to identify, support and ensure improvements in the quality of care for the service users. Furthermore, an improvement action plan was developed with the provider in partnership with the Care Inspectorate, including specific requirements relating to the quality of care and support.

The importance of early information sharing with the HSCP in relation to service provider challenges to identify potential need for support at an earlier stage, was also highlighted.

Our Mental Health Officer (MHO) service has continued to support and protect vulnerable people with a mental disorder during 2024/25, with core responsibilities including: protecting people's health, safety, welfare, finances and property, safeguarding rights and freedom, court duties and public protection relating to mentally disordered offenders. The MHO service also meets statutory demand and requirements relating to the local authority's duties in respect of the Mental Health Act and Adults with Incapacity (AWI) legislation.

The service has continued to experience considerable challenges in the last year, with additional pressures associated with a back-log in MHO allocation to support AWI renewals, incoming new referrals for AWI applications, supporting decision-making processes and ongoing staffing issues resulting in limited capacity within the service. The service is currently configured on a hybrid model, with a combination of dispersed MHO Practitioners based within locality teams who fulfil a dual function role as both MHOs and Social Work Care Managers, alongside a dedicated team of MHOs who manage only statutory activity across the relevant legislation. Despite these challenges faced, the service has maintained a high level of activity to support and protect vulnerable people in East Ayrshire over the reporting period, including:

- 164 MHO reports completed to support AWI guardianship interventions;
- 122 private applications and 42 local authority applications;
- responding to 108 S44 Consent Requests;
- completion of Social Circumstances Reports; and
- lodging of Compulsory Treatment Order applications.

NHS Ayrshire and Arran's Public Health Department established an Inclusive Health team within the reporting period to deliver an inclusive health approach to Police, Prison and Community Justice services. The team aims to understand how life-course events shape and

influence the likelihood of people being involved in the police and justice system. This approach considers risks, opportunities and individual needs through a developmental, trauma-informed and human-rights lens, and supports an understanding for both those impacted by and those involved with perpetrators, through reviewing family life and events occurring in the community that involved the Police or Justice system.

The Public Health Department in partnership with HMP Kilmarnock, also hosted three health and wellbeing events within the prison setting in 2024/25. Each event gave more than 125 prisoners an opportunity to engage with over 20 services who provided information and support on a variety of health and wellbeing topics including oral health, mental health, speech and language and advocacy. A number of services which support people on liberation to reintegrate into communities, were also in attendance, such as Housing, The Nest Wellbeing Hub, DWP and Kilmarnock Football Club.

The Public Health Department has also supported people sentenced to an unpaid work order by utilising the 30% of hours which can be delivered as a meaningful activity, through delivering wellbeing training sessions including stress awareness, healthy eating and active living. This quality assured information has been found to support reintegration into communities and to help people understand and regulate their feelings, which can reduce the likelihood of reoffending. Public Health staff have also contributed towards taking forward the recommendations from the 2024 HMP Kilmarnock Health Needs Assessment, in addition to actively participating in the three thematic partnership groups which are progressing the 2024-29 Community Justice Outcomes Improvement Plan.

Police Scotland's Partnership and Community Safety Officer continued to work with East Ayrshire Trading Standards during the last year through a joint approach and social media strategy to highlight common fraudulent crimes associated with bogus callers, rogue traders and doorstep criminals who target vulnerable people in the community. This project also deployed a 'Scam Van' to visit and engage with local communities across Ayrshire in 2024/25 to raise awareness of various forms of frauds and scams.



In addition, the East Ayrshire Preventions Officer commenced a new initiative alongside the Domestic Safeguarding Unit within the reporting period to undertake joint visits in the community to complete home security surveys. This involves providing advice on how people can effectively safeguard themselves within their own homes and fitting video recording doorbells to high-risk properties if required. This programme should provide reassurance for people and their families and reduce the likelihood of harm in the community.

Vibrant Communities, in partnership with Police Scotland, the Scottish Fire and Rescue Service and NHS Ayrshire and Arran, collaboratively delivered a series of workshops to all seven secondary establishments in East Ayrshire during 2024/25. The workshops were delivered to all S1 pupils and reflected pertinent topics to educate and encourage young people to make positive decisions and sensible choices when in the community with friends. The roadshows were a valuable engagement opportunity to target young people and encourage active citizenship and responsible decision-making through a prevention and early intervention approach.

The workshops incorporated the following themes: anti-social behaviour, fire and water safety, peer pressure and stigma, awareness of alcohol and drugs, and youth action.

The roadshows were a resounding success, with many young people noting positive learning outcomes, including:

- **1,431** young people participated in the roadshows;
- **82%** felt more confident;
- **80%** will feel safer in the community;
- **96%** will be more responsible when out in the community;

- **72%** felt they have improved their communication skills; and
- **95%** had increased knowledge regarding the areas covered.

Attendee:

"This has been every effective because it was showing us all the sides of things that people don't talk about"

The Young People Sport and Diversion programme maintained a presence in local communities during 2024/25 with the 'Friday Night Football' initiative (formerly 'Premier Night Leagues'), operating weekly across East Ayrshire. 'Friday Night Football' was delivered at local leisure centres on Friday evenings and was well-attended during the last year, with up to 75 young people (predominantly males) participating in some sessions. This initiative offers young people an opportunity to participate in football activities in a safe and fun environment, where they can socialise with and make new friends, while reducing the likelihood of anti-social behaviour in local communities. The Young People Sport and Diversion programme engaged with more than 6,000 young people in East Ayrshire throughout 2024/25.

Evidence indicates that a lack of suitable housing options and associated supports can be influential factors in re-offending behaviour. East Ayrshire Council has continued to work in partnership over the last year with SERCO, the HSCP, Community Justice Ayrshire, NHS Ayrshire and Arran and Ayr Housing Aid, to meet the SHORE Standards and to improve the preparation and support for those in and leaving custody. This involves a weekly Community Reintegration meeting within HMP Kilmarnock, at which Ayr Housing Aid attends to discuss individuals due to be liberated, in addition to information being provided by SERCO on a weekly basis to Housing Options for people who have entered prison and those due for release with an expected liberation date. Ayr Housing Aid also continue to make onward support referrals from the date a person enters prison to support their transition from prison to the community.

63 homeless applications were made following prison discharge in 2024/25, which is a decrease of 16% from the previous year. The Council's Housing First initiative, which is a collaborative trauma-informed approach to providing a stable home with intensive wraparound support for homeless people with multiple and complex needs, has been found to have a positive impact on re-offending.

Following the Scottish Government's announcement in May 2024 regarding its intention to bring forward a proposal for the emergency release of prisoners, the Council's Housing Options team collaborated with partners involved in early release planning processes from the outset. The first period of early release took place between June and July 2024, resulting in 477 individuals on short-term sentences being released early. This took place over 4 weekly tranches and included the release of 28 prisoners from East Ayrshire, of whom 10 individuals required Housing Options assistance. The recently passed Prisoners (Early Release) (Scotland) Bill will affect an estimated 260-390 prisoners nationally by making them immediately eligible for release. Early releases commenced in February 2025 and were managed within three tranches over a six-week period. These early releases continue to impact on the demand for homelessness advice and assistance, and on the associated requirement for temporary accommodation in East Ayrshire.

The East Ayrshire CVO's Gain Respect and Foster Trust (GRAFT) project continued to operate throughout 2024/25, providing valuable employment experience, volunteering and educational opportunities for people who have experienced the criminal justice system and individuals with substance use disorder. Through tailored support programmes, participants gain valuable practical skills and knowledge in various areas including: construction, cleaning, retail and hospitality within the organisation's social enterprises, which contributes towards opening doors into further education or employment.

During the reporting period, 15 people participated in the 'Unlocking Potential' course, engaging with a one-day work placement and a community-based education theory day. All 15 participants successfully completed the course, with 13 having since been offered employment opportunities. The GRAFT team with support from unpaid work placements, built a gym area within their unit, which has gone from strength to strength over the last year.

The gym was introduced to encourage people with lived experience of the justice system to focus on improving their health and wellbeing, with regular participation in exercise having been evidenced to decrease levels of tension, elevate and stabilize mood, improve sleep and increase self-esteem.

Research suggests that up to 80% of adult prisoners have speech, language and other communication needs which are often unmet. The provision of effective speech and language interventions have been found to reduce the likelihood of re-offending in terms of a person's ability: to understand and engage with police and court processes, to engage with offender programmes, and to engage with wider interventions which support their health and wellbeing. NHS Ayrshire and Arran's Speech and Language Therapy team have provided a wide range of supports within HMP Kilmarnock during 2024/25, including:

- 3-point screening for all new prisoners for speech, language and communication needs to identify people who would benefit from an assessment and specialist input;
- provision of easy read materials to help people understand prison processes, including rules, induction and orientation;
- provision of easy read materials to help people understand their responsibilities post-liberation;
- specialist input for people with voice disorders and dysphagia, including bespoke care plans;
- advice given to healthcare staff, prison custodial staff, Social Work and Forensic Psychology in relation to adapting communication techniques to improve participation;
- provision of Decider Skills workshops for prisoners to help them recognise their own thoughts and better manage their emotions; and
- liaison with catering staff to ensure the provision of texture modified diets for individuals with eating, drinking and swallowing difficulties.



4



Our Workforce

Workforce Planning

The Health and Social Care workforce is undoubtedly our greatest asset, which continues to be demonstrated in the work that we do, with the compassion, commitment and flexibility of our staff being central to delivering high quality services which safeguard and improve the wellbeing of the people we serve. Effective workforce planning is fundamental to achieving the right people, with the right skills to deliver services in the right place at the right time. This process is overseen by a dedicated Workforce Planning Lead within the HSCP, whom supports a number of service portfolios across the Partnership.

Our workforce planning activity continues to support the implementation of the Partnership's Strategic Plan 2021-30 and to address the challenges of recovery, growth and transformation as identified in the National Workforce Strategy for Health and Social Care in Scotland. We follow an integrated approach to workforce planning, underpinned by a comprehensive Workforce Plan designed to support our efforts in overcoming these challenges locally. This strategic framework aims to meet evolving workforce demands while ensuring that our service delivery remains effective and sustainable. As we progress the transformation and growth of our workforce, we seek to increase operational capacity, develop staff knowledge and skills, and provide more opportunities for career entry and progression across the organisation.

The Partnership's new Workforce Plan 2025-28 sets out the following vision for our workforce:

"Getting the right people with the right skills in the right place at the right time, to deliver sustainable and high quality health and social care services for the people of East Ayrshire".

The Workforce Plan is guided by our Strategic Plan 2021-30 and the Caring for Ayrshire transformation programme, which both prioritise fostering independence within communities through a sustainable and skilled workforce. This Plan reinforces the integration of health and social care services by promoting multi-disciplinary collaboration, strategic recruitment, continuous skills development, strong leadership and workforce wellbeing. By aligning with national priorities and national workforce planning guidelines, the Plan adopts a proactive approach to meeting both current and future demands.

The Workforce Plan supports the national ambitions for achieving recovery, growth and transformation and remains fundamentally based on the five pillars of the Workforce Journey: Plan; Attract; Train; Employ; and Nurture. It also focuses on: supporting the wellbeing of our staff, attracting skilled people to work with us, retaining experience in the workforce, and investing in learning and development.

Notable workforce challenges we are experiencing at the time of reporting include: an aging workforce; Agenda for Change Pay Reform; ensuring staff wellbeing; and recruitment and retention. In response to these circumstances, the key priorities of the Workforce Plan 2025-28 are:



- Ensure evidence-based workforce planning;
- Use domestic and international recruitment channels to attract suitable staff into health and social care employment;
- Impact on our workforce regarding the knowledge and skills required to deliver high quality health and social care services;
- Become an employer of choice by ensuring staff are valued and rewarded; and
- Ensure a workforce and leadership culture focusing on the health and wellbeing of all staff.

The Workforce Plan incorporates a wide range of actions aligned to these priorities and the pillars of the Workforce Journey, with some examples including:

- Adopt modern workforce planning tools to support real time monitoring, evaluation and deployment of the workforce;
- Increase the number of apprenticeship and graduate intern posts, ring fencing posts for graduates;
- Design and deliver an annual core training calendar for the social work workforce;
- Explore options for role diversification and role reform to meet supply challenges for 'hard to fill' roles; and
- Develop, implement and support a consistent approach to staff induction at all levels across the HSCP.

Significant strides were made across our services during the lifespan of our previous Workforce Plan (2022-25) to enhance workforce capabilities, address recruitment challenges and foster a supportive work environment. These efforts ensured the provision of high quality care while equipping staff with the skills and resources to thrive in a dynamic health and social care landscape. Over this period, there has been a consistent emphasis on: promoting staff wellbeing, fostering a compassionate workplace culture, enabling flexible working, delivering initiatives to prevent burnout and providing opportunities for professional growth. Digital readiness has also been prioritised, with platforms such as 'Attend Anywhere' and 'eConsult' enabling staff to meet modern healthcare demands more effectively. Furthermore, our recruitment efforts have targeted underrepresented groups, people with career change ambitions and recent graduates, promoting diversity and sustainability within our workforce. Collectively, these enhancements demonstrate a commitment to building a resilient, skilled and motivated health and social care workforce, ready to adapt to evolving challenges while delivering high quality care.

The Partnership's Workforce Planning Board remains a key forum for discussion, information sharing, professional guidance and decision making on workforce planning matters. The Board leads on delivering the Workforce Plan 2025-28 to shape the workforce and ensure that our workforce planning is robust, evidence based and aligned to service and financial planning. The Board also retains oversight of delivery against the Agenda for Change for NHS staff within the HSCP, with service leads represented to ensure a coordinated and consistent approach.

In April 2025, the HSCP employed 3,058 staff across several disciplines as displayed in the table below. This equates to a whole time equivalent of 2413.6, with Community Care Officers and Social Workers comprising a significant proportion of the workforce.



