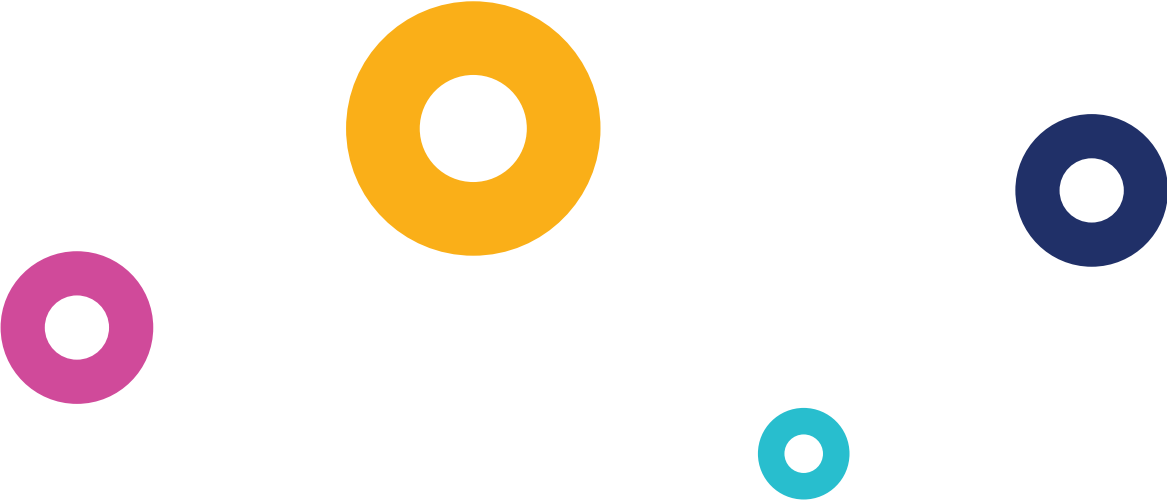




EAST AYRSHIRE

Health & Social Care
Partnership

Performance Management Framework 2026 - 2027



Contents

Introduction	3
What is Performance Management?	4
Strategic Context: Performance Management	5
Local Context	8
National Context	10
Performance Management Culture	13
Roles and Responsibilities	14
Measuring Performance	17
Implementing Improvements	20
Governance and Assurance	23
Appendix 1. Performance Reporting Schedule	26
Appendix 2. Monitoring Templates	29
Appendix 3. Information Sources	31





Introduction

Welcome to the East Ayrshire Health and Social Care Partnership's Performance Management Framework, which covers the 2026-2027 period. The Framework sets out our strategic focus, enablers and arrangements for assessing, managing and reporting on our performance. It is also designed to improve the quality of services that we deliver and to ensure that resources are used effectively and efficiently to provide best value.

The Health and Social Care Partnership ("the Partnership" / "HSCP") is committed to continuous improvement, recognising that high quality service delivery is crucial in improving outcomes for the people and communities we serve. Ensuring a real-time awareness and understanding of our performance at all operational levels through accurate, targeted and evidence-based information, is fundamental to informing our decision making and service planning.

The HSCP is a large and diverse organisation, incorporating a wide range of services and significant financial resources. The Partnership is responsible for contributing towards and achieving local and national objectives, therefore it is important to transparently report on how we are performing against the outcomes that we aspire to.

We value our strong working relationships with partner organisations, which have been central in co-designing and delivering effective supports and interventions in communities to make a meaningful difference to people's lives. We recognise the importance of listening to and acting on what people say about our services in informing and driving forward targeted service improvement. We also consider innovative and quality improvement approaches to be fundamental to our ongoing improvement activities.

The Partnership welcomes scrutiny and evaluation from auditors and inspection agencies, acknowledging that such assessments yield valuable findings and feedback to support our continuous improvement ambitions, in addition to providing assurance that we are delivering on our priorities.

This Framework and our approach to performance management align with local and national practice, including East Ayrshire Council's [Performance Management Framework](#) and the Scottish Government's [National Performance Framework](#).

Our Performance Management Framework does not set out the wide range of improvement activities being undertaken during 2026-2027, as this detail is outlined in various local Strategies and portfolio level Service Improvement Plans, which are published on our [website](#).

A wide range of information and reliable data sources are used to inform our ongoing performance monitoring activities, which include local information systems, quality-assured local datasets and nationally published statistics.

In addition to our formal performance management arrangements, bespoke [area profiles](#) reflecting East Ayrshire and our three localities have been developed to inform and support local needs analysis, service planning and service delivery. These profiles are updated each year and include a range of information, including in relation to health and wellbeing, demography, deprivation, child health, service demand and socio-economic factors across the authority.



What is Performance Management?

Performance management is a thorough and ongoing process to actively assess performance-related activities within an agreed scope and to plan for improvement in line with set objectives. This involves establishing a structured and comprehensive system of regular data collection and analysis to measure performance in a particular area, identifying emerging trends and making conclusions to inform decision-making. Effective performance management can help services to identify best practice and to highlight areas where focussed improvement activity is required, which can contribute towards improved service delivery and outcomes for people. It also supports organisations to: achieve strategic goals and positive operational outcomes, embed a culture of continuous learning and improvement across the workforce, strengthen accountability and transparency, and to demonstrate progress to stakeholders.

This approach provides decision makers, such as Senior Management Teams and governance groups, with evidence and information to implement informed actions to influence future performance in particular areas. Effective performance management can yield a number of strategic and operational benefits for the HSCP, including:

- Informing targeted improvements to enhance the quality of services we deliver
- Driving forward work which contributes towards our strategic priorities
- Achieving best value in delivering services
- Embedding a culture of continuous improvement across our services and workforce
- Utilising innovative approaches to improve our processes
- Providing a structured framework for measuring progress towards objectives
- Informing, upskilling and motivating our workforce
- Promoting stakeholder engagement
- Increasing our transparency and accountability
- Enhancing confidence across the Partnership and our reputation

We are committed to managing performance across the organisation and our Framework reflects all of the themes outlined above. Our Performance Management Framework is structured in a way that clearly guides us to understand and use information to identify areas where targeted improvements could be made, and to plan, implement and learn from informed test of change work. We recognise that colleagues at all levels across the Partnership can influence how we perform and can contribute towards shaping and delivering on our objectives.