Table 8. East Ayrshire HSCP WTE - April 2025

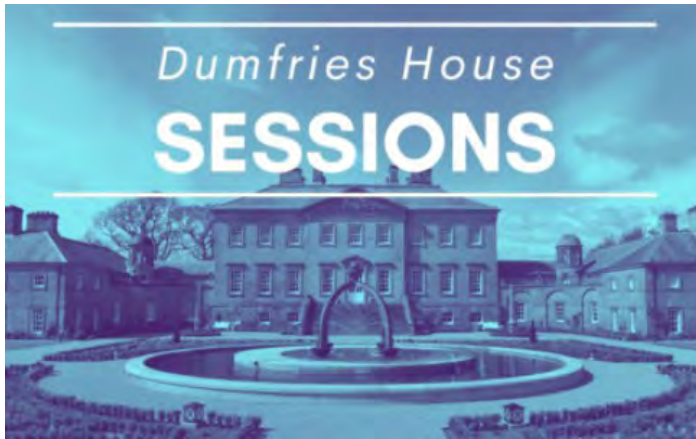
Department	East Ayrshire Council		NHS Ayrshire and Arran		Total HSCP	
	Head count	WTE	Head count	WTE	Head Count	WTE
Allied Health Professionals			271	224.8	271	224.8
Business Support	125	114.3	42	33.1	167	147.4
Children’s Health, Care and Justice	352	351.1	127	110.7	479	461.8
Directorate	5	5			5	5
IJB Finance	34	32.5			34	32.5
Locality Health and Care Services	1029	652.9	425	361.2	1454	1014.1
Primary and Urgent Care			256	183.5	256	183.5
Wellbeing and Recovery	308	268.2	84	76.3	392	344.5
Total	1853	1424	1205	989.6	3058	2413.6

Workforce Wellbeing

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. To deliver on this commitment, a comprehensive range of supports and opportunities have been provided to meet our workforce’s wellbeing needs throughout 2024/25, including:

- various wellbeing resources and signposting available on the ‘Wellbeing in East Ayrshire’ webpage, and NHS Ayrshire and Arran’s ‘Better Health’ website;
- bespoke employee counselling;
- access to the Council’s Supporting Attendance and Wellbeing team;
- Council and NHS employee wellbeing newsletters, containing practical support information, signposting and resources such as stress management sessions and advice;
- free health checks delivered by the Community Health Activity Team;
- various physical activity opportunities, such as a cycle to work scheme, links to walking events and reduced gym memberships;
- numerous online wellbeing courses, including: Psychological First Aid, Ask Tell Save a Life, Alcohol Awareness, Mental Wellbeing and Stress at Work, Nurturing Emotional Wellbeing through Self-Care and Supporting Wellbeing for Managers and Employees; and
- access to holistic wellbeing and activity sessions at Dumfries House, including: yoga, massage, relaxation and hypnotherapy.





Dumfries House Attendees:

*"Fantastic experience,
would highly recommend"*

*"Helped to connect with colleagues
in a non-stressful environment"*

Since launching in May 2024, the Partnership's dedicated Health and Wellbeing Coordinator has provided bespoke support for our staff to address issues relating to anxiety, stress, bereavement, neurodiversity and menopause. Following some appointments, onward referrals have also been made to other agencies in the community to further support staff with any self-management aspects of these matters, including: the East Ayrshire Carers Centre, Autism Support Ayrshire, an online ADHD self-management programme, Activity on Prescription and bereavement support groups.

Examples of targeted work undertaken by our Health and Wellbeing Coordinator during 2024/25 include:

- establishing a referral pathway with Mental Health Practitioners to automatically offer staff an appointment for the Staff Health and Wellbeing Service;
- co-delivering wellbeing approach sessions, workshops and training in relation to vicarious trauma for staff, including at Children's Residential Houses;
- co-facilitating wellbeing sessions within the Leadership Development Programme;
- providing Team Managers with best practice advice and evidence based information relating to their employees' health and wellbeing needs;
- working collaboratively with colleagues across Ayrshire and Arran to organise a pan-Ayrshire calendar of events to support the Wellbeing Week; and
- regularly attending various staff meetings across the HSCP such as the Communities of Practice, to promote the service, network and establish new referral pathways.



5



Integration Joint Board - Governance and Decision Making

Integration Joint Board

The Public Bodies (Joint Working) (Scotland) Act 2014 sets out the membership of the Integration Joint Board (IJB), which includes members nominated by the two integration partners; East Ayrshire Council and NHS Ayrshire and Arran, professional advisors from Health, Social Care and Public Health, partners from the third and independent sector, representatives of people who use services and unpaid carers.

The Voting Members of the IJB are appointed through nomination by NHS Ayrshire and Arran and East Ayrshire Council. The first Chair had been appointed for the first two years of the IJB from 2015 until the Local Government Elections in May 2017. Subsequently, the IJB Chair and Vice Chair post holders have alternated every two years between a Health Board and a Council representative. The term of the current Chair and Vice Chair is due to expire in June 2025.

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 table below lists the IJB Voting Members as at 31 March 2025.

Table 9. IJB Voting Members

Voting Members	Representing
Councillor Douglas Reid (Vice Chair)	East Ayrshire Council
Councillor Clare Maitland	East Ayrshire Council
Councillor Jayne Sangster	East Ayrshire Council
Councillor Neill Watts	East Ayrshire Council
Dr Sukhomoy Das (Chair)	NHS Ayrshire & Arran, Non-Executive Director
Ms Sheila Cowan	NHS Ayrshire & Arran, Non-Executive Director
Ms Jennifer Wilson	NHS Ayrshire & Arran, Nurse Director
Mr Neil McAleese	NHS Ayrshire & Arran, Non-Executive Director

IJB Stakeholder Forum

The IJB recognises and promotes the importance of the involvement of stakeholder representatives, particularly people who use our services and unpaid carers. The IJB Stakeholder Forum provides an opportunity for people, service users, carers and third sector organisations to come together to share their views on what will be discussed at our IJB meetings. Forum Members can also share their experiences, identify local issues and make suggestions to inform ongoing service improvement. The Forum continues to be represented at the IJB, with the Forum Chair and service user, carer and third sector representatives attending.

In the past year, the Forum has implemented an updated Terms of Reference, with a new Chair in post who has supported further development of the Forum. Ensuring that Forum Members have a full understanding of the topics being discussed at the IJB has been critical to this development, with speakers from across the HSCP attending to present and discuss numerous plans and papers, in addition to reviewing in depth items such as Best Value Service Reviews or Strategic Plans. A key area of interest in this period has been how teams are working together to improve communication and avoid duplication, with speakers discussing Multi-Disciplinary Teams and the Getting It Right for Everyone Pathfinder initiative.

Furthermore, agenda items aiming to increase Forum Members’ knowledge about the services delivered in East Ayrshire has allowed third and community sector Members to discuss their services, with the group hearing from a range of organisations including Ayrshire Independent Living Network, Ayrshire Cancer Support and Alzheimer’s Scotland. The Forum continues to encourage new membership, with a focus on people who use our services, unpaid carers and the wider public.

A Forum Member evaluation survey was delivered in November 2024 to seek comments on the aims of the Forum, what has worked well and what could be improved. The feedback informed the first development session in 2025 and will contribute towards the Forum’s next action plan.

Directions / Decision Making

The Board 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.

A Scottish Government Good Practice Note on Directions was published in January 2020. A pan-Ayrshire working group was reinstated in 2022 and the format for recording and monitoring Directions has been agreed on a pan-Ayrshire basis. 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 and details of [all Directions](#) issued to East Ayrshire Council and NHS Ayrshire and Arran can be found at www.east-ayrshire.gov.uk. The IJB Directions given throughout 2024/25 are displayed in the table below.

The IJB Directions given throughout 2024/25 are displayed in the table below:

Table 10. IJB Directions: 2024/25

Direction Detail	Date
Care at Home Service - Issue a Direction to East Ayrshire Council to Commence Procurement Arrangements for a new collaborative commissioning model for Care.	30 April 2024
Review of Eligibility Criteria for Care and Support - Issue Direction to East Ayrshire Council on behalf of Heads of Services to recommend changes to the Eligibility Criteria Policy.	27 June 2024
Strategic Plan - Issue Direction to East Ayrshire Council and NHS Ayrshire and Arran to approve the Strategic Plan update for 2024, the workforce plan 2022-25 update, the Property and Asset Management Strategy 2024-27 and the Communications Strategy 2024-27.	27 June 2024
Outwith Placement Steering Group - Issue Direction to East Ayrshire Council to agree the changes in the Outwith Placement Screening Group.	27 June 2024
GP Primary Care Service in HMP Kilmarnock - Issue Direction to NHS Ayrshire and Arran to approve funding to continue contractual arrangements with providers.	27 June 2024
Commissioning and Contracting Arrangements - Issue Direction to East Ayrshire Council on behalf of the three Heads of Service to agree contractual arrangements, extensions to existing contracts, contracts coming to an end and those coming to an end and being re-tendered over the period 2025-26.	5 February 2025
Social Care Partnership Social Care Contribution and Charging Framework and Approved Rates, Contributions and Charges 2025-26 - Issue Direction to East Ayrshire Council to implement the alterations to charges and contributions for social care services for the Financial year 2025/26 and the rates paid for social care services.	19 March 2025
Annual Updates Report - Issue Direction to East Ayrshire Council and NHS Ayrshire and Arran in line with the Strategic Plan.	19 March 2025



6



Audit and Performance Committee

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 has held additional meetings during 2024/25 to continually review and monitor the progress of the Financial Recovery Plan. The Committee has 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.

Strategic Commissioning Board

The Strategic Commissioning Board (SCB) is responsible for the management of the Transformational Change Fund. Service reconfiguration and transformation work continues to be taken forward through the Strategic Commissioning Board, which provides oversight and direction of the transformation programme. Transformational change is a key aspect of the IJBs response to managing increasing demand. This work will continue with services being shaped around remobilise, recovery and redesign principles to ensure services can be delivered within delegated resources. The IJB will continue to work with its partners collaboratively to ensure whole system viability. Cross-cutting reviews and service transformation aligned to investment cases and service re-design are key components of the Transformational Change Programme. Where proposals require changes to policies or services, they are presented to the IJB for approval. This principal applies to both NHS and Council commissioned services.

The second iteration of the Financial Recovery Plan which was approved by the Audit and Performance Committee on 18 December 2024, included the drawdown of the uncommitted Transformational Change Programme balance of £1.116m. In previous financial years, transformational change funding has been deployed where business cases justify short-term investment to design more cost-effective service models. All remaining transformational change funding is fully committed against previously approved initiatives.

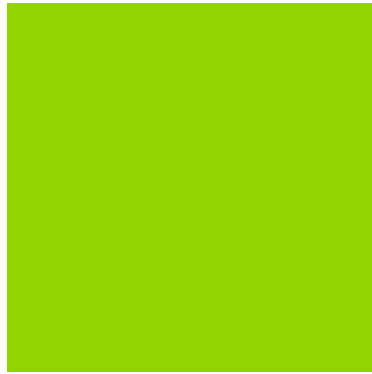
A sum of money has been set aside by East Ayrshire Council that can be accessed for innovation, and separately for early intervention and prevention opportunities. There are strict criteria around this funding with an aim to support proposals to reconfigure services, reduce costs and ensure financial sustainability, through a reduction in demand for services, while recognising the demographic changes we are seeing across the authority. The HSCP has successfully accessed both of these funds with significant elements of savings proposals aligned to these programmes of change.

The Board received progress updates regarding the programme of Best Value Service Reviews (BVSRs), an integral part of the transformation required to address financial sustainability challenges. The programme identifies areas for review on the basis of strategic direction, potential risk and rewards, and is combined with cross-cutting review elements. During 2024/25, the Board received reports on progress made regarding various BVSRs including: Family Support and Young People Service; Child Payments; Learning Disability and Mental Health Commissioned Services; MDT Working at the Front Door; Addictions Services; Financial Inclusion Team; Business Support; Older Persons Day Services; Children with Disabilities; and Justice Services. Examples of additional resources approved by the SCB include: MeLearning LiquidLogic training; recruitment of graduate interns; extension of the self-directed support programme; and supporting redesign of care services.

The SCB provides detailed bi-annual reports to the Audit and Performance Committee for ongoing oversight.



7



Financial Performance

Financial Performance 2024/25

IJBs are specified in legislation as 'section 106' bodies under the terms of the Local Government (Scotland) Act 1973. The Financial Statements are therefore prepared in compliance with the Code of Practice on Local Government Accounting in the United Kingdom 2024/25, supported by International Financial Reporting Standards (IFRS), unless legislation or statutory guidance requires different treatment. The Local Authority (Scotland) Accounts Advisory Committee (LASAAC) issued Additional Guidance for the Integration of Health and Social Care in March 2019. This guidance has been developed to support consistency of treatment and the appropriate implementation of financial reporting for integration.

The 2014 Regulations require IJB Members to consider the unaudited accounts at a meeting to be held no later than 31 August. In addition, the IJB, or a committee whose remit includes audit or governance functions, must consider the audited accounts and aim to approve the Annual Accounts for signature no later than 30 September, with publication no later than 31 October. The unaudited Annual Accounts 2024/25 were approved by the IJB on 25 June 2025. Following discussions with Audit Scotland (the IJB's appointed external auditors) regarding the audit timetable, it has been agreed that the audited Annual Accounts 2024/25, along with the external auditors' ISA260 report on the outcome of the audit, will be submitted to the IJB on 24 September 2025 for formal approval.

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.

Specific commitments have been identified totalling £2.140m resulting in a net overspend for the year totalling £6.021m. Recommendations relating to this overspend position are outlined within the month 12 Financial Management Report as at 31 March 2025, which was presented to the IJB on 25 June 2025. All recommendations set out within the Financial Management Report are subject to completion of external audit of the Annual Accounts 2024/25.

The IJB is required to operate within its delegated budget and work continues to be taken forward through the Senior Leadership Team and wider Partnership Leadership Team, as well as through the Strategic Commissioning Board (SCB) and the Budget Working Group, with oversight by the Audit and Performance Committee (APC). This work focusses on cost reduction to mitigate cost and volume pressures through Financial Recovery Plans and to drive delivery of transformational change and ensure that Strategic Planning outcomes are achievable within delegated resources going forward. Additional APC meetings focus on progress against approved Financial Recovery Plan savings, with due consideration of financial and operational risks, as well as on service provision consequences.

The East Ayrshire Health and Social Care Partnership continues to operate within a challenging financial environment, as a result of real terms reductions in funding, increased demographic pressures and the cost of implementing new legislation and policies, which alongside staff recruitment and retention challenges, has impacted on service delivery and mainline budgets. Due to continuing pressures over the course of 2024/25, savings agreed in-year, as part of two separate Financial Recovery Plans to achieve financial balance were not fully deliverable. This is reflected in the draft final outturn position for 2024/25, with baseline budget pressures having been included in budget planning assumptions for 2025/26.

The Senior Leadership Team and wider Partnership Leadership Team, with the support of the Strategic Commissioning Board, Budget Working Group, Audit and Performance Committee and Integration Joint Board, have worked throughout 2024/25 to manage and mitigate budget pressures and associated service implications, as far as possible, through strong financial governance. This work will continue going forward.

As set out in Financial Management Reports throughout 2024/25 and within the Annual Budget 2025/26 report to the IJB on 1 April this year, there are a number of continuing financial risks, which have the potential to impact upon both Council and NHS commissioned services, and will require management action over the course of the 2025/26 financial year and going forward. This includes risks associated with delivery of significant additional savings and management of baseline budget pressures at a time of increasing demand. The risks and potential consequences can be summarised as follows:

Risks:

- Legacy overspends
- No retained contingency balances
- Fully committed transformational change fund balances
- Increasing demand / complexity of care
- Demographic changes
- Scottish Government funding initiatives not fully funded / reducing / ceasing
- Wider political / economic uncertainty
- Inflationary pressures (pay / contractual)
- External cost pressures (i.e employers national insurance, prescribing)
- Provider market stability
- Non-achievement of savings / delivery timescales
- Lead Partnership pressures impact
- Public expectations

Potential Consequences:

- Increased waiting times to access care
- Delays in hospital discharge
- Greater risk to those unsupported in community
- Additional strain on unpaid carers
- Impact on ability to respond to pressures
- Impact on service performance, quality and satisfaction.