The HSCP has well-established performance management arrangements in place to monitor and transparently report on the performance of health and social care services in East Ayrshire. These arrangements are clearly defined in our Performance Management Framework and enable Senior Management and governance groups to routinely scrutinise performance in particular areas and the progress achieved towards outcomes in relation to key performance objectives and the delivery of our Strategic Plan. This in-turn informs and allows for timely action to be taken if required to ensure these objectives are met. Examples of this process include regular reporting to our Audit and Performance Committee and our Annual Performance Reports, which can be accessed on the HSCP's 'Our Performance' website.



Strategic Context: Performance Management

At the initial planning stage, we assess the situation, outline what we want to achieve relative to our priorities, and consider how this could be accomplished.

At a strategic level, the [HSCP Strategic Plan](#) sets out our key priorities, vision and values, as illustrated in the graphic below.

Figure 1 : East Ayrshire HSCP Vision, Values and Strategic Priorities



Our strategic priorities align with and contribute towards the [Wellbeing theme](#) of the [East Ayrshire Community Plan](#) and outline what we want to achieve as a Partnership. These objectives allow us to focus on key areas of performance improvement and to prioritise actions and resources targeted at achieving the best possible outcomes for the people and communities we serve.

Our performance management is informed by measuring progress towards these priorities and set targets over time in the context of identifying opportunities for localised and cross-cutting improvements. Against which, bespoke tests of change can then be planned, tested, evaluated, and potentially implemented.

Obtaining accurate and comprehensive information reflecting previous trends, experiences and current situations, are crucial to informing any planning process for improvement. Fully understanding the health and wellbeing needs of our local populations and communities within our improvement journey is also an important aspect in this process to ensure that we deliver the right support at the right place at the right time.

This involves gathering and considering a range of qualitative and quantitative information to identify potential gaps, areas for improvement and new priorities. This can be obtained from numerous sources, including local recording systems, nationally published data and literature, 'good practice' benchmarking against other areas and focussed engagement with stakeholders such as people who receive services, relatives, carers, delivery partners and our workforce, whom can provide valuable feedback and lived experience for learning and reflection.

We align with other national, regional and local priorities in the planning, design and delivery of our services to contribute towards shared and wider health and social care system ambitions within East Ayrshire while supporting the best possible outcomes for our residents. As such, a range of policies, legislation, strategies and plans are regarded as key strategic drivers in our performance frameworks.

The graphic on the following page illustrates the connection between shared priorities and performance-related interdependencies which flow through various strategic levels across the Partnership.

Figure 2 : HSCP Shared Priorities and Performance Interdependencies

National Outcomes for Health & Wellbeing, Children & Justice	
East Ayrshire Community Plan	Local Outcomes Improvement Plan
Wellbeing Delivery Plan Priorities - Children and young people, including those in early years and their carers, are supported to be active, healthy and to reach their potential at all life stages. - All residents are given the opportunity to improve their wellbeing, to lead an active, healthy life and to make positive lifestyle choices. - Older people and adults who require support and their carers are included and empowered to live the healthiest life possible. - Communities are supported to address the impact that inequalities have on the health and wellbeing of our residents.	
HSCP Strategic Plan Priorities - Starting Well, Living Well & Dying Well - Caring for East Ayrshire - Safe and Protected - People at the Heart of What We Do - Caring for Our Workforce - Digital Connections	
Subsidiary HSCP Plans / Strategies - Workforce Plan - Participation & Engagement Strategy - Cherishing Our Families Strategy - Unpaid Carers Strategy - Partnership Provider Statement - Financial Recovery Plan - Communications Strategy - Equality Outcomes Plan - Independent Advocacy Strategic Plan - Mental Health Delivery Plan - Strategic Plan Updates - Property & Asset Management Strategy	
Portfolio Level Service Improvement Plans (SIPs) - Allied Health Professionals - Locality Health & Care - Children's Health, Care & Justice - Primary & Urgent Care	
Monitoring & Reporting Arrangements - Performance management system (PRISM) - Reporting to various committees / groups including: Integration Joint Board, Council, Audit & Performance Committee, Senior Leadership Group and NHS Board - Annual reporting including: Annual Performance Report, Wellbeing Delivery Plan updates, Chief Social Work Officer Annual Report and Statutory Performance Indicators	

It is important that the plans, strategies and priorities outlined above are continuously visible and conveyed at all levels across the Partnership to ensure that everyone understands our shared responsibilities and how they contribute towards achieving our strategic objectives, performance ambitions and ultimately, positive outcomes for the people we serve.



Local Context

East Ayrshire Community Plan and Wellbeing Delivery Plan

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.

The most recent three yearly review of the Community Plan concluded in June 2024, with Community Planning Partnership (CPP) Board endorsement of the new [Local Outcomes Improvement Plan 2024-2027](#) which reflects the agreed CPP priorities of: Growth, Wellbeing, Fairness and Sustainability. Three thematic Delivery Plans for 2024-2027 have also been developed, setting out the key partnership actions identified to support delivery of the shared CPP priorities: [Economy and Skills](#); [Safer Communities](#); and [Wellbeing](#).

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

East Ayrshire HSCP Strategic Plan

The Partnership's [Strategic Plan](#) outlines our ambitions and shared priorities for health and social care in East Ayrshire and reaffirms our commitment to meeting the needs of communities and to deliver the best possible outcomes for people at all stages in life. To achieve this, the Plan sets out short, medium and long term objectives aligned to six core strategic commissioning intentions, recognising that 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. The Plan also aligns with the Council's wider vision and strategic objectives.

HSCP Workforce Plan

The Partnership's [Workforce Plan 2025-28](#) outlines how we will fulfil the national ambitions of recovery, growth and transformation of the Health and Social Care workforce in East Ayrshire. 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 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.

HSCP Communication Strategy

The [HSCP Communication Strategy 2024-27](#) outlines our approach to meet the communication needs of the Partnership. The Strategy sets out our Communication Framework, key considerations, target audiences, communication channels and a Communication Plan.

We have dedicated communications staff in place to deliver the Strategy and to support the Partnership and its workforce in delivering health and social care services for our communities. Participating in and supporting local and national campaigns also ensures that we are connected across Ayrshire and at a national level.

HSCP Participation and Engagement Strategy

Our [Participation and Engagement Strategy 2023-26](#) sets out principles for participation and engagement to ensure that people are involved, consulted with, and actively engaged in the design and development of health and social care within East Ayrshire.

This Strategy sets out our desire to put people firmly at the heart of everything the Partnership does, involving our communities in the planning, design and delivery of our services, with the clear aim that this informs and improves the person-centred care that people who use our services receive every day.

HSCP Equalities Outcomes Plan

The Partnership places equality at the centre of its strategic planning and in the design and implementation of the supports and services it provides for our communities across East Ayrshire. We are committed to ensuring equality of opportunity and social inclusion for all our service users, visitors and employees and through delivery of our services, we aim to support all residents to live the healthiest life possible.

The [Equalities Outcomes Plan](#) presents our new set of Equality Outcomes covering the period 2025-29. These will be kept under review with the potential that there may be an opportunity to develop additional outcomes during this period. Our Equality Outcomes have been developed by considering evidence, examining the positive and negative impacts on protected characteristics, and engaging with stakeholders and service users on pertinent issues.

Financial Recovery Planning

Health and social care services at national and local levels are experiencing increasing and unsustainable pressures due to various factors including demographic changes, rising demand and increasing provision costs. In response to this situation and the Integration Scheme's stipulation that services should be delivered within budget, the HSCP has developed subsequent [Financial Recovery Plans](#) since August 2024 which set out work to deliver approved savings with ongoing oversight from the Audit and Performance Committee and the Integration Joint Board.

In addition, East Ayrshire Council has agreed to establish a Recovery Taskforce in 2026 to address the significant projected overspend for Council-commissioned health and care services. This Taskforce will implement appropriate financial recovery measures with the aim of mitigating impact on existing care packages and support. This work will be informed by local conversations about re-thinking social care, and a dedicated Review and Redesign Team. The Taskforce will also support existing local training pathway initiatives to help address ongoing recruitment and retention challenges in the health and social care workforce.



National Context

National Performance Framework

The [National Performance Framework](#) sets out a vision for collective wellbeing in Scotland. This is underpinned by [11 National Outcomes](#) which illustrate what 'good' looks like, and 81 national indicators that measure progress towards these.

Following a statutory review of the National Outcomes, the Scottish Government has committed to reform the National Performance Framework to support the development and implementation of a more strategic and impactful framework for Scotland. No changes have been made to the National Performance Framework at the time of reporting, with the current 11 National Outcomes still considered active. This development period is scheduled to continue into 2026.

The table below displays how our local HSCP Strategic Priorities align with the [National Performance Framework Outcomes](#).

Table 1 : Strategic Priority Alignment to National Performance Framework Outcomes

HSCP Strategic Priorities	National Performance Framework Outcomes
Starting Well, Living Well & Dying Well	• We grow up loved, safe and respected so that we realise our full potential • We are well educated, skilled and able to contribute to society • We are healthy and active
People at the Heart of What We Do	• We are creative and our vibrant diverse cultures are expressed and enjoyed • We respect, protect and fulfil human rights and live free from discrimination • We tackle poverty by sharing opportunities, wealth and power more equally
Caring for East Ayrshire	• We value, enjoy, protect and enhance our environment
Caring for Our Workforce	• We have a globally competitive, entrepreneurial, inclusive and sustainable economy • We have thriving and innovative businesses, with quality jobs and fair work for everyone
Safe and Protected	• We live in communities that are inclusive, empowered, resilient and safe
Digital Connections	• We are open, connected and make a positive contribution internationally

Public Bodies (Joint Working) (Scotland) Act 2014 and Subordinate Statutory Instruments

The [Public Bodies \(Joint Working\) \(Scotland\) Act 2014](#) and Subordinate Statutory Instruments set out fundamental functions and arrangements for integration authorities in Scotland, including in relation to performance. [Section 42](#) of the Act specifies that a performance report must be produced by an integration authority each year. Under the Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014 (SSI 2014, No. 326), which came into force in December 2015, the performance report must cover a number of specific areas.

National Outcomes for Health and Wellbeing, Children and Justice

The following [National Outcomes for Health and Wellbeing, Children and Justice](#) continue to frame our local ambitions and delivery activities.

Table 2 : National Outcomes for Health and Wellbeing, Children and Justice

National Outcomes for Children	
Outcome 1	Our children have the best start in life.
Outcome 2	Our young people are successful learners, confident individuals, effective contributors and responsible citizens.
Outcome 3	We have improved the life chances for children, young people and families at risk.
Health and Wellbeing Outcomes	
Outcome 4	People are able to look after and improve their own health and wellbeing and live in good health for longer.
Outcome 5	People, including those with disabilities, 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.
Outcome 6	People who use health and social care services have positive experiences of those services and have their dignity respected.
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.
Outcome 8	Health and social care services contribute to reducing health inequalities.
Outcome 9	People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact on their caring role on their own health and wellbeing.
Outcome 10	People who use health and social care services are safe from harm.
Outcome 11	People who work in health and social care services feel engaged with the work they do and supported to continuously improve the information, support, care and treatment they provide.
Outcome 12	Resources are used effectively and efficiently in the provision of health and social care services.
National Outcomes Justice	
Outcome 13	Community safety and public protection.
Outcome 14	The reduction of reoffending.
Outcome 15	Social inclusion to support desistance from offending.

Accounts Commission Statutory Performance Indicator Direction

The Accounts Commission has a statutory duty to direct Councils to publish information to enable comparisons of performance between authorities over time and also to demonstrate improvement relating to local outcomes in partnership with other public bodies. The Commission published a new version of the [Direction](#) in 2024, which took effect from April 2025.

Statutory Duty of Best Value

The [Local Government in Scotland Act 2003](#) established a statutory framework for Best Value for local authorities. The Best Value duties comprised in the Act include:

- To make arrangements to secure continuous improvement in performance (while maintaining an appropriate balance between quality and cost); and, in making those arrangements and securing that balance, to have regard to economy, efficiency, effectiveness, the equal opportunities requirement and to contribute to the achievement of sustainable development;
- To achieve break-even trading accounts, subject to mandatory disclosure;
- To observe proper accounting practices; and
- To make arrangements for reporting performance function outcomes to the public.

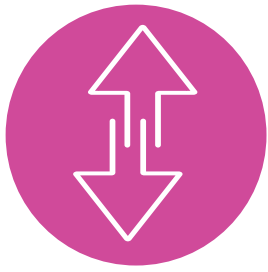
The Best Value duties require public bodies to undertake a systematic approach to continuous improvement and self-evaluation, however the guidance is not prescriptive therefore organisations can decide how they comply to achieve Best Value.