These key risks and potential consequences undoubtedly represent a challenging position for the IJB, however it is important to consider opportunities, in terms of reset and future planning through the Transformational Change Programme to ensure financial sustainability going forward. This will ensure alignment of budgets with strategic planning priorities, with commissioning of services that not only meet immediate demand, but also facilitate preventative activity that supports population wide health improvement and addresses inequalities. Considering this in the context of longer-term demographic change will be important.

Retained uncommitted balances have been important in ensuring that pressures can be managed. As consistently highlighted in reports to the IJB, any draw on contingency balances is time-limited with underlying action plans put in place to ensure financial sustainability.

The final outturn position for 2024/25 is an overspend of £6.021m. IJBs are required to operate within delegated resources and to achieve financial balance. In 2024/25, the overspend is after taking account of Financial Recovery plan 1 savings £0.151m and Financial Recovery Plan 2 savings of £2.790m, including non-recurring savings £2.048m which have been recognised as baseline pressures, to be offset by additional savings proposals within the initial balanced budget proposal for 2025/26. The overspend for 2024/25 is wholly offset on a non-recurring basis by non-repayable funding from East Ayrshire Council and NHS Ayrshire and Arran £5.869m and £0.152m respectively.

The requirement for additional non-recurring funding and non-recurring savings to achieve financial balance in 2024/25, resulting in additional savings proposals to set an initial balanced budget for 2025/26, represents a financial risk to the IJB going forward. Where required, it will be necessary to bring reports to future meetings of the IJB over the course of 2025/26 to consider commissioning arrangements and issue Directions to maintain a balanced budget in line with strategic planning priorities, aligned to national health and wellbeing outcomes. The risk appetite statement previously agreed by the IJB will provide a framework within which to consider these challenges and associated proposals.

Due to delayed publication of the updated Scottish Government Health and Social Care Medium Term Financial Framework (MTFF), a high level Medium Term Financial Plan (MTFP) was included for noting within the Annual Budget 2025/26 report to the IJB on 1 April 2025.

It is anticipated that a fully detailed MTFP to 2030 will be finalised as soon as possible following publication of the updated Scottish Government Health and Social Care MTFF. The detailed MTFP will project forward and align with strategic planning priorities to 2030, with a focus on alignment of priorities, activities, budgets and outcomes, alongside population and demographic changes and will take cognisance of stakeholder input. At a local level, the MTFP will continue to underpin delivery of the Strategic Plan 2021-30, to ensure outcomes can be delivered in line with the core themes of the Plan. Going forward, the IJB will require to consider if the Strategic Plan in its current form is deliverable within an anticipated reduced level of delegated funding.

The table below displays the cost of providing services for 2024/25 according to accepted accounting practice, with comparable figures for the previous financial year. [Further tables displaying these costs between 2018/19 and 2022/23 are available at www.east-ayrshire.gov.uk](http://www.east-ayrshire.gov.uk).

Table 11. Comprehensive Income and Expenditure Statement: 2023/24 - 2024/25

Gross Expenditure 2023/24 £m	Gross Income 2023/24 £m	Net Expenditure 2023/24 £m		Gross Expenditure 2024/25 £m	Gross Income 2024/25 £m	Net Expenditure 2024/25 £m
204.802	(8.277)	196.525	Core Services	211.332	(9.483)	201.849
4.663	0.000	4.663	Public Protection	3.991	0.000	3.991
4.327	0.000	4.327	Non District General Hospitals	4.638	0.000	4.638
36.415	0.000	36.415	Children's Health, Care and Justice Services	34.663	0.000	34.663
42.250	0.000	42.250	Lead Partnership Services	46.607	0.000	46.607
26.216	0.000	26.216	Set Aside	31.870	0.000	31.870
318.673	(8.277)	310.396	Cost of Services	333.101	(9.483)	323.618
0.000	(105.165)	(105.165)	East Ayrshire Council funding	0.000	(110.691)	(110.691)
0.000	(194.380)	(194.380)	NHS Ayrshire & Arran funding	0.000	(208.744)	(208.744)
0.000	(299.545)	(299.545)	Taxation and Non-specific Grant income	0.000	(319.435)	(319.435)
318.673	(307.822)	10.851	Deficit / (Surplus) on provision of services	333.101	(328.918)	4.183

The Comprehensive Income and Expenditure Statement highlights a net cost of provision of services for 2024/25 of £323.618m. The variance between this figure and the net expenditure figure of £354.545m reported in the service portfolio financial performance table is represented by the following:

Table 12. Net Expenditure 2024/25

	£m
Annual Accounts: cost of provision of services	323.618
Management Accounts: actual expenditure	354.545
Variance	(30.927)
Represented by:	
Funding delegated 2022/23	6.323
Lead Partnership income	(93.875)
Lead Partnership contributions	24.755
Large Hospital Set Aside	31.870
	(30.927)

The following table displays financial performance by Partnership service portfolio in 2024/25. Further comprehensive tables displaying our [financial performance by Partnership service portfolio](#) between 2018/19 and 2023/24 can be found at www.east-ayrshire.gov.uk.

Table 13. Service Portfolio Financial Performance: 2024/25

Service Division	Annual Estimate 2024/25 £m	Actual Expenditure to 31/3/25 £m	Variance Adverse / (Favourable) £m
Core Services			
LEARNING DISABILITIES	25.700	28.631	2.931
MENTAL HEALTH	8.147	7.821	(0.326)
OLDER PEOPLE	53.244	56.180	2.936
PHYSICAL DISABILITIES	4.486	4.193	(0.293)
SENSORY	0.240	0.241	0.001
SERVICE STRATEGY	10.229	9.075	(1.154)
TRANSPORT	0.495	0.495	0.000
HEALTH IMPROVEMENT	0.283	0.283	0.000
COMMUNITY NURSING	8.204	8.033	(0.171)
PRESCRIBING	30.219	30.219	0.000
GENERAL MEDICAL SERVICES	17.680	17.757	0.077
ALLIED HEALTH PROFESSIONS	8.627	9.541	0.914
INTERMEDIATE CARE AND REHABILITATION TEAMS	0.839	0.887	0.048
	168.393	173.356	4.963

Table 13. Service Portfolio Financial Performance: 2024/25

Service Division	Annual Estimate 2024/25 £m	Actual Expenditure to 31/3/25 £m	Variance Adverse / (Favourable) £m
Public Protection			
ADULT SUPPORT & PROTECTION	0.153	0.131	(0.022)
ALCOHOL & DRUGS SUPPORT	3.296	2.969	(0.327)
CHILD PROTECTION COMMITTEE	0.076	0.076	0.000
LEARNING & DEVELOPMENT	0.811	0.815	0.004
	4.336	3.991	(0.345)
Non District General Hospitals			
EAST AYRSHIRE COMMUNITY HOSPITAL	4.201	4.144	(0.057)
WOODLAND VIEW COMMISSIONED SERVICES	0.566	0.494	(0.072)
	4.767	4.638	(0.129)
Lead Partnership / Hosted Services			
STANDBY SERVICES	0.296	0.296	0.000
PRIMARY CARE (INCLUDING DENTAL)	129.225	127.368	(1.857)
PRISON AND POLICE HEALTHCARE	3.937	3.961	0.024
ALLIED HEALTH PROFESSIONS (LEAD)	5.329	4.938	(0.390)
OTHER LEAD SERVICES	2.158	2.263	0.104
	140.945	138.826	(2.119)
Children's Services			
CHILDREN & FAMILIES / WOMEN'S SERVICES	19.889	18.812	(1.077)
SECURE ACCOMMODATION / OUTWITH PLACEMENTS	6.455	7.455	1.000
JUSTICE SERVICES	2.812	2.799	(0.013)
HEALTH VISITING	4.762	4.668	(0.094)
	33.918	33.734	(0.184)
TOTAL DIRECTLY MANAGED SERVICES BUDGET	352.359	354.545	2.186
Hosted Services adjustments:			
RECHARGES OUT	(95.257)	(93.875)	1.382
RECHARGES IN	24.442	24.755	0.313
	(70.815)	(69.120)	1.695
SET ASIDE	31.870	31.870	0.000
TOTAL POPULATION BASED BUDGET INCLUDING SET ASIDE	313.414	317.295	3.881

Table 13. Service Portfolio Financial Performance: 2024/25

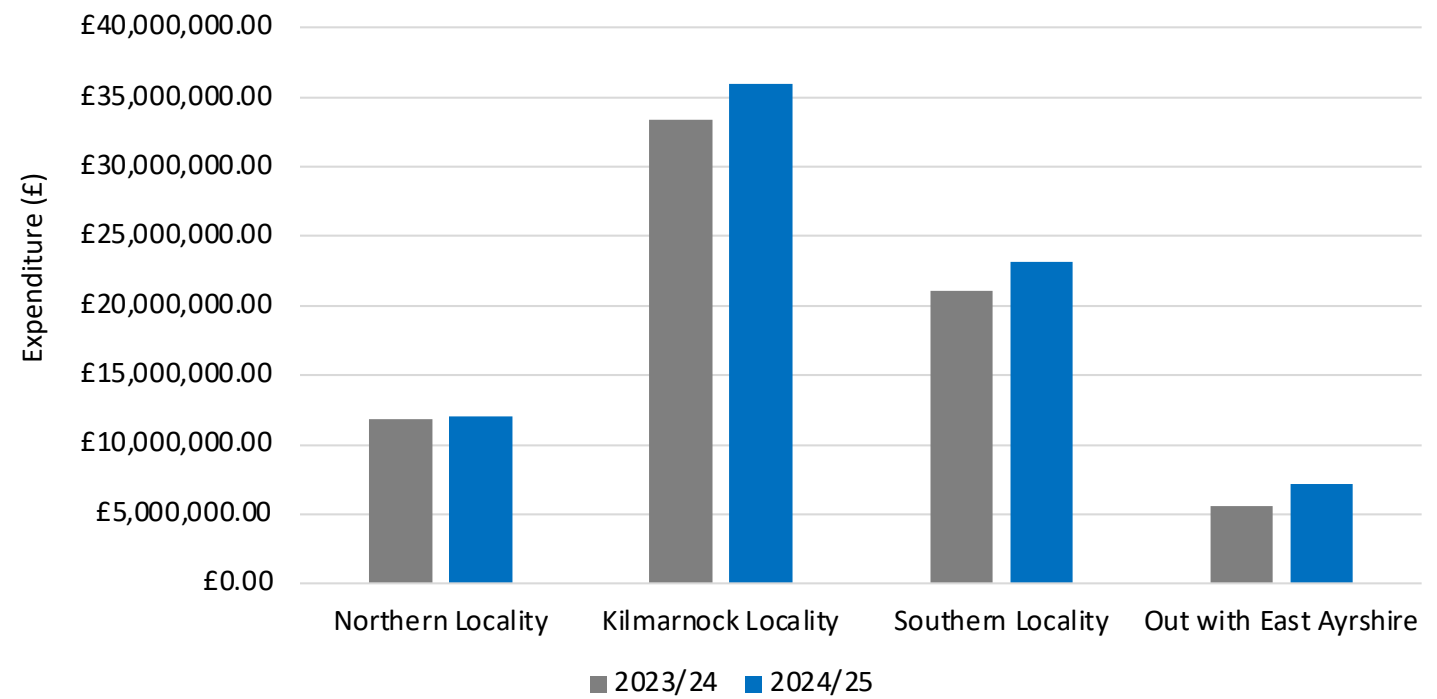
Service Division	Annual Estimate 2024/25 £m	Actual Expenditure to 31/3/25 £m	Variance Adverse / (Favourable) £m
Earmarked balances:			
UNDERSPEND RELATING TO EAC - EARMARKED BY IJB	0.000	0.618	0.618
UNDERSPEND RELATING TO NHS A & A - EARMARKED BY IJB	0.000	0.083	0.083
EA SHARE OF PCIF UNDERSPEND - EARMARKED BY IJB	0.000	0.409	0.409
EA SHARE OF ACTION 15 UNDERSPEND - EARMARKED BY IJB	0.000	0.253	0.253
UNDERSPENDS IN NHS A&A HOSTED SERVICES – EARMARKED BY IJB	0.000	0.289	0.289
EA SHARE OTHER HOSTED UNDERSPENDS - EARMARKED BY IJB	0.000	0.488	0.488
	0.000	2.40	2.140
NET UNDERSPEND AFTER EARMARKING	313.414	319.435	6.021
Uncommitted balances:			
UNDERSPEND/(OVERSPENDS) RELATING TO EAC - RETAINED BY IJB	0.000	0.000	0.000
UNDERSPEND/(OVERSPENDS) RELATING TO NHS A&A - RETAINED BY IJB	0.000	0.000	0.000
	0.000	0.000	0.000
TOTAL DELEGATED BUDGET AFTER UNCOMMITTED BALANCES	313.414	319.435	6.021
Additional Funding Contributions:			
Overspend relating to EAC – Additional Funding	5.869	0.000	(5.869)
Overspend relating to NHS A & A – Additional Funding	0.152	0.000	(0.152)
	6.021	0.000	(6.021)
TOTAL DELEGATED BUDGET	319.435	319.435	0.000

Financial Performance in Localities

The chart below displays the total service provision expenditure by locality area in 2024/25, with a comparison to the previous year. This information is limited to services where detailed activity data is available to accurately apportion costs by locality, based on service user residence. Expenditure levels remain representative of the populations in each locality area, with the highest costs occurring in the Kilmarnock locality. The information below refers to the provision of the following services: Care at Home (older people, learning disability, mental health); Care Homes (older people, respite, physical disability, mental health, learning disability); Fostering; Kinship; Adoption; SDS Option 1 and 2 (adults and children); Community Alarms; and Community Meals. Out with expenditure represents provision costs for people who reside outside the geographical boundary of East Ayrshire.

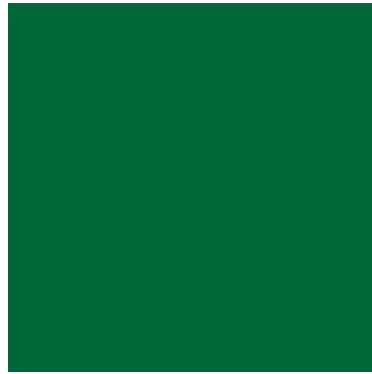
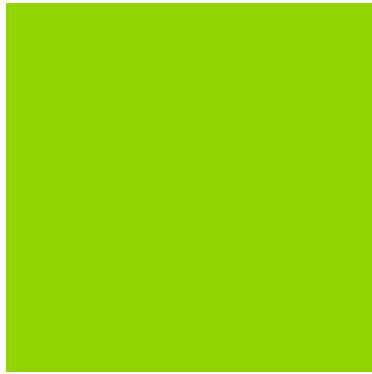
Overall expenditure has increased from £71,945,377.01 in 2023/24 to £78,354,020.00 in 2024/25, with fairly proportionate increases across the three locality areas relative to local demography. The provision expenditure for individuals out with East Ayrshire has increased by 28% over this period. The overall £6,408,642.99 increase in expenditure over 2024/25 is attributable to various factors, including financial uplifts and rising demand across services.