Local Government Benchmarking Framework

The Improvement Service's [Local Government Benchmarking Framework](#) (LGBF) is a high-level benchmarking tool which presents timeseries data regarding various service themes across local authorities in Scotland. The LGBF supports local authorities to compare their performance across suites of efficiency, output and outcome indicators, which includes a number of adult and child social care themes. This range of comparable information can help to identify areas for local improvement, which may act as a catalyst for exploring variations in circumstances between different authorities. It can also help to target resources in high impact service areas and to enhance public accountability.

The LGBF has also organised local authorities into '[Family Groups](#)' which share similar characteristics in terms of demography and geography. In terms of children, social work and housing related indicators, East Ayrshire shares 'Family Group 4' with: Eilean Siar; Dundee City; North Ayrshire; North Lanarkshire; Inverclyde; West Dunbartonshire; and Glasgow City.





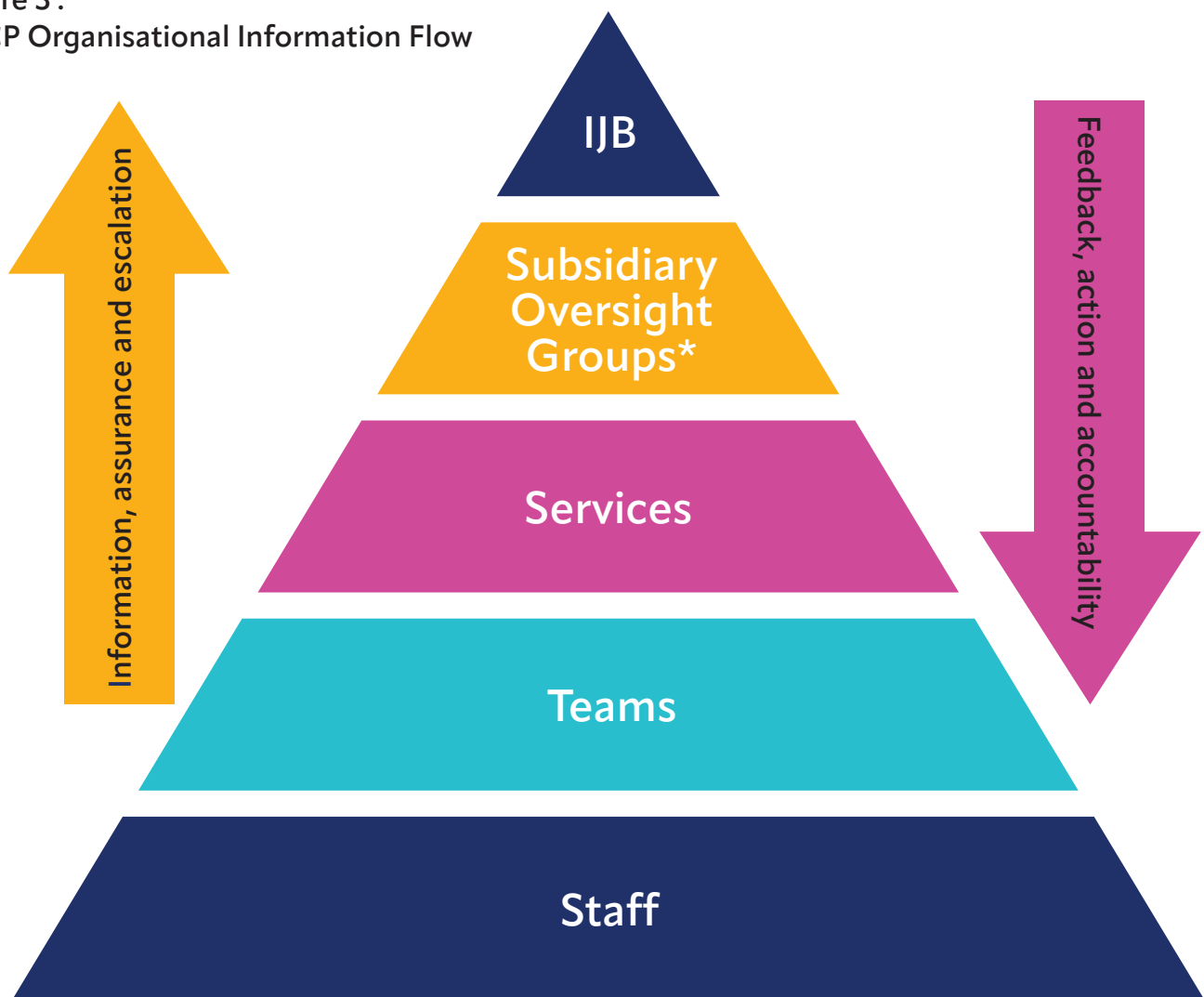
Performance Management Culture

Embedding a permanent culture of performance management across all levels and departments within the HSCP is fundamental to ensuring that staff adopt this approach in their day to day practice and work concertedly towards achieving the Partnership's performance expectations and objectives.

Effective performance management requires professional commitment, dedicated time and capacity to assess circumstances and emerging trends in detail across key operational and strategic areas on a regular basis. This process supports the proactive and timely identification of areas of concern which may need further attention or intervention to overcome a performance barrier. Such situations may require to be escalated upwards to management teams or governance groups for oversight, guidance or further action, particularly if the issue poses a wider or significant risk to the organisation.

A number of structures, resources and reporting arrangements exist within the Partnership to facilitate this, including defined routes to various governance groups, established feedback and action channels, and performance measure frameworks informed by reliable information management systems. Collectively, these enable robust monitoring of performance at operational and strategic levels and ensure a regular flow of information across management and governance structures within the organisation, providing ongoing strategic oversight, assurance and opportunities for timely intervention if required.

Figure 3 :
HSCP Organisational Information Flow



* Audit & Performance Committee; Strategic Planning Group; Strategic Commissioning Board; Partnership Leadership Team; Risk Management Committee; Workforce Planning Board; Health & Care Governance Group.



Roles and Responsibilities

The table below sets out the main roles and responsibilities that individuals and groups have in relation to contributing towards effective performance management within the Partnership.

Table 3. Performance Management Roles and Responsibilities

Individuals at all levels	All staff have a responsibility to undertake tasks allocated in accordance with their remit to a high standard. Performance is regularly discussed during supervisions and FACE Time. Staff are encouraged and supported to develop the skills and knowledge required to undertake their role effectively. All staff should understand how they contribute towards the delivery of the HSCP's strategic priorities. Staff should be aware of and engage in continuous improvement work and are provided with regular opportunities to contribute towards improvement activities within their service area.
Team and Service Managers	Responsible for ensuring that team / service level objectives are achieved. This will involve closely monitoring and managing performance accordingly to identify any operational barriers or risks which impede performance goals and taking appropriate action to manage these. Responsible for supporting the professional development of team members and engaging them in discussions regarding wider team / service performance and continuous improvement. Responsible for delivering elements of agreed Service Improvement Plans.
Senior Managers	Responsible for setting performance targets, monitoring and managing performance against set objectives to contribute towards the HSCP's strategic priorities. Jointly responsible alongside Heads of Service for developing and managing Service Improvement Plan actions, key performance indicators and risks, in addition to leading on singular service improvement activities. Responsible for conveying operational performance expectations and engaging with teams in relation to continuous improvement processes.
Heads of Service	Jointly responsible alongside Senior Managers for developing Service Improvement Plan actions, key performance indicators and risks, in addition to setting performance targets within their service portfolio. Accountable for all performance areas within their service portfolio, the progress of the portfolio Service Improvement Plan and contributing towards the delivery of the HSCP's strategic priorities. Responsible for operational risk mitigation and overseeing the implementation of service improvements where identified as being required. Ensure that all staff within their service portfolio are encouraged and have the opportunity to participate in continuous improvement activities.

Individuals at all levels	All staff have a responsibility to undertake tasks allocated in accordance with their remit to a high standard. Performance is regularly discussed during supervisions and FACE Time. Staff are encouraged and supported to develop the skills and knowledge required to undertake their role effectively. All staff should understand how they contribute towards the delivery of the HSCP's strategic priorities. Staff should be aware of and engage in continuous improvement work and are provided with regular opportunities to contribute towards improvement activities within their service area.
Director of Health and Social Care	Responsible for driving forward continuous improvement work across the Partnership through embedding and implementing the Performance Management Framework. Accountable for the HSCP's performance in regards to achieving its strategic priorities, contributing towards the Wellbeing theme of the East Ayrshire Community Plan, and local progress towards the National Outcomes for Health and Wellbeing, Children and Justice. Responsible for overseeing performance across the Partnership's service portfolios and supporting targeted actions to resolve performance-related barriers or significant risks where required.
Audit and Performance Committee	Responsible for the following duties: • Monitoring performance across the Partnership in regards to achieving its strategic priorities relating to all functions of the Integration Joint Board • Ensuring the HSCP implements satisfactory arrangements for reviewing and appraising service performance against set objectives, levels and standards of service, to receive regular reports on these and to review progress against the outcomes in the Strategic Plan • Act as a focus for best value and performance initiatives • Consider internal and external audit reports and review progress on actions taken on audit recommendations • Review risk management arrangements and receive regular risk management updates and reports • Consider financial accounts and related matters • following input from the Integration Joint Board and other Committees • Promoting, monitoring and keeping under review the Codes of Conduct maintained by the Integration Joint Board • Onward submission of key items to the Integration Joint Board for assurance and approval

Planning and Performance Team	The Planning and Performance Team provides a wide range of supports and guidance to facilitate performance management and service improvement across the Partnership, including: • Building performance monitoring and reporting frameworks • Developing performance indicators • Creating Improvement Action Plans • Service Improvement Plan development and implementation • Best Value Service Review implementation • Policy, procedure, strategy and strategic plan development • Support for annual and ad-hoc reports, reviews and statements • Risk monitoring and management • Programme management • Quantitative and qualitative data support, sourcing and analysis • Bespoke support for transformation projects, including evidence gathering • Undertaking benchmarking to inform best practice • Self-evaluation and audit activities • Survey development, implementation and analysis • Application of Quality Improvement techniques • Training for utilising available tools such as PRISM and Smartsurvey • Signposting to other useful resources and tools • Participation and engagement with internal and external stakeholders
Stakeholders	Participate in HSCP related engagement / consultation opportunities to express views and provide regular feedback regarding service experiences through various channels such as Care Opinion to inform and shape the Partnership's continuous service improvement activities. Read published performance reports and strategic documents and hold the Partnership accountable in relation to achieving the outcomes that it aspires to. Follow the HSCP on social media to receive the latest updates regarding its activities.



Measuring Performance

Our performance management activities must align with and contribute towards our strategic priorities. It is therefore important that our measurement frameworks are designed in a way that fully reflects these outcomes to provide an accurate indication of our progress.

Performance Indicators

Key performance indicators (KPIs) are quantifiable measures which are developed to evaluate performance in a particular area against a set target over a period of time. KPIs are essentially measures of progress towards a desired result, providing evidence of achievements, operational delivery impact and also areas where focussed strategic or operational improvements are required, to support informed decision making. KPIs can also be used for monitoring other organisational priorities, such as workforce development, safety and tracking progress towards efficiency targets.

Management information measures can also be used to monitor trends and inform operational decisions in particular areas, for example service demand against available capacity, however these measures are not considered 'key' and are not assigned with targets. Indicators can reflect both strategic and service level objectives and can also be grouped together into relevant themes within a wider measure suite or 'scorecard' (i.e 'Process', 'Customers', 'Workforce' and 'Outcomes'), to provide a higher level strategic overview of progress.

It is important that sufficient consideration is given to accurately and comprehensively complete the metadata behind each measure, including: a full description / rationale, strategic alignment, linkage to actions and risks to measure impact, reporting frequency, data type, setting a target / variance thresholds and identifying data sources.

SMART principles should be followed when setting objectives and developing associated performance indicators, in terms of being:

- **Specific** – clearly define what is being measured to ensure that performance is accurately assessed
- **Measurable** – ensure outputs can be measured in either a quantitative or qualitative format
- **Achievable** – objectives and performance measures are realistic to obtain and report on
- **Relevant** – performance measures reflect the intended outcomes and the service area
- **Time-bound** – set a realistic but ambitious end date with regular review points

This will ensure that our measures are clearly defined, focussed, realistic, set within appropriate timeframes, aligned with strategic goals and that relevant information is readily available to populate them.