Chart 2. Partnership Expenditure by Locality Area: 2023/24 - 2024/25





8



Best Value

The HSCP'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. This undertaking applies to all delegated resources held within the HSCP, including 'set-aside' hospital resource where a core planning role exists. More information relating to the Board's activity during 2024/25 is set out in the Audit and Performance section within this Report. Detail regarding service specific improvement and transformational change work undertaken in this period can be found in our Service Improvement Plans, which are available upon request.

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 as outlined throughout this Report. A key mechanism for achieving this is through implementing Best Value Reviews.

Previously, the Partnership has followed the guidelines set out in East Ayrshire Council's Corporate Best Value Service Review Guidance 2018, which is the current guidance used by Council services. However, revised guidance was developed for HSCP services which better aligns to our Strategic Plan and associated strategies, governance arrangements, national guidance and quality improvement methodology, which was approved by the Strategic Commissioning Board and Audit and Performance Committee in June 2025 for use going forward. The revised guidance is robust to ensure consistency in future HSCP reviews and follows a relatively similar approach to the Council's Corporate Best Value Service Review Guidance.

The reviews will be implemented through a person-centred approach based on collaborative design principles and will utilise proven quality improvement techniques, in addition to challenge, consult, compare and compete processes, to identify evidence-based improvements which will deliver better value for money and improved outcomes for people who use services. The revised review framework will facilitate comprehensive scrutiny of current operational delivery and processes to challenge the basis upon which the services within scope are provided. This will involve consulting with all stakeholders by following the Scottish Approach to Service Design, analysing local data to establish trends, demand and capacity, and benchmarking activities to identify best practice approaches.

The reviews will fundamentally focus on a number of improvement themes aligned to our strategic priorities, including: managing demand through early intervention and prevention; maximising personal choice, control, independence and inclusion; managing costs through efficiency; opportunities from strengthening integration; future workforce requirements; shaping sustainable services; and identifying opportunities for reinvestment. The Strategic Commissioning Board will continue to be regularly updated in relation to the progress of all active reviews, and of the implementation progress of recently completed 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. The review themes comprised within the 2025-27 programme are set out in the table below.

Table 14. HSCP Programme of Cross-Cutting Reviews: 2025-27

Review Details	Commencement Date
Review of Multi-Disciplinary Team Working at the Front Door to assess operating models across points of contact and identify opportunities for efficiencies and demand reduction.	January 2025
Review of Adult Care at Home and Housing Support Services/ Learning Disability Adult Care Services to deliver flexible, efficient and effective services with sustainable outcomes.	June 2025
Review of Out of Hours Nursing Service to improve efficiency and effectiveness.	August 2025
Programme of rapid reviews aligned to the IJB Financial Recovery Plan incorporating all services to consider new ways of working, align performance and quality and promote financial sustainability.	2025/26
Review of Social Work and Social Care Learning and Development Service to assess current opportunities for service redesign. delivery model and the	2026/27

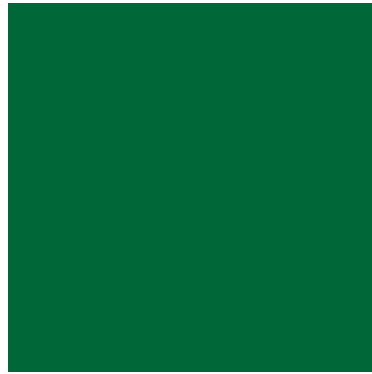
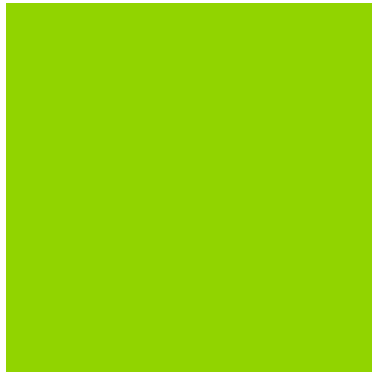
A number of Health and Social Care service reviews were formally concluded during 2024/25, including: Addictions Services; the Family Support and Young People Service; Child Payments; Business Support; Justice Services; Older Person's Day Services; and the Financial Inclusion Team. Updates relating to the implementation progress of these reviews were presented to the Strategic Commissioning Board throughout 2024/25. The Board was satisfied that the associated implementation plans for these reviews were completed, with the exception of the Family Support and Young People Service and Financial Inclusion Team workstreams, which were suspended due to extenuating circumstances. Implementation of the recommendations approved in 2024 from the Learning Disability and Mental Health Commissioned Services and the Children with Disabilities Services reviews are nearing completion at the time of reporting.

In terms of scheduled reviews into 2025/26, a cross-cutting review of multi-disciplinary team working at the front door for adult services is currently at an advanced stage and is expected to conclude by late summer 2025. Reviews of our Adult Care at Home and Housing Support Services and Learning Disability Adult Care Services commenced in June 2025 and a review of the Out of Hours Nursing Service is due to commence in August 2025. A programme of rapid reviews aligned to the IJB Financial Recovery Plan will also begin in 2025/26.

Further information and examples relating to efficient utilisation of resources in delivering health and social care services in East Ayrshire, is included in section 3 within this Report.



9



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. Inspections provide assurance regarding the quality of care we deliver and facilitate our improvement activities, which help to ensure that people who use care services in East Ayrshire have positive experiences and the best possible outcomes. Our Care Inspectorate grades achieved are regularly reviewed by IJB Finance and are reported to the Audit and Performance Committee for ongoing improvement monitoring and action where required.

The Care Inspectorate has continued to inspect care services on a risk and intelligence led basis over the last year. A focus was maintained on the care home sector within this period, including following up on requirements within timescales to ensure that the care people receive continually improves. The Care Inspectorate reviews how it inspects regulated services on an ongoing basis and it continued to carry out tests on a new inspection type called a 'Core Assurance Inspection' in 2024/25. This proportionate approach is a cornerstone of responsive regulation and is linked to associated risk. The Care Inspectorate also piloted self-evaluation in some adult care services from July 2024, including assessing and reporting on a service's self-evaluation of the core assurances during the usual inspections. It also continued to prepare the sector for the implementation of 'Anne's Law' and the Safer Staffing legislation, including establishing the 'Meaningful Connection, Visiting and Anne's Law' Project to support and promote the importance of all types of meaningful connection for people who live in adult and older people's care homes.

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 [registered services](#) and details of the most recent inspections of [registered care homes](#) 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. An area previously identified for improvement regarding Business Continuity Plans still remains at the time of reporting and although this situation is improving, it continues to be a key priority.

In respect of our care home contract monitoring arrangements, care homes continue to provide a range of information through quarterly monitoring reports, which are submitted electronically and then collated and analysed by Planning and Performance colleagues. The HSCP's Commissioning Officer also conducts between two and four face to face care home support and development visits per year, depending on the level of support required. As the Partnership has a duty to ensure providers adhere to the requirements of the Health and Care (Staffing) (Scotland) Act 2019, which came into force on 1 April 2024, this theme was introduced to both the quarterly monitoring return and Commissioner visits within the reporting period.

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. Inspection highlights for some services within this period are provided below, however more information is available on the [Care Inspectorate website](#).

Our Sir Alexander Fleming Centre Day Service for adults was subject to an unannounced inspection between October and November 2024 and achieved positive gradings across all quality indicators assessed ('very good' for Wellbeing, Care and Support Planning and Staff Team, and 'good' for Leadership). The key messages from this inspection were:

- We observed that people were happy and confident in the company of workers who engaged with them in a natural, warm and respectful way;
- People benefitted from personalised and responsive support, good communication and involvement;
- People were supported to maintain independence, social connections and links with local communities;
- Staff felt well supported by a responsive management team;
- People received reliable and consistent support from a familiar staff team with whom they had positive, trusting and caring relationships; and
- Staff were highly skilled and competent in supporting people's needs and preferences.

Our Community Reablement and Support Team (North Locality) was subject to an unannounced inspection between July and August 2024 and achieved positive gradings across the majority of quality indicators assessed ('good' for Wellbeing, Staff Team and Care and Support Planning, and 'adequate' for Leadership). The key messages from this inspection were:

- People were happy and confident in the company of workers;
- Staff engaged with people who receive support in a natural, warm and respectful way;
- People benefitted from personalised and responsive support in addition to good communication and involvement;
- Staff were highly motivated and focussed on achieving good outcomes for people;
- Management and staff have developed relationships with external health professionals, enhancing the health and wellbeing of people;
- Quality assurance systems and processes need to be used more consistently to drive improvements in the service; and
- The service was not yet undertaking self-evaluation.

Our Care at Home and Housing Support Service (North Locality) was subject to an unannounced follow up inspection in January 2025 and achieved 'adequate' gradings across all quality indicators assessed. The key messages from this inspection were:

- The management and staff team had worked hard to make improvements and meet the outstanding requirements;
- There was not yet a significant impact on outcomes for people as the result of changes made; and
- Staffing shortages were impacting on the continuity of support.

A joint inspection of services for children at risk of harm in the East Ayrshire Community Planning Partnership area took place between 16 September 2024 and 6 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. Within this process, inspectors from the Care Inspectorate, Healthcare Improvement Scotland, His Majesty's Inspectorate of Constabulary in Scotland and Education Scotland, in addition to young inspection volunteers, gathered and reviewed evidence against 22 quality indicators in the inspection framework to examine four inspection statements. Following consideration of this evidence, a six-point scale was then used to provide a formal evaluation of quality indicator 2.1 (impact on children and young people), which considers the extent to which children and young people:

- feel valued, loved, fulfilled and secure;
- feel listened to, understood and respected;
- experience sincere human contact and enduring relationships; and
- get the best start in life.

The overall evaluation of quality indicator 2.1 was 'good', and a number of important local strengths were identified which impacted on children and young people's experiences, including:

- effective recognition and initial response to risks and concerns;
- multi-agency training and guidance help staff to work together to keep children and young people safe;
- almost all children and young people at risk of harm felt safe where they lived all or most of the time;
- GIRFEC and child protection arrangements are in place;
- children and young people at risk of harm experienced nurturing and respectful relationships with staff;
- staff understood the importance of relationship-based practice;
- most children and young people at risk of harm were listened to and supported to share views; and
- children and young people at risk of harm were benefiting from the support they received from committed and compassionate staff who worked well together.

However, several areas for improvement were also identified to ensure better consistency in experiences and outcomes for children and young people at risk of harm in East Ayrshire, including:

- embedding a consistent approach to include and ensure all children and young people have the opportunity to fully participate in decisions that affect them;
- ensuring that all children and young people at risk of harm receive the help they need at the right time and in a way that fully meets their needs; and
- Evidencing the impact and difference our services are making to the lives of children and young people at risk of harm.

The findings from the inspection 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. This improvement work will be undertaken collaboratively, with formal reviews of progress every six months and regular stakeholder engagement and communication to ensure progress and transparency. Further details regarding the joint inspection of services for children at risk of harm in East Ayrshire can be found on the [Care Inspectorate website](#).



10



Caring for Ayrshire

The Caring for Ayrshire Programme 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. At the heart of this vision is a commitment to transforming how services are delivered across the whole health and care system by focusing on prevention, early intervention and community-based support.



Progress has been made throughout 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. These insights have also been informed by challenges presented by the COVID-19 pandemic, which highlighted the need for resilience, flexibility and innovation in service delivery. The Programme's redesign efforts will take these lessons into account, ensuring that future models of care are robust and adaptable in the face of shifting public health needs.

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.

People

To effectively meet future care and wellbeing needs, we must gain a deeper understanding of how these needs will evolve. This requires a focus on enhancing preventative measures, early diagnosis, timely intervention, treatment and aftercare services. In addition, we must ensure that access to services is equitable and easy, allowing people to receive the care they need when they need it.

Services

It is essential to address the challenges and opportunities associated with the quality and effectiveness of service delivery. This includes examining how services are designed, scaled, organised and accessed. By understanding how these factors impact the efficiency and accessibility of services, we can make informed decisions on their future development.

Infrastructure

An evidence-based, comprehensive assessment will be conducted to identify risks associated with aging infrastructure, the challenges of meeting environmental sustainability goals, and the ongoing need for sufficient and fit-for-purpose accommodation to support operational service needs.

Communities and Partners

In alignment with the Scottish Government's Place Principle, we must assess how changes in service delivery can improve the environment in which people live. By considering the physical, economic, environmental, social and cultural aspects of our communities, we aim to create sustainable, healthy spaces that foster well-being and support the development of health infrastructure.

Collaborative Approach

The success of Caring for Ayrshire is built on a strong foundation of partnership and shared purpose. The vision is jointly led by NHS Ayrshire and Arran and the three Health and Social Care Partnerships in East, North, and South Ayrshire. Together, we continue to foster collaboration across organisational boundaries, developing innovative approaches to planning, delivery and improvement of service provision. This whole-system approach ensures that services are aligned, integrated and designed to meet the needs of our diverse communities.

Effective engagement with stakeholders including: citizens, patients, communities, staff and services, is essential to informing the work required to advance service reform and redesign. To successfully realise the Caring for Ayrshire vision, it is imperative that we elevate our engagement efforts. Actively listening to and learning from the experiences and perspectives of all involved, is a fundamental element of the Programme's approach.

Looking Ahead

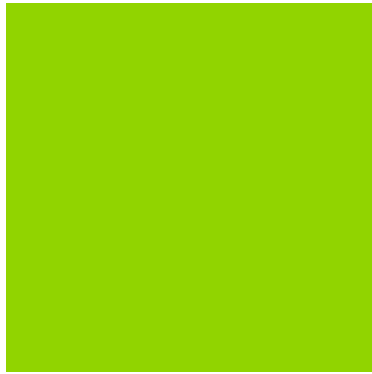
A whole-system plan has been drafted and submitted to the Scottish Government for consideration, outlining the direction of travel for the transformation of our services. This plan will provide the foundation for discussions with the Scottish Government, with the aim of securing their support and alignment to ensure that our local plans are shaped by national priorities and frameworks.

As we look to the future, we remain fully committed to shaping and advancing the Caring for Ayrshire vision. Through sustained engagement, transparent communication and collaborative working, we will continue to build on our progress to deliver meaningful and lasting transformation. 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.





11



Locality Planning

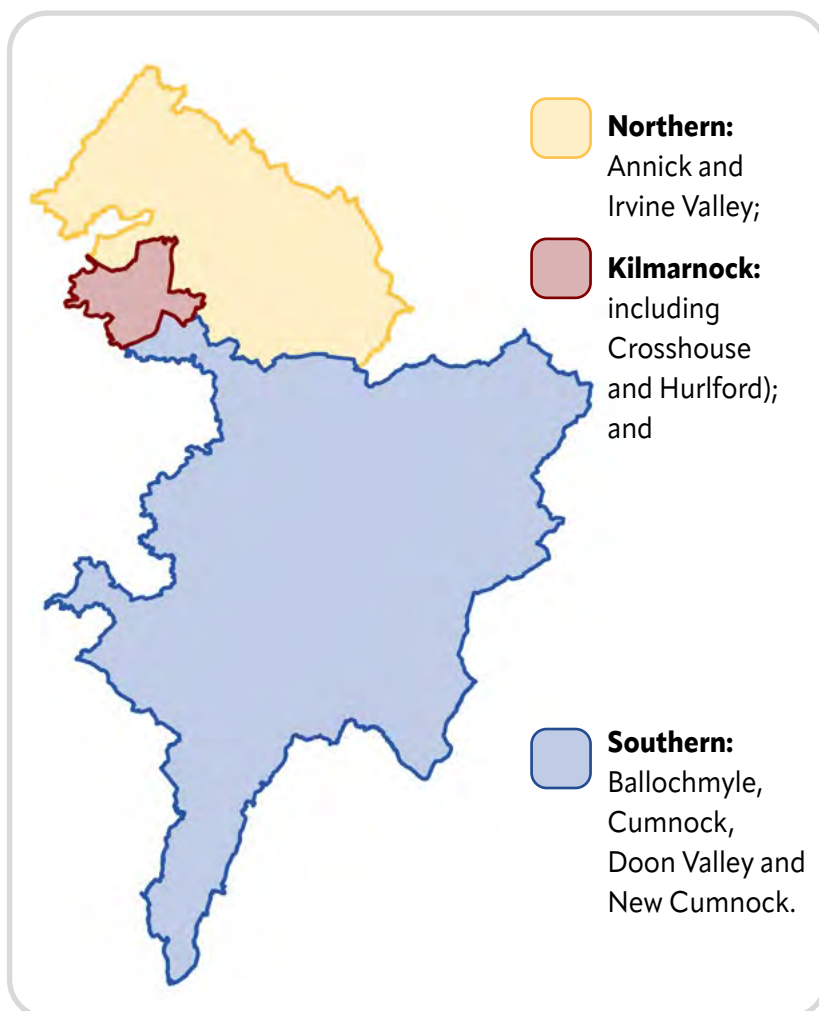
East Ayrshire Localities

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. Effective Locality Planning involves local people, services and organisations coming together in communities to collaboratively plan and deliver targeted services and interventions to improve the health and wellbeing of residents.

This requires dedicated participation from various agencies such as statutory sectors, the third sector and community-based groups, to make collective decisions and formulate actions to deliver meaningful improvements and influence how resources are targeted to meet local priorities. Locality Planning is fundamental to ensuring that the work of the HSCP in addressing inequalities is targeted where it is most needed and that the aspirations identified through the HSCP Strategic Plan and the Council's Strategic Plan are delivered at a local level, across our communities. We recognise that involving people in decisions about the services we deliver contributes greatly towards service improvement and better outcomes for residents and communities.

The East Ayrshire approach to Locality Planning was endorsed by the Community Planning Partnership Board in 2016 and three Locality areas and associated Locality Planning Groups were established, based on the three East Ayrshire HSCP boundaries:

- **Northern** - Annick and Irvine Valley;
- **Kilmarnock** - (including Crosshouse and Hurlford); and
- **Southern** - Ballochmyle, Cumnock and New Cumnock and Doon Valley.



Review of Locality Planning in East Ayrshire

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. It was clear that the key principles and objectives of Community Power were intrinsically aligned with those of Locality Planning in terms of supporting collaborative working to ensure a strong vision for service delivery and in supporting a proactive approach to building capacity in communities by forging connections for participation and integrated working between partners.

The findings from the review indicated that the previous model was proving 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 Community Planning Partnership, with a focus on cross organisational delivery of improvements that address community concerns and priorities. This integrated model of Locality Planning is envisioned to provide services with a strong foundation for greater collaboration with communities, which would allow the new approach to connect and complement the work of wider Partnership forums, community groups, networks and Community Councils, culminating in community empowerment.

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 Community Planning Partnership and our communities. The Locality Planning Groups will play a key role in strengthening and coordinating collaborative working between professionals, community groups, partner organisations, the Community Planning Partnership and the HSCP. The new model will also help us to work with and empower our communities in the planning and delivery of targeted interventions at a locality level and to improve short, medium and longer-term outcomes for people.

Locality Plans

The integration of Community Planning Partnership and HSCP Locality Planning arrangements will 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 comprise the following core sections:

- Demographic information;
- Local Outcome Improvement Plan statistics and trends;
- Local data and intelligence;
- Regional strategic and thematic priorities;
- Locally identified priorities; and
- Targeted input areas, extended information and interventions.



The Locality Planning Groups will support the development and delivery of the new integrated Locality Plans in each of the three localities and will have responsibility for regularly reviewing the progress of the Plans in delivering improved outcomes for communities across the locality and in meeting local need and capitalising on local opportunities. The Locality Planning Groups will also have responsibility for identifying and engaging on Locality Planning priorities and will in-turn support community participation and empowerment, with the role of facilitating collaboration between professionals and community members being a key remit of the Groups.

The Integrated Locality Plans will underpin our HSCP Strategic Plan and other Partnership strategies and will also 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. In respect of Community Planning, the Locality Plans will also specify targeted work to be carried out in priority neighbourhoods and will provide the Community Planning Partnership with scope to consider locality planning beyond deprived areas.

Wellbeing for All

The Wellbeing for All Participatory Budgeting (PB) Fund returned for a second year in July 2023, offering community-based groups and initiatives across East Ayrshire an opportunity to apply for funding to support priorities in each of the three Locality areas. A total of 121 applications were received and following a screening process, 92 of these applications progressed to the locality voting events. Residents voted for five projects they felt best supported the needs of their local area, with 5,063 people casting online and in-person votes in total, a significant increase from 1,031 participants in the previous year. £150,000 in funding was made available, with £50,000 allocated equally to each locality area and up to a maximum of £5,000 per candidate group.

Following this process, 39 groups across our three localities received funding which would be utilised to support a number of shared local priorities, including:

- Reducing social isolation and loneliness (72% of projects);
- Supporting mental wellbeing and physical exercise (67% of projects);
- Tackling poverty (54% of projects);
- Providing family support (46% of projects);
- Tackling stigma (33% of projects); and
- Improving safety at home and in the community (15% of projects).



A follow-up report in 2025 has identified that a wide range of local projects were either established or supported through this funding, including the creation of a Women's Mental Health Group, expanding local outreach programmes for creative engagement such as drama and art workshops, and supporting local youth groups with venue hire, resources and healthy refreshments. The Wellbeing for All initiative has demonstrated the transformative potential of empowering local communities to have a direct say in funding decisions in relation to fostering community engagement, addressing inequalities and improving wellbeing at a local level.

Parent:

"My daughter has not been able to access education in school for almost two years because of significant mental health issues. This has left her feeling incredibly isolated and lonely. Being able to take part in the CAMPS Create activities has been, with no exaggeration, a lifeline for her...the difference that the activities have made to my daughter's life cannot possibly be measured in monetary terms. I couldn't buy the joy and sense of belonging that she gets from being part of the CAMPS family"

Women's Group Attendee:

"It really helped me deal with my trauma and to be honest with other women"

Communities of Practice

The HSCP's three locality-based Communities of Practice (COP) have continued to grow over the last year with an expanding and diverse membership. These self-facilitating groups were formed in late 2023 in response to feedback from employees and delivery partners that a shared space to network, learn, problem-solve and build relationships would help to further enhance multi-disciplinary team working across East Ayrshire.

The COPs meet eight-weekly and are open to anyone working within Health and Social Care services in East Ayrshire, regardless of role or organisation. Each COP has a convenor and co-convenor who undertake 'light-touch' co-ordination roles whilst ensuring that the group meetings are self-facilitating, as members decide how they wish to use their time together and the topics they want to explore. The online Knowledge Hub resource continues to be utilised as a digital tool for COP members to share information and resources virtually. Examples of conversations that have been held at the meetings over the last year include:

- The Northern COP met at VERVE in Darvel and learning about the supports they offer to support their local community;
- The Southern COP held a recovery-focused meeting in Dalmellington where they were joined by staff from the Zone Recovery Group, the Bellsbank Project and Occupational Therapy colleagues supporting people in recovery; and
- A Kilmarnock COP meeting had a focus on Vicarious Trauma, including a thought-provoking presentation delivered by Learning and Development colleagues, followed by a question and answer session.



COP Attendee:

"I've attended all 3 COPs. I've found the sharing of current and upcoming areas of work to be really useful. I'm also making connections with colleagues"



12



Lead Partnership Arrangements

East Ayrshire Overview

Strategic planning and delivery of Primary and Urgent Care Services are delegated functions within the scope of IJBs and contractual arrangements are a retained responsibility of NHS Boards.

Under the agreed Integration Scheme, the East Ayrshire HSCP has Lead Partnership responsibility for Primary and Urgent Care Services. 'Primary Care' refers to the four independent contractors who provide the first point of contact for the population of Ayrshire and Arran. These contractors are General Practitioners (GPs), Community Pharmacists, Optometrists and General Dental Practitioners. This lead responsibility relates to:

- **General Medical Services** - 53 Independent GP Practices across Ayrshire and Arran and a Challenging Behaviour Service managed by the Board for patients who are unable to register in mainstream General Practice with a total registered practice population of 390,628 (an increase of 1,066 from previous year);
- **Community Pharmacies** - 97 community pharmacy outlets across Ayrshire and Arran;
- **Community Optometry Practices** - 45 High Street Practices across Ayrshire and Arran and 8 domiciliary only practices serving the area;
- **Dental Practices** - 64 dental practices providing general dental services (4 of which are orthodontic practices); and Public Dental Service delivered under the management of the Primary Care Dental Team and employed dentists.

Our leadership arrangements are well established across all contractor groups. Primary Urgent Care Services are delivered through the Ayrshire Urgent Care Service (AUCS) which provides a 24/7 urgent care response to the population, including out of hours General Medical Services. The service is the first point of contact for NHS 24, including further clinical assessment and scheduling appointments to the Minor Injuries Unit where appropriate. AUCS has also continued to provide a direct COVID-19 Therapeutic pathway throughout 2024/25 for eligible patients to receive treatment for symptoms of the virus and mitigate the need for further medical care or hospitalisation. The staffing model within the AUCS comprises: GPs, Advanced Nurse Practitioners (ANPs), Community Nursing, Crisis Mental Health Team, Social Work services and East Ayrshire Community Responders. Joint pathways initially implemented through the Redesign of Urgent Care (RUC), including those with Scottish Ambulance Service (SAS) to support clinical decision making for the best place of care for patients, have continued to develop over the reporting period.

Delivery of healthcare provision is a priority for all services to ensure our citizens can access the right care in the right place at the right time. Relationships with service providers across Ayrshire and Arran, including Independent Contractors, the SAS, mental health teams and acute services, continues to be strengthened to ensure provision of priority care. The effective handling of demand by in-hours primary care services has enabled urgent care to be accessible to those with the most urgent need.

General Medical Services (GMS)

All 53 Independent General Practices provide a range of NHS core services delivered through a GMS Contract. Many practices also provide a range of Enhanced Services over and above the core contracted services to ensure patients can receive access to a wider range of clinical interventions in the community without the need to access hospital services.

National data from Public Health Scotland indicates that the total number of all encounters by the whole General Practice team (extracted from 94% of practices across Scotland) increased by 5.5% in February 2025 compared to February 2024. Of these encounters, 37.1% were recorded as being direct contact between the patient and a member of the practice team (an increase of 3.6% compared to February 2024), and 82% of all direct contacts were in person, with the remaining 18% by virtual contact (technology assisted). Since the COVID-19 pandemic, GPs are caring for more patients with more complex conditions than previously.

Throughout 2024/25, General Practices continued to experience high patient demand which at times outweighed the clinical capacity available. Many Practices are experiencing challenges to recruit into vacant GP posts which also limits capacity. General Practices are being supported with a range of measures to allow them to continue to deliver and prioritise services, including:

- An enhanced schedule of Protected Learning Time throughout the year to allow practices to bring staff together to review service models and consider new ways of working;
- Support with recruitment due to the challenges being faced nationally to recruit to GP roles;
- Continuing to progress a programme of work to move General Practice to a single resilient digital telephony platform supported by NHS Ayrshire and Arran. This is done on a practice by practice basis and is continuing to be rolled out. This will offer increased functionality that will benefit general practice and provide better access for patients;
- Supporting the Centre of Excellence to support Practice Managers, and admin staff to provide robust training and mentorship; and
- To support practices with the high volume of unscheduled care demand at the end of the day an Urgent Care test of change (ToC) continues to be developed during 2024/25. Generally, all clinical resource within the practice is being utilised with unscheduled care presentations with no capacity for planned care. This involves the Ayrshire Urgent Care Services (AUCS) working alongside General Practice to support local practices with home visits between the hours of 3pm and 6pm. The model has been rolled out on a phased basis at cluster level to 51 Ayrshire practices. An evaluation will be undertaken to determine potential enhancements to provide further capacity for General Practice.

Primary Care Improvement Plan (PCIP)

The 2018 GMS Contract which continues to be implemented through the PCIP, provides the basis for an integrated health and care model with a number of additional professionals and services being aligned to general practice. This is aligned to the NHS Ayrshire and Arran Caring for Ayrshire vision of developing a whole system health and care model which focusses on individuals, families and communities with general practice and primary care providing accessible, continuing and co-ordinated care.

NHS Ayrshire and Arran were one of four Scottish NHS Boards who were successful in a bid during 2023 to be a Primary Care Phased Investment Programme (PCPIP) demonstrator site to work with the Scottish Government and NHS Healthcare Improvement Scotland (HIS). The aim is to demonstrate what a model of full implementation of the MDT (focussing on Community Treatment and Care (CTAC) and Pharmacotherapy teams) can look like in General Practice and to build evidence to understand the national context for full implementation and long-term Scottish Government investment.

Demonstrator sites have been supported to work at pace using improvement methodologies to fully implement elements of the 2018 GMS Contract focussing on the contractual elements of Pharmacotherapy and CTAC locally. It seeks to understand the impact for people, the workforce and the healthcare system, with a reduction in GP Practice workload being the key aim to improve patient outcomes.

The 18-month nationally funded programme started in April 2024 and is being supported by local programme and quality improvement teams. Key elements of the programme for NHS Ayrshire and Arran Pharmacotherapy are to:

- Expand the Pharmacy Support Worker role in delivering the service;
- Clearly define role of each member of the team (right person, right task);
- Expand Pharmacy hubs (skill mix and resilience);
- Develop a supervision / preceptorship programme to improve Pharmacists' confidence in clinical decision making and risk management; and
- Test and evaluate the Advanced Pharmacist Practitioner role.

The key elements of the programme for NHS Ayrshire and Arran CTAC are to:

- Expand and further develop the CTAC resilience model ensuring sustainability of the CTAC service and ongoing support for General Practice during times of long-term absence or maternity leave;
- Testing an adapted skill mix for resilience to inform future workforce planning and service delivery models;
- Continuation and further development of the Primary Care Practice Educator role across the three HSCPs;
- Work in partnership with General Practice colleagues to undertake a further audit of demand and activity;
- Develop systems to capture reliable, ongoing data around CTAC activity at both GP practice and HSCP level; and
- Engage with key stakeholders including local populations to evaluate current service delivery and inform areas for improvement.

Pharmacotherapy and CTAC teams have been working over the past year to implement the key elements of the programme locally, which is supported by a robust governance framework and programme management. Local Quality Improvement colleagues have been supporting Pharmacotherapy and CTAC teams in the collection of data for improvement for the key elements of the programme. Details of progress made during 2024/25 are set out below.