Reliable data to inform measures can be obtained from a number of sources including internal recording systems such as Liquidlogic, quality-assured local datasets and nationally published resources such as [Public Health Scotland](#) publications, the Ministerial Strategic Group (MSG) indicators and the Core Suite of Integration Indicators.

The Planning and Performance team can provide support with developing indicators and a metadata template is also available to facilitate this process. A list of useful information sources is also available at Appendix 3.

Stakeholder Feedback

Our performance and the impact that our services have on people's outcomes cannot be measured solely through numbers. A combination of both quantitative and qualitative information is required to obtain a fuller and more accurate understanding of circumstances that influence our performance. Qualitative information typically includes stakeholder feedback, lived experience and case studies for reflection, which can provide a rich and detailed context for identifying improvements and informing decision making.

The Partnership is committed to seeking and listening to people's voices and using this feedback to drive forward impactful service improvements. This is underlined in a number of national frameworks, including the [Scottish Approach to Service Design, Planning with People: Community Engagement and Participation Guidance](#), [the Promise](#) and the [National Performance Framework](#). Effective and frequent communication between colleagues, teams and services to share gathered information are vital in implementing this approach.

Locally, the [HSCP Participation and Engagement Strategy 2023-26](#) outlines our principles for participation and engagement to ensure that people are fully involved, consulted with, and actively engaged in the design and delivery of health and social care services in East Ayrshire.

A number of methods can be utilised to engage with stakeholders, including consultation events, focus groups, 1:1 conversations, electronic or paper surveys and scheduled feedback loops built within service provision. It is important that all engagement activities are focussed on the objectives of the wider piece of work, and are carefully designed to reflect the target participant group, which may include modifications to support people to fully participate in the process.

Various resources are available to facilitate bespoke pieces of engagement, including our Engagement HQ account and dedicated support from the HSCP's Communication Programme Officer and Partnership Engagement Officer.

Interpreting Information

Information, regardless if quantitative or qualitative in nature, is only valuable in informing performance measurement if it is handled and interpreted appropriately. A number of considerations should be observed when using data to measure performance, including:

- Using features such as charts and Red, Amber Green (RAG) status icons to help visualise and convey key components of the data;
- Setting appropriate and ambitious targets;
- Monitoring data over a sufficient period of time to identify reliable patterns and trends;
- Investigating exceptional data and associated assumptions to identify factors which influence activity, for example seasonal circumstances, to make recommendations;
- Aligning measures with strategic objectives, improvement actions or risks to determine linked impact over time;
- Applying analytical techniques such as long-term averages and benchmarking to gain a better understanding of the data;
- Regularly checking for input errors and outlier figures as these can skew overall findings; and
- Sharing data measures with relevant colleagues and stakeholders for contextual input and awareness to support shared performance management.

Current examples of these activities being undertaken include Service Improvement Plan Improvement Dashboards, the Monthly HSCP Performance Scorecard and components of our annual reporting. Various tools are also available to support these, including Power BI, PRISM and Microsoft Excel, with training being readily available for each.

Qualitative responses should be systematically analysed to identify any emerging themes or patterns pertaining to the questions that were asked to gain a deep understanding of participants' views and experiences. A common approach to achieve this is undertaking thematic and content analysis, which involves reviewing all responses to a question in detail, coding each response into relevant categories which represent concepts, counting the frequency of these codes to determine the weighting, and grouping similar codes together into broader reflective themes. These themes are then interpreted to identify key findings in the context of the engagement work.

It is also useful to retain and include powerful (non-sensitive) participant quotes within an analysis to illustrate key concepts or findings. Some pieces of engagement work may also require quantitative analysis, for example total counts of specific responses or to calculate percentage breakdowns of Likert scale responses.

Monitoring Our Performance

The Partnership uses the Council's in-house performance management system (PRISM) to record and track progress against key actions, performance indicators and risks incorporated within numerous improvement plans. The administration of HSCP related content within this system is undertaken by members of the Planning and Performance team, whom have expertise to create new items, manage existing content and support colleagues to maximise utilisation of the system to facilitate performance and risk management across strategic and operational plans. All users are provided with training to ensure appropriate use of the system and information integrity.

PRISM provides a real-time overview of progress and performance across service areas and workstreams, however it is important that all information is entered accurately and timeously on the system. PRISM can provide a number of useful analytical functions, including:

- Data visualisation to support trend identification and benchmarking;
- Assessment of short and long term indicator performance against set targets;
- Tracking the progress of actions within agreed timescales;
- The ability to record management information notes within and out with update periods to provide context for recent performance and action progress;
- The ability to link related items on the system; and
- The ability to export information for use out with the system.

In terms of visualising indicator performance against targets, measures are assessed using the standard Red, Amber, Green (RAG) status, in addition to short and long term trends being shown for reference, as displayed below. The HSCP applies a 2.5% target variance for Amber status and a 5% variance for Red status indicators, in line with the Council's approach to key performance indicator variance. Detailed monitoring templates are displayed at Appendix 2.

Table 4. Performance Indicator RAG Status and Trend Key

Status Icon	Definition
	Adrift of target
	Slightly adrift of target
	Target met or exceeded
	'Data only' indicator (no target applied)
	Data is not yet available for the most recent period
	Improving trend
	Worsening trend
	No change in trend



Implementing Improvements

The Partnership is committed to continuous improvement and takes an evidence-based approach to ensure its services are effective and efficient. A core feature of performance management is to assess performance over time within an agreed scope, which supports the identification and planning for areas for improvement in line with set objectives.

As outlined above, this involves regularly analysing a range of quantitative and qualitative information to inform our decision making. Various methods can be utilised to plan, test, assess and implement improvement activities across services to achieve our performance objectives.

Quality Improvement

Our Performance Management Framework is underpinned by Quality Improvement (QI) principles. This involves the application of a systematic approach that incorporates well-established techniques to improve quality in a specific area. Various QI methods and tools can be used to identify performance-related issues, implement targeted changes, and to measure the impact of these changes. The main aim of QI is to inform, achieve and demonstrate measurable improvements, which may include better service user outcomes, increased service efficiency, or improved service user experiences.