Pharmacotherapy

The Pharmacotherapy service is provided to all GP Practices across Ayrshire and Arran and while full implementation of the Contract has not been achieved, developments to improve efficiencies in systems and processes will be reviewed to ensure Pharmacotherapy teams deliver the best possible service and add maximum benefits for patients. The delivery model has continuously been refined, including adjusting the ratio of Pharmacists, Pharmacy Technicians, and the introduction of Pharmacy Support Workers. The skill mix has developed over time as the service continues to promote advanced practice roles and ensuring that professionals are working to the top of their licence.

New roles have recently been introduced to the team as part of the PCPIP programme, including Pharmacy Support Worker Team Leaders and Advanced Pharmacist Practitioners. These new roles will be evaluated as part of the programme. Central hubs have also expanded and are now covering all three Ayrshire HSCPs to provide some resilience cover for the Pharmacy Technician workload. Polypharmacy reviews are an area of national and local focus and this, along with prescribing improvement activities, are and will remain important aspects of service delivery by Pharmacy colleagues working in our General Practice network.

Learnings from the current PCPIP programme will inform the ongoing development of the service. This, along with Quality Improvement support from NHS Healthcare Improvement Scotland (HIS) and local quality improvement teams, will support a closer review of processes at scale. Variation across the service both in terms of skills and confidence of pharmacy teams, along with practice and processes in General Practice continues to be challenging. Standardisation of processes and the development of staff will continue to be priorities for the leadership team within Pharmacotherapy.

Community Treatment and Care (CTAC) Nursing

In line with the 2018 GMS contract, a CTAC model was developed and implemented between 2020-2022. Following extensive consultation, there was an agreement that the model would be practice based and seamless for patients accessing the service. The workforce consisted of 90 WTE staff, 58 WTE Nurses and 32 WTE Healthcare Support Workers (HCSWs). In addition, there are 3 WTE CTAC Team Leaders, with 1 aligned per HSCP to manage the staff. A total of 52 GP Practices have full access to CTAC services. There is also a successful hub model in South Ayrshire, which has supported instances where accommodation within GP Practices has been challenging. In 2023, the model was further enhanced with the introduction of a staff resilience model to provide cover for maternity and long-term absence to prevent workload falling back to General Practice over a longer period of time. In addition, a Practice Educator role was tested to provide a robust education and supervision model whilst implementing the service specification.

The CTAC element of the PCPIP bid focussed on the continuation and expansion of the resilience model with a focus on testing an adapted skill mix for resilience with a 2:1 ratio of HCSWs to Nurses. It is anticipated that this will inform future skill mix requirements for the CTAC model which is based on a 2:1 ratio of Nurses to HCSW. The Practice Educators and resilience staff are currently in post until September 2025 in line with the PCPIP funding. In addition, a further 12 HCSWs were recruited to provide enhanced resilience cover. The additional posts were recruited in December and it is anticipated the full impact of the additional staff will be tested between April and September 2025.

A further week of care audit was undertaken in September 2024, which demonstrated that CTAC staff were undertaking 85% of CTAC activities. Several weeks of national care audits are also being undertaken in each of the demonstrator sites in April, June and September 2025, which will inform the next steps. Work is also underway to capture feedback from stakeholders, including a carer survey which has been developed and will be delivered in 6 GP Practices in April 2025. Staff surveys will also inform this improvement work.

Multi Disciplinary Teams in General Practice

As part of the 2018 GMS Contract, additional professional roles within General Practice continue to be rolled out and maintained against a challenging backdrop. Primary Care, MDT Services and General Practices work collaboratively to support, mitigate and identify workaround solutions to key challenges recognised nationally across all Health Boards, including: financial, accommodation, staff absences, retention and recruitment. The number of GP Practices (from a total of 53), with access to a first point of contact Musculoskeletal (MSK) Physiotherapist Practitioner has fluctuated during 2024/25, from 43 to 45. This is attributed to an ongoing review of PCIP budgets, a depleted recruitment pool, and lack of accommodation space within GP Practices.

The number of GP Practices with access to a Mental Health Practitioner (MHP) in 2024/25 has ranged between 44 and 52, predominantly due to long term staff absences and budget restrictions. MHP service teams within the three Ayrshire HSCPs have worked together to align their service models, particularly appointment schedules to incorporate the NHS Agenda for Change Reduced Working Week (from 37.5 hours to 37 hours during 2024/25). A redesign of the North Ayrshire MHP model to identify improvements will continue into 2025/26. The number of GP Practices with access to Community Link Workers / a Community Connector service has ranged between 49 and 53 across Ayrshire and Arran during 2024/25. The delivery models vary across each HSCP due to alignment with the wider HSCP priorities based on population need. Across the three localities, the MHP service sees an average of 1,100 people per month, equating to approximately 13,200 per calendar year.

Recruitment of key MDT roles will continue throughout 2025/26 within the current financial allocation of the Primary Care Improvement Fund to ensure implementation of the PCIP to date is sustained. Due to national funding constraints, there is a high risk of not being able to provide these services across all practices in Ayrshire and Arran, creating variance across GP Practices and inequity of access. MDT Leads will continue to review their workforce and service areas to ensure equitable access across all GP Practices.

Ayrshire Urgent Care Service (AUCS)

During 2024/25, the AUCS continued to develop models and pathways to meet the urgent care needs of communities across Ayrshire and Arran, working alongside key partners. As well as providing General Medical Services during the out of hours period, this included the further development of pathways supported by the Flow Navigation Centre (FNC) and the continued use of the COVID-19 Therapeutics pathway.

The GP out of hours (OOH) service operates between 6pm and 8am Monday to Thursday and from 6pm Friday through to 8am Monday as well as providing 24 hour cover during public holidays. During the past year, the OOH Service completed 19,900 Primary Care Treatment Centre (PCTC) appointments, undertook 46,865 clinical assessment telephone calls and provided 10,463 Home Visits. On average, this accounts for approximately 55 PCTC appointments per day, 128 clinical assessment calls per day and 29 home visits per day. The demand varied depending on the day of the week and significantly increased at weekends and during public holidays, with 60% of all contacts being dealt with at the weekend.



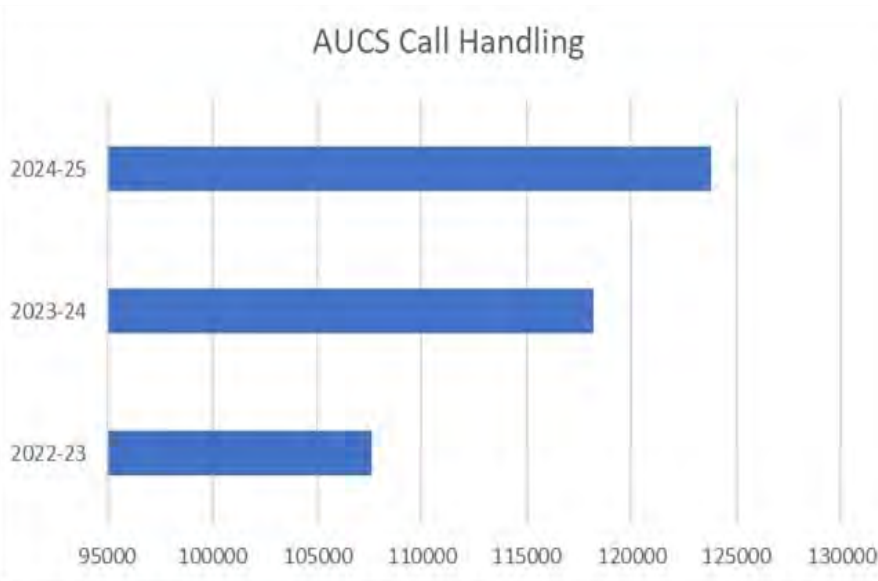
In 2023/24, the service reported an average of 92% of patients being clinically assessed within the set timeframe from NHS 24. This has remained at this level (92%) for 2024/25 and reflects the continued improvements to pathways and clinical resources with a consistent number of Clinicians actively undertaking sessional shifts with the service. Factors impacting this performance includes periods of high demand where Clinicians will prioritise the most vulnerable patients, particularly calls received with 1 and 2 hour response times, and patients who are non-contactable for several hours following receipt of the case from NHS 24.

Throughout 2024/25, the AUCS has continued to embed numerous pathways originally introduced through the Redesign of Urgent Care via the GP led Flow Navigation Centre (FNC). The main service focus is to support a further improved patient journey with development and implementation of innovative pathways which benefit patients as well as the wider system. The FNC manages on average 950 calls per month over and above the GP OOH activity. Only 14% of the calls from patients received via the FNC attend hospital within 48 hours, 21% of which are appointed to a Minor Injuries Unit (MIU) or Emergency Department (ED).

Patients who believe they may need to attend the ED are directed to contact NHS 24 (111) as a first point of contact. NHS 24 assess the patient's needs and then route those who require further assessment to the FNC within AUCS over the 24/7 period. The Senior Clinician assesses the patient remotely to determine the best outcome through the most appropriate care pathway which could include referral to Community Pharmacy, Opticians, falls pathways, Mental Health teams, their GP Practice during normal opening hours or a Clinician in the Out of Hours service. During 2024/25, a total of 3,559 people were provided with appointments at a MIU or the ED following contact with the FNC, an average of 10 per day. Over 4,200 calls from patients (average of 12 per day) were provided with treatment or care through a telephone assessment with the FNC and did not require referral to any other service or pathway, compared to 1,339 in the previous year.

The Care and Nursing Home pathway provides access to AUCS/FNC during the OOH period to ensure direct contact with the right Clinician in a timely manner. This reduces delays for care and nursing home residents that could be experienced when using the NHS 24 route. The FNC receives an average of 690 contacts per month via this pathway for care/nursing home residents with 628 people per month treated within their own home setting. Only 9% of residents required to attend hospital following contact with this pathway.

Chart 3. AUCS Call Activity: 2022/23 – 2024/25



The AUCS Call Handling service continues to have the highest volume of activity within the OOH service, acting as the single point of contact for a variety of East, North and South Ayrshire HSCP services, including Care at Home, Out of Hours Social Work and District Nursing Services. The service now incorporates the Palliative End of Life Support Line for patients and their families accessing support during the final four weeks of life. 2024/25 saw an increase in calls handled by the service, reaching a total of 123,817 calls throughout the year, reflecting an increase of 4.7% (5,611 calls) from 2023/24.

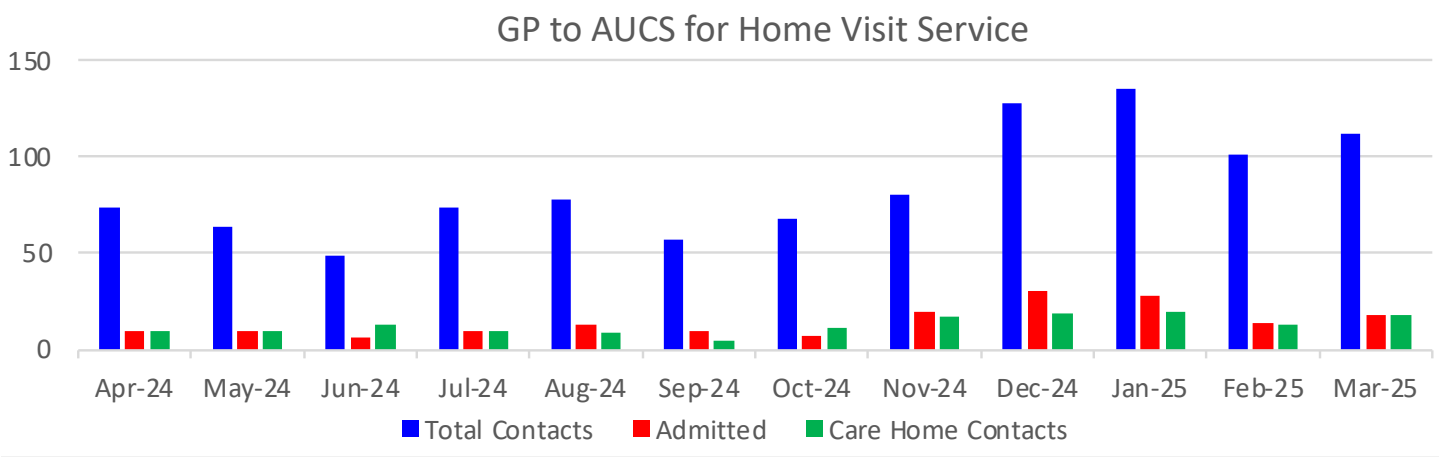
The Call Before Convey Pathway, as part of the FNC, ensures that the SAS is supported in clinical decision making for specific patients in line with medical needs. During 2024/25, monthly referrals through this pathway averaged 278 and 92% of which did not require a SAS crew to convey the patient to the hospital. The FNC also supports SAS crews in-hours to contact a patient’s GP Practice when this is more appropriate. The Community Pharmacy Professional pathway into AUCS operates in the out of hours period when an AUCS/FNC Senior Clinical decision maker supports Community Pharmacists to avoid the referral of patients into hospital. Prior to this pathway, patients would normally be directed to NHS 24 if Community Pharmacy were unable to help, therefore reducing the amount of services the patient has to navigate through. In 2024/25, a total of 848 referrals were received into FNC from Community Pharmacy.

The Palliative End of Life Support Line (PEOL) went live in early October 2023 and was created to facilitate a single point of contact for palliative patients for end of life care through the FNC using existing call handling services. The service is designed to enable timely management of unscheduled care episodes for palliative patients in the community and to address care needs effectively in the home setting and to prevent hospital admissions which may not be of benefit to them. A total of 140 patients with 531 contacts were referred to the service during 2024/25.

An additional Emergency Services Mental Health (ESMHP) pathway, in conjunction with Police Scotland and SAS, ensures referrals for mental health related calls which do not require emergency medical intervention, are directed to the FNC. This 24/7 service is a whole life pathway with no upper or lower age limits. Activity averages 170 patients per month directed through this pathway with 100% supported within the community. This mitigates the need to attend an ED which may not be the most appropriate place for the specific care needed by these vulnerable individuals. NHS Ayrshire and Arran continues to promote the pathway and work across national improvement networks to refine and enhance the service.

A General Practice Urgent Care Test of Change (ToC) continued to be developed during 2024/25 with AUCS working alongside General Practice to support with weekday home visits between 3pm and 6pm. This was developed recognising the local and national access issues to GPs and the impact on General Practice when patients present late in the afternoon with an urgent care need requiring a house visit, and the requirement to ensure there is sufficient workforce in place to respond to this on a daily basis. To ensure safe delivery of the ToC, it was rolled out throughout 2024/25 on a phased basis at a GP Cluster level to ensure activity could be monitored and evaluated. This has now been rolled out and is accessible to 51 GP Practices in Ayrshire, with 41 regularly using the service. During 2024/25, a total of 1,020 patients were seen by an AUCS Clinician as part of the ToC, with only 17% of these requiring onward admission to hospital.