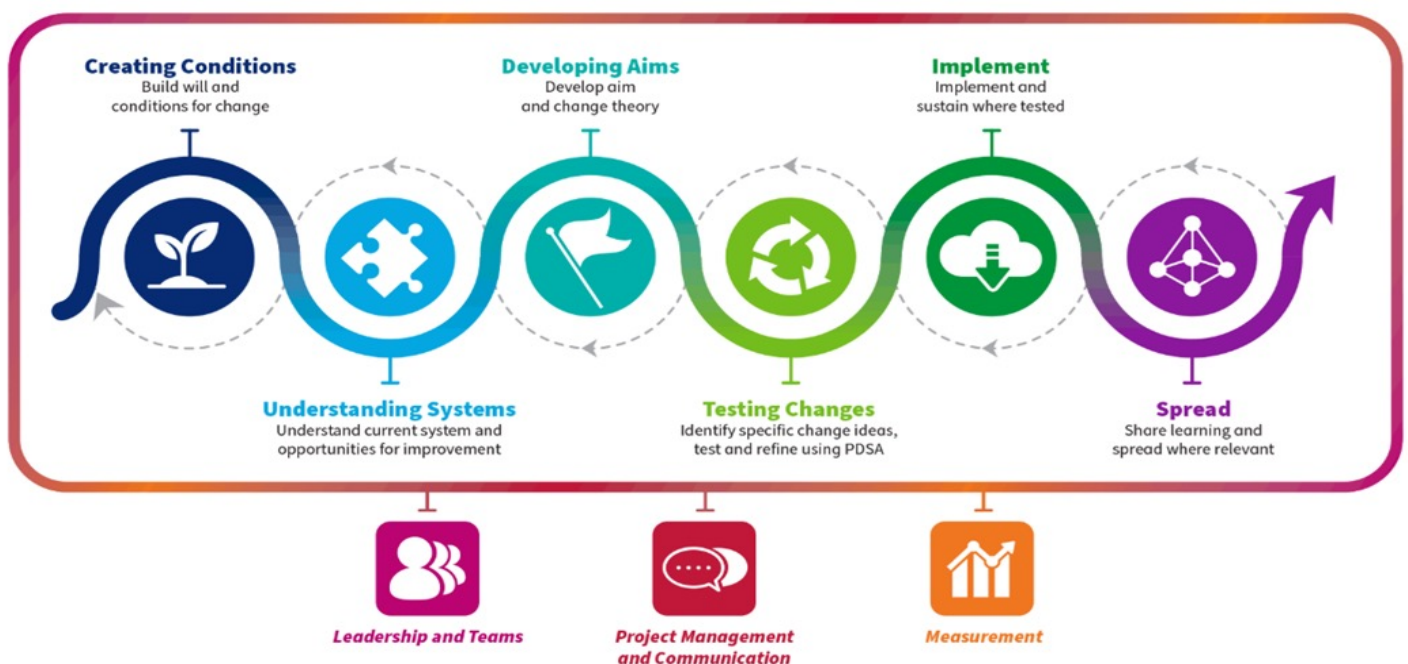
Model for Improvement

There are three fundamental QI questions which can help to inform and drive improvement:

- What are we trying to accomplish?
- How will we know that a change is an improvement?
- What changes can we make that will result in improvement?

Numerous QI tools are available to support the understanding of local systems and to identify new change ideas, including: [Process Mapping](#), [Cause and Effect Diagrams](#), [Pareto Charts](#), [Force Field Analysis](#) and [Driver Diagrams](#). Figure 4 below sets out the QI Journey.

Figure 4 : The Quality Improvement Journey. Source. NHS Education for Scotland, 2025



The Plan-Do-Study-Act (PDSA) cycle is a fundamental QI method which supports our approach to evidence-based learning and service improvement implementation. The PDSA cycle is a structured process which requires sufficient commitment and resources to undertake successfully. It comprises four steps:

- **Plan:** Plan for a desired outcome, including what will be tested, predictions and the information required to inform this
- **Do:** Undertake a test of change in line with the plan detail and record the outcomes
- **Study:** Compare the findings against the initial predictions made and study the results
- **Act:** Take appropriate action based on the evidence and conclusions. This may involve the implementation of the initial planned approach, or the creation of a new PDSA cycle to test a revised approach.



Source: NHS Education for Scotland, 2025.

Further information regarding QI methods is available on the NHS's [TURAS Learn webpage](#) and dedicated expertise and support is available from the NHS Ayrshire and Arran QI team (qualityimprovementsupport@aapct.scot.nhs.uk).

Best Value Reviews

The Best Value Review process provides a framework for assessing the effectiveness of options available for service delivery, and should result in proposals to improve services, service experience and outcomes for people. Best Value Reviews contribute towards our continuous improvement ambitions and the Integration Joint Board's Statutory Duty of Best Value under the [Local Government in Scotland Act, 2003](#). Best Value Reviews scrutinise services and challenge the basis upon which these services are provided, thereby identifying more efficient and effective ways of delivering services to provide better value for money for our communities.

The Partnership undertakes scheduled programmes of targeted Best Value Reviews over defined time periods, which can be service specific or cross-cutting in nature. The current review programme was approved by the Strategic Commissioning Board on 31 October 2024 and covers the 2025-2027 period. Successive review stage reports are presented to the Strategic Commissioning Board and the Integration Joint Board for assurance and oversight throughout the review process.

The HSCP developed a revised Best Value Review guidance in 2025 to ensure a consistent and robust approach is taken in all reviews. This guidance is informed by the [legislative duties](#) and the supporting [Statutory Guidance](#), and follows a similar approach to the Council's Corporate Best Value Service Review process. The guidance is framed around the following Best Value themes:

- Vision and leadership
- Governance and accountability
- Effective use of resources
- Partnerships and collaborative working
- Working with communities
- Sustainability
- Fairness and equality

A Best Value Review is carried out by the involved service itself, supported by a nominated Review Team and Planning and Performance colleagues. There are four core components within all Best Value Reviews:

- **Challenge:** The Review Team comprehensively sets out what services and activities are contained within the scope of the Best Value Review and provides an initial assessment of the need for the services in the first place. The Review Team challenges whether the service currently meets the strategic aims of the Partnership.
- **Consult:** Best Value Reviews must demonstrate clearly that it has consulted as widely as possible to obtain the views of our communities, service users, employees and their representatives and other key stakeholders. The guidance also details the Service Change notification process and support available from Healthcare Improvement Scotland.
- **Compare:** The review seeks to identify any significant variances in the performance of the Partnership compared to other areas and other methods of service delivery.
- **Compete:** The review must consider competition as one of the options for the future delivery of the service, or parts of the service. The Guide sets out what alternative methods there are for delivering services and a step-by-step guide to option appraisal which will help the Review Team to conduct this part of the Review.