Chart 4. GP to AUCS Home Visit Service Activity: 2024/25

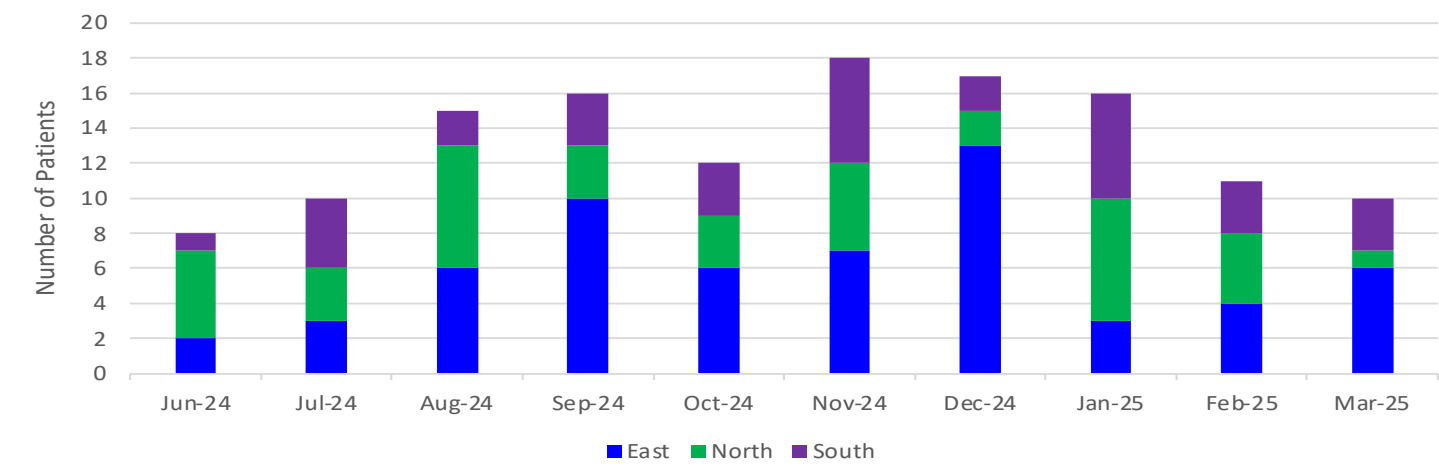


In early 2024, a review was undertaken of the community nursing model and the model of care delivery for palliative and end of life patients. This considered the future support needs of those who may require end of life care, and how this links with our wider whole system approach. The outcome of the review, to ensure best value and sustain continuing care for this cohort, was to move delivery “in-house” seamlessly migrating it into AUCS at the end of May 2024. Since June 2024, total of 133 patients have benefited from the service with a total of 418 contacts with these patients. 76% of patients requested a seven night per week cover with 72% of patients requiring this cover for one week or less. To date, 96% of patients have also been kept in their preferred place of care.

The COVID-19 Therapeutic service is delivered through the AUCS within the COVID Treatment Centre. This supports the most vulnerable group of patients deemed as very high risk of progression to severe disease and/or death if they develop COVID symptoms and test positive for the virus. Patients can also self-refer or request via their GP if they think they are eligible for treatment. The frequency of COVID outbreaks has reduced during the past 12 months, resulting in fewer people being referred for treatment. Between January and December 2024, there were 278 patient referrals (a decrease of 55% compared to referrals received in 2023/24), with 198 of these patients being suitable to be treated within the service. Within this cohort, only one went on to be admitted to secondary care for further care specifically for COVID-19. Due to the decreasing numbers, this service is currently under review to consider all options of care for these patients.

Ayrshire and Arran have the second highest Chronic Obstructive Pulmonary Disease (COPD) rate in Scotland, with emergency COPD admissions being 34% longer than other emergency admissions. The vision for this service which used a targeted and data driven approach to delivery is to enable patients to remain at home whenever possible. The aims of this service are to: provide specialist respiratory support during exacerbations; improve patients’ ability and confidence to self-manage symptoms; and support earlier discharge from hospital. Throughout 2024/25, the service has continued to support patients to enable them to remain at home wherever possible and now covers 76% of all COPD registered patients in Ayrshire through collaboration with 31 GP Practices. There were 10,698 patient contacts from April 2024 to March 2025 and the service now has over 1,100 patients registered. The service has introduced alerts via Trakcare to facilitate early supported discharge for this cohort, which has benefited nearly 200 patients to date.

Chart 5. COPD Patient Contacts: June 2024 - March 2025

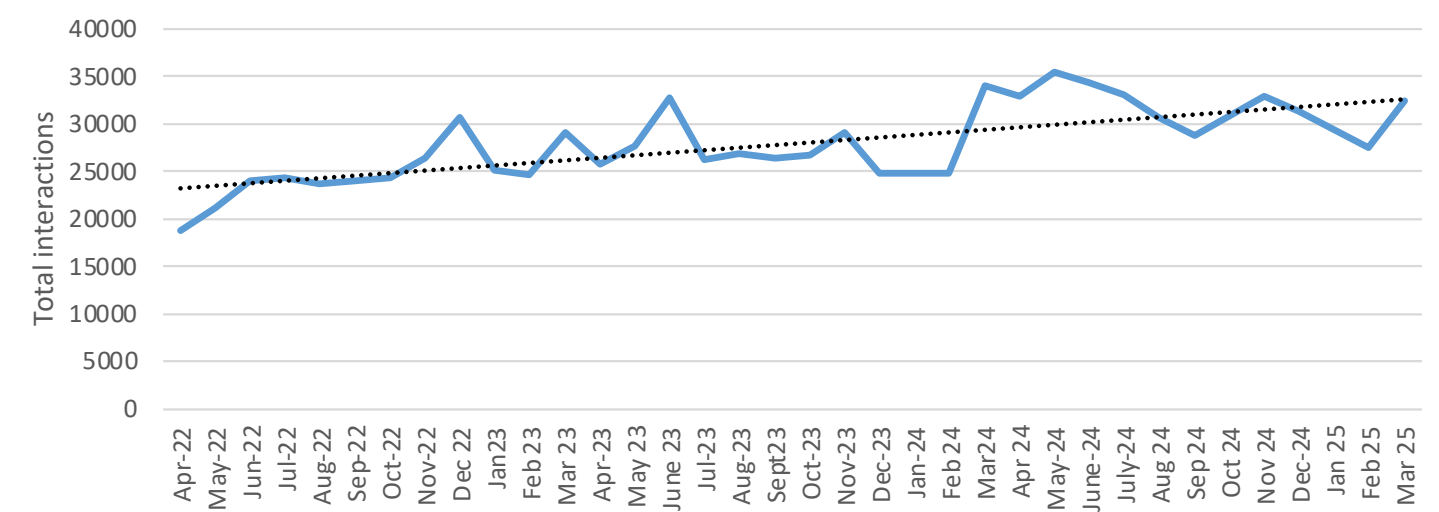


Throughout 2024/25, Community Pharmacies have continued to provide a fully comprehensive service as a first point of contact for the public as an alternative to attending a primary care provider. The NHS Pharmacy First Scotland service was introduced on 29 July 2020 in Community Pharmacies which contributes to urgent care delivery being the first contact for patients for a range of common clinical conditions. Patients who may have previously needed to see a GP or attend out of hours services can access appropriate care through this service which is available to all patients resident in Scotland or registered with a Scottish GP. Currently, all 97 pharmacies in Ayrshire and Arran deliver this service, providing advice and treatment (if appropriate) which includes urinary tract infections (UTIs) for women aged over 16, impetigo, shingles, skin infections and a hay fever service where treatments that were previously only available via prescription can be provided from Community Pharmacy. As displayed below, activity has increased year on year, which demonstrates the volume of patients who continue to attend their local Pharmacy as a first point of care in the community.

Table 14. Community Pharmacy Activity: 2023/24 – 2024/25

Activity Claimed	2023/24	2024/25
Number of Items dispensed under Pharmacy First	289,170	321,713
Instances Where Advice given	34,702	55,323
Referrals	14,939	17,823

Chart 6. NHS Pharmacy First Scotland Interactions: April 2022 – March 2025



In addition, 48 of the 97 Community Pharmacies in Ayrshire and Arran now have Pharmacist Independent Prescribers which allows them to offer the Pharmacy First Plus service. This enhances the Pharmacy First service to include assessment and treatment of acute common clinical conditions, thus reducing the need for onward referral of patients to other healthcare providers. The number of Community Pharmacies able to offer this enhanced provision continues to grow as more Pharmacists undergo the training and gain the independent prescribing qualification. In addition to the national services available, locally negotiated services are also available which have been specifically developed with the needs of local populations in mind. Not only are Community Pharmacy able to treat common ailments and provide treatment, they are also an accessible source for patients to obtain information and guidance to help prevent illness. Working with the local NHS Ayrshire and Arran Community Pharmacy Committee, Ayrshire and Arran successfully launched the first of a rolling programme of Protected Learning Time (PLT) for Community Pharmacy in 2024. This allows Community Pharmacies the opportunity to close a half day every three months to deliver staff training in the same way as GP colleagues. This has been well received and will be continuing throughout 2025/26, sharing ideas for learning across the local pharmacy network following each session.

Community Optometry

Community Optometrists provide a first point of treatment for minor eye ailments. If people require medicine for a basic eye problem, this is provided free of charge from the Community Pharmacy through Pharmacy First Scotland. An increasing number of Optometrists are now Independent Prescribers. There are currently 50 Independent Prescribers based within 28 Community Optometry Practices who can now also manage complex eye issues by prescribing medicines such as topical steroids and oral antibiotics. This reduces the number of referrals to secondary care. Community Optometry provides a range of services in addition to routine eye examinations and dispensing glasses. Optometry Practices can carry out post-operative cataract reviews, some are accredited to undertake Diabetic Eye Screening and some provide the Low Vision Aid service. During 2024/25, a number of developments were progressed to enhance local Community Optometry provision, including:

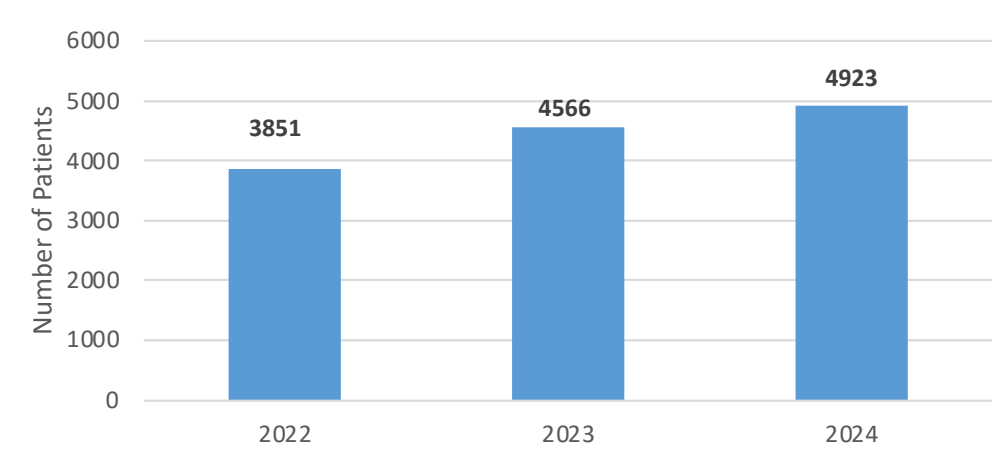
- The first Early Career Education day took place catering for Optometrists who have qualified since March 2020. This event was a success, with a wide range of lectures and teaching delivered by Optometry Clinical Specialists. Feedback from attendees was excellent and helped to increase knowledge and build relationships with secondary care;
- A pathway for Anterior Uveitis management / screening was developed to support children who have Juvenile Idiopathic Arthritis which can lead to Anterior uveitis;
- The national General Ophthalmic Services Specialist Supplementary Service will roll out from August 2025. This will involve Independent Prescribing Optometrist treating 10 more challenging conditions, including Anterior Uveitis. This initiative enables the inter-referral from an Optometrist to an IP Optometrist, allowing more people to be treated closer to home in the community; and
- Community Optometrists have access to digital clinical systems such as Clinical Portal, which enables better patient management. Work is also underway to further develop new pathways and determine further areas of ophthalmic care which can transition into a community setting. For example, four Community Optometry practices are signed up to deliver a Community Glaucoma Service, which is anticipated to be implemented by late 2025. There are also more Optometrists undergoing training to further enhance this service.

Dental Services

There are 64 General Dental Practices in Ayrshire and Arran (four of which are Orthodontic only practices), which provide NHS dental care to patients, of which 30% are currently accepting new NHS patients (some with restrictions in place). Patients unable to register with an NHS Dentist can access routine and emergency appointments provided by the Public Dental Service (PDS). Recruitment of Dental Practitioners into vacant posts within General Dental Practitioners and the PDS continues to be a key challenge across Ayrshire and Arran. Recognising the workforce and access challenges, as well as the opportunity to enhance what we can deliver in Ayrshire and Arran collectively across all Dental services, a programme of work commenced in 2023/24 and continues to be developed to reset the vision and strategy for Dental services. This will provide a greater understanding of the population need, the current status of all Dental services and determine what a future delivery model for Dental services could look like.

The chart below displays the emergency care activity of the PDS over the last three years. In 2024, 8% more patients attended emergency care appointments compared to 2023. Although the rate of increase in patients accessing emergency care is slowing, the cumulative effect of previous years mean that service demand has increased by 28% since 2022. Based on activity during the first three months of 2025, demand for emergency care is projected to match or exceed that of 2024.

Chart 7. Emergency Care Attendance (Weekday and Weekend): 2022 - 2024



Many patients who had not seen a Dentist for an extended period of time during the COVID-19 pandemic restrictions now require more complex and extensive treatment. This requires longer appointment slots from Dental Practices, resulting in less capacity for routine care. This, along with high demand for dental care in general and increasing waiting lists, has resulted in more patients seeking emergency dental treatment.

Table 15. PDS Referrals by Age Group: 2022 - 2025

Activity Claimed	2022	2023	2024	2025 (up to 31 March)
Adult Referrals	1,227	1,376	1,279	286
Paediatric Referrals	1,354	1,695	1,576	312
Total	2,581	3,071	2,855	598

The overall number of referrals to the PDS remains above pre-pandemic rates, however adult referrals are slowly returning to normal. During 2024, paediatric referrals were 28% higher than in 2019. Over the past year, the PDS has delivered several waiting list initiatives to reduce the number of patients awaiting assessment, which has led to significant improvements. The number of patients on the Paediatric waiting list has reduced by 30% and the Adult waiting list by 89%. At the end of 2024/25, all patients were waiting 18 weeks or less for an assessment appointment which is within national timescales. This work will continue, along with a review of the waiting list to ensure that the time interval between appointments and overall time taken to complete courses of treatment remain within normal expectations. Due to HMP Kilmarnock implementing changes to its service model, the number of prisoners on the dental waiting list has increased significantly, resulting in compliance with the 18 week referral time dropping from 90% to 38% within the reporting period. In response, the Primary Care Dental Management Team are working with the Scottish Prison Service to improve this and increase the numbers of patients being seen.

Oral Health prevention is a key priority across Ayrshire and Arran. The Oral Health Improvement Team continue to strengthen links within the community, delivering local training programmes to educate the population regarding good oral health practices, with a focus on prevention and providing support for local groups and events. The team deliver training and interventions for priority groups following recognised national training programmes. The training programmes are tailored to the needs of the population within each of the priority groups. During 2024/25, the team have provided 131 training sessions across all programmes with a total of 908 staff trained. The team also attended 230 community events/drop-in sessions with a total of 7,472 interventions made, offering oral health advice and help to find a dentist.



The Childsmile team is responsible for the delivery of the Toothbrushing and Fluoride Varnish (FV) Programme. FV is delivered in all priority early years centres and primary schools from age 2 through to primary 4, again targeted to areas of the highest dental decay and deprivation. In total, 7,480 children received one fluoride varnish application in the 2023/24 school year. A total of 1,475 children receiving FV were then offered additional support from the Childsmile team. Supervised toothbrushing was also delivered in 256 early education settings across Ayrshire and Arran between August 2024 and March 2025. Throughout the past year, a Childsmile Dental Health Support Worker provided additional Childsmile information to families at local community events, attending 118 events with a total of 2,251 contacts made.



The SIMD1 project was launched in 2023, which focusses on reducing oral health inequalities specifically targeted at 0-5 year olds in SIMD1 areas and within ethnic minority groups. A total of 613 children have been contacted and offered support by the Childsmile Dental Health Support Workers during 2024. These children were signposted to Dental services, assisted with dental registration and offered oral health advice. A number of key priorities will be taken forward in 2025:

- Continue to ensure an appropriate skill mix and workforce to maintain core PDS provision for vulnerable populations to access services and expedite the recruitment of clinical posts to increase service deliver;
- Continue to explore organisational resilience and how necessary processes could be supported and expedited such as recruitment and procurement;
- Identify funding sources and financial incentives for recruitment, retention and ongoing service provision;
- Continue to prioritise prevention and oral health improvement to reduce the possible burden of dental disease and mitigate the impact of reduced dental access; and
- Implement the Oral Health Improvement Action Plan and re-orientation of the Childsmile Programme.

The Scottish Government launched a new Dental Payment Reform on 1 November 2023 (Determination 1), which went live with the purpose of supporting the oral health needs of every patient in Scotland. The aim of the Reform is to make it easier for patients to understand what treatments are available and it has made changes to simplify the remuneration for Dental Practices. In order to evaluate Determination 1 and understand the ways in which the new payment structure has enabled Dental Practices to improve the quality of care provided to their patients, the Quality Improvement Activity Cycle for 2022-25 will gather information from Dental Practices via a team-based reflective report, an Equality and Diversity online training module and a practice-level workforce census. The new 3-year Quality Improvement Cycle commences in August 2025, and the Scottish Government will announce the programme of work which will be supported by the General Dental Services Team and Area Dental Professional Committee.

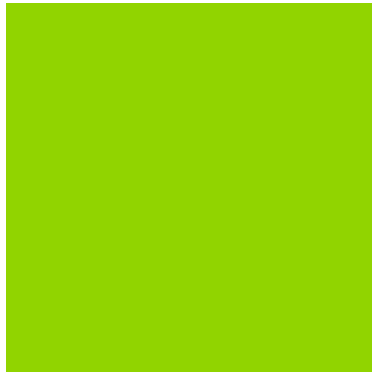
Other Lead Partnership Arrangements in Ayrshire

The North Ayrshire HSCP is the lead Partnership in Ayrshire for specialist and in-patient Mental Health services and some Early Years services. These responsibilities include the planning of: all Mental Health in-patient services, Learning Disability Assessment and Treatment services, Child and Adolescent Mental Health services, Psychology services, the Children's Immunisation Team and the Infant Feeding service.

The South Ayrshire HSCP is the lead Partnership in Ayrshire for the Integrated Continence Service, the Family Nurse Partnership and the Community Equipment Store. The Integrated Continence Service provides access to intermediate clinics across Ayrshire and Arran, in addition to an advisory service to support Community Nursing and Care Home teams. The Family Nurse Partnership provides an advisory service, supporting first time parents aged 19 years or under to improve outcomes within young families. The Community Equipment Store supports the provision of various equipment such as hospital beds, mattresses, slings and hoists to enable people to remain and be cared for in their own homes, supporting timely hospital discharges and contributing towards avoiding hospital admission.



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Looking Ahead

The East Ayrshire Health and Social Care Partnership is committed to delivering high quality, person-centred care that adapts to meet the evolving needs of our residents, while operating in a backdrop of significant financial and whole system pressures.

East Ayrshire HSCP Strategic Plan

The Partnership's Strategic Plan outlines our commitment to meeting the needs of local communities and to deliver the best possible outcomes for people at all life stages, with a focus on six strategic priority areas to achieve these ambitions. 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.

As part of a statutory three-year update, a refreshed [Strategic Plan](#) covering the 2024-27 period was developed in 2024, informed by a comprehensive period of stakeholder engagement, including: an online survey, workforce conversations, facilitated discussions with key groups and local networks, social media posts and online conversations hosted on the HSCP Living Well and Engagement East Ayrshire platforms. The revised Plan continues to centre on the 'triple aim' of better care, better health and better value, and sets out the role of delivery partners in all health and social care settings to promote these ambitions whilst working together to uphold human rights through person and family-centred practice. The 2024-27 Plan was approved by the IJB on 26 June 2024, and was then presented to East Ayrshire Council on 27 June and NHS Ayrshire and Arran Board on 12 August 2024. The Strategic Planning and Wellbeing Delivery Plan Group continues to oversee the delivery of the Strategic Plan, as we work together with our delivery partners and communities to support people's health and wellbeing across East Ayrshire.

In working towards key ambitions, the Partnership has set out short, medium and long term objectives aligned to six core strategic commissioning intentions within its Strategic Plan, covering the 2021-30 period. A focus will be placed on the following areas until 2027:



Starting Well, Living Well and Dying Well

- Delivering improvement in the priority areas identified in the Children and Young People's Services Plan 2023-2026: respecting and promoting children and young people's rights, tackling poverty, keeping safe, achieving potential and improving mental health and wellbeing;
- Continuing to improve access to independent advocacy support through the implementation of our Independent Advocacy Strategic Plan 2024-2027;
- Improving access to comprehensive wellbeing and self-management information, resources and supports;
- Delivering a Recovery Oriented System of Care for drugs and alcohol via the Alcohol and Drugs Partnership Strategic Plan 2024-2027; and
- Continuing to increase choice and co-ordination of support for people who are at the end of life, striving to make this as close to home as possible.

Caring for East Ayrshire

- Working alongside community planning partners, collaborating and co-ordinating at local, regional and national levels to maximise opportunities across all sectors aligned to the Ayrshire Growth Deal, Community Wealth Building, Primary Care, town and community regeneration and school investment programmes; and
- Continue our place-based redesign work across East Ayrshire.

People at the Heart of What We Do

- Develop Multidisciplinary Teams to offer seamless care, provide targeted support for those with greatest need to enhance the quality and level of care and support available;
- Develop Multidisciplinary Teams that meet regularly and follow processes which have robust clinical and care governance arrangements to enable issue identification, escalation and resolution;
- Establish pathways so that people benefit from access to the right care, from the right person at the right time as their needs change;
- Improve support for people, families and carers affected by recent cancer diagnoses, for both clinical and social needs;
- Enable implementation through organisational development, physical or virtual co-location and learning and development, facilitating cross-fertilisation of skills; and
- Use the SCIROCCO Framework and the Framework for Community Health and Social Care Integrated Services (graphic shown below) to support our work on integration.

Caring for Our Workforce

- Assessing organisational understanding of racism and any structural barriers that may exist within, delivering a strategic response to ensure equal, fair and proportionate access to employment and representation in the workforce;
- Continuing to invest in the workforce to become an employer of choice attracting and retaining the right people through training, development, support and providing career opportunities;
- Succession planning to ensure our workforce is sustainable and has the right skills as we move forward; and
- Building a flexible workforce of people with transferrable skills that recognises and makes best use of expertise.

Safe and Protected

- Keeping children and young people safe by delivering the Child Protection Committee Improvement Plan 2024-27;
- Reducing violence against women and girls and reducing the negative impacts of violence on women and children by delivering the East Ayrshire Violence Against Women Partnership Strategic Plan 2024-27;
- Supporting children who have experienced domestic abuse to stay safe and together with their non-abusive parent by delivering the Safe and Together Implementation Plan;
- Keeping adults at risk of harm safe by improving prevention and early intervention approaches through the Adult Support and Protection Improvement Plan;
- Improving the delivery of prison-based healthcare and links with community services the Health Needs Assessment Delivery Plan; and
- Reduce offending in the community through developing a Justice Early Intervention Service which effectively addresses risk factors that lead to offending.

Digital Connections

- Focus on supporting people in their home environment with adopting a home first and digital first approach;
- Ensuring the workforce is supported to develop the skills to effectively use technology;
- Continuing to develop the use of digital solutions at the centre of clinical and support activity across service redesign; and
- Developing systems that effectively share information, to reduce duplication and support rights, choice and family situations.

Service Improvement Plans

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 are available to view upon request.

Getting it Right for the People and Communities of East Ayrshire

Our Strategic Plan continues to provide a collective framework for the planning, commissioning and delivery of integrated health and social care services in East Ayrshire. The Plan is fundamentally centred on improving health and wellbeing outcomes for people, and aims to deliver this through achieving the objectives aligned to our six strategic commissioning intentions, as set out above. Our empowered, flexible and place-based approach to service delivery, in addition to ensuring close collaboration between services, partners and communities, will continue to be vital in this shared journey.

The Partnership's vision and strategic priorities continue to align with the Caring for Ayrshire transformation programme and the national Health and Social Care Delivery Plan's 'triple aim' of better care, better health, and better value. We will continue to shift the balance of care to community settings through an early intervention and prevention approach, and we will endeavour to ensure that people receive the right support, in the right place and at the right time. We recognise that the promotion of good health and wellbeing within communities, and the provision of high quality, accessible and sustainable services, supported by open and positive commissioning conversations, will be crucial to achieving this.

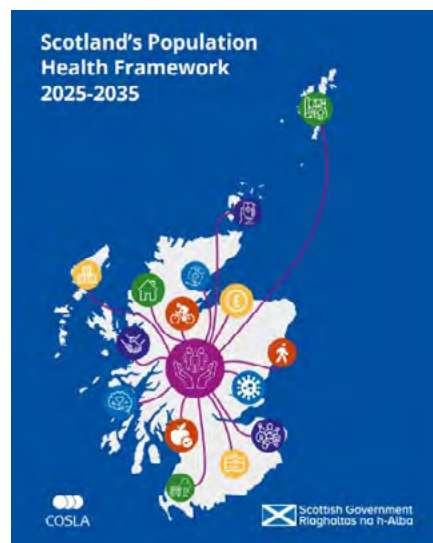
In looking ahead to the coming year, the HSCP faces significant challenges, stemming from financial pressures, increasing service demands and demographic shifts. These factors, along with ongoing policy reforms, create a complex and evolving landscape for the Partnership to navigate. These financial challenges have been identified in successive annual reports, with Audit Scotland highlighting financial sustainability as a key issue for going forward. In respect of this situation, 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 resources available to the Partnership. Implementing our programme of cross-cutting best value reviews will support this over the next year, with work currently underway to review presenting demand at the initial point of contact across adult services with a view to improve how we can better manage demand at the 'front door', working collaboratively with all delivery partners.

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.

Three key reform publications linked to Scotland's Population Health Framework 2025-35 were recently published by the Scottish Government. The Population Health Framework is a 10-year strategy to improve life expectancy and close the health deprivation gap across Scotland. The Operational Improvement Plan compliments the Framework by detailing immediate service improvements, and the Health and Social Care Service Renewal Framework proposes how health and social care services are reshaped to be more sustainable and prevention focussed. Together, these provide the basis for national and local action, and we will look to take this agenda forward locally, building on our existing strategic approach.

We will continue to invest effort and resources to strengthen service integration in East Ayrshire, including promoting and embedding multi-disciplinary team working across our localities. Making new connections and further developing relationships between local services and delivery partners will be central to achieving this and our Communities of Practice Groups will continue to facilitate this work in 2025/26. The HSCP's Partnership Provider Statement as our Market Facilitation Statement, will be collaboratively refreshed with our commissioning and delivery partners in 2025, to reaffirm our commitment to collaborative commissioning and the values and principles that we want to embed as a care community.

Our approach to digital innovation and technology enabled care has gathered pace over the past 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 health and wellbeing outcomes for people who use services. The expansion of technology across East Ayrshire 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 health and wellbeing in the community.



As evidenced in this Report, progress continued throughout 2024/25 in further embedding the aspirations and values of 'The Promise' within our operational practice. We have also continued to make progress with our partners in delivering the East Ayrshire Corporate Parenting Action Plan, and in locally embedding the United Nations Convention on the Rights of the Child, which will continue to be prioritised into the next year. The HSCP remains fully committed to developing its local approaches to #KeepThePromise and ensure that children and young people in East Ayrshire grow up loved, safe and respected. A wide range of delivery examples, service developments, personal stories and data included in section 3 within this Report illustrates our local progress in relation to the 15 national outcomes for health and wellbeing, children and justice, and our strategic priorities, which we will continue to work towards to get it right for the people and communities of East Ayrshire.

A key focus for the Partnership in the last year was the Joint Inspection of Services for Children and Young People at Risk of Harm, which commenced in September 2024, with the findings published by the Care Inspectorate in April 2025. The inspection took account of the full range of multi-agency work to support children and young people at risk of harm, including services provided by Social Workers, Health Visitors, School Nurses, Police Officers, Teachers and the third sector. The inspectors found important strengths and confirmed that the work of delivery partners in East Ayrshire is making a positive difference to the lives of children and young people at risk of harm. Following a detailed review of the findings, a comprehensive action plan has been developed with a focus on key areas identified for improvement, which will be taken forward collaboratively over the next year.

The HSCP is committed to involving stakeholders in the design and delivery of its services and has undertaken a range of engagement activities during the reporting period to inform various key pieces of work, including best value service reviews. This ongoing feedback cycle will continue in 2025/26 to inform our continuous service improvement work, in line with our Participation and Engagement Strategy.

We are also committed to ensuring that when people need our help, they receive it in a way that best supports them, ensures their rights are upheld, and fully includes them in any decisions that affect themselves, their families and communities. The Thinking Differently agenda is well embedded across HSCP services, and a programme of workforce development relating to Self-Directed Support has been undertaken to promote this approach, building on the SDS Improvement Plan 2023-27 and National Standards.

We recognise our workforce to be our greatest asset, and our new Workforce Plan 2025-28 was recently approved by the Integration Joint Board. The Plan remains structured around the five national pillars for workforce planning in health and social care, namely: Plan, Attract, Train, Employ and Nurture. This will help to ensure that we have the right people, with the right skills in the right place to deliver safe, effective and person-centred services for people in East Ayrshire. We have also implemented the Agenda for Change package of pay, terms and conditions for NHS staff within the Health and Care (Staffing) (Scotland) Act, as we continue to prioritise fair work practices, workforce development and training opportunities.

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EAST AYRSHIRE

Health & Social Care
Partnership