Service Improvement Plans

Service Improvement Plans are the Partnership's key mechanism for setting out service level contributions towards the delivery of our strategic priorities. The Improvement Plans also contribute to the Wellbeing theme of the East Ayrshire Community Plan 2015-30.

HSCP Service Improvement Plans were established in 2016/17 and have since driven improvement activity across the Partnership's core service portfolios. Their development is part of an ongoing cycle to deliver continuous improvement across services and to ensure that we achieve positive outcomes for the people and communities we serve. The Plans are evidence-based, driven and shaped by the views of our workforce and stakeholders, and are informed by ongoing engagement with people who use our services.

The Service Improvement Plans comprise three core components, which collectively form a robust planning and improvement programme for the lifespan of the Plan. These include an Improvement Action Plan, detailing the range of improvement actions and activities that will be undertaken by services, a Quality Assurance Framework, which outlines service-specific measures to track progress, and a Risk Register, which identifies high level risks and actions that will be taken in mitigation.

To ensure integration with the HSCP's Strategic Plan, all improvement actions are aligned to the Partnership's strategic priorities: 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.

The current planning and reporting period for the Service Improvement Plans covers the three-year period from 1 April 2024 to 31 March 2027, with annual reviews to ensure the content remains relevant. The Service Improvement Plans 2024-27 cover the following service portfolios:

- Locality Health and Care
- Children's Health, Care and Justice
- Primary and Urgent Care Services
- Allied Health Professionals



Governance and Assurance

The Partnership has well-established assurance and reporting arrangements which collectively promote and ensure high levels of governance and accountability throughout the organisation. These arrangements are set out in the HSCP's Strategic Plan and support our strategic ambitions, organisational risk mitigation, financial monitoring, service improvement activities and ongoing performance management.

The graphic below illustrates how various tiers of our performance management and improvement work feeds into higher level HSCP Plans to provide evidence and assurance in regards to progression towards our strategic aims.

Figure 5 : Assurance Arrangements

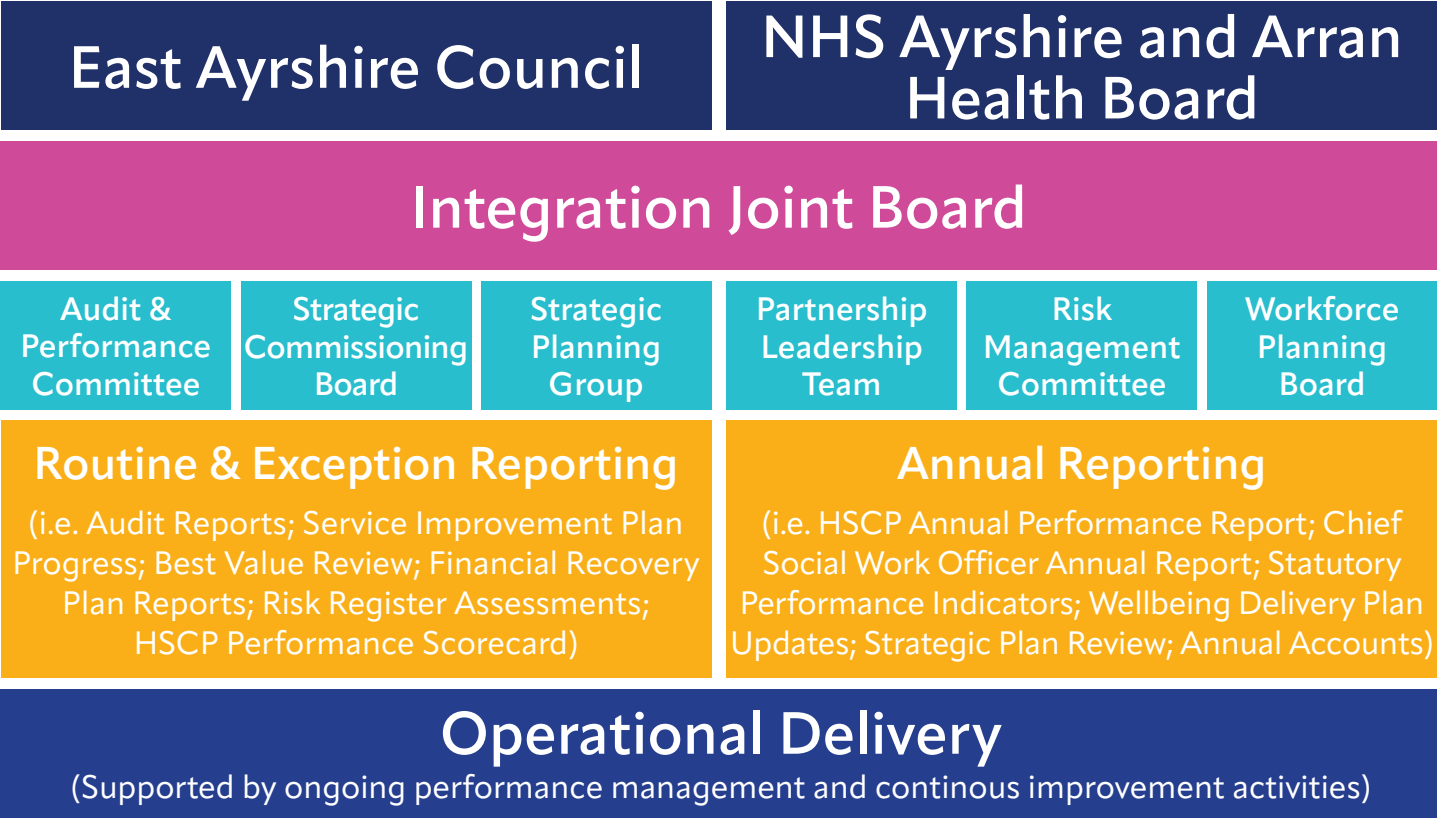


Suites of improvement and monitoring tools including key performance indicators, targeted action plans and risk registers, are utilised at various operational and strategic levels within the Partnership to inform wider pieces of development work and to gauge progress towards desired outcomes set out within defined Plans. This may include long-term service level performance monitoring, test of change impact assessment, focussed self-evaluation work or tracking progress towards efficiency targets. Such work should be intrinsically aligned to the HSCP's strategic priorities and regularly reported in appropriate formats to relevant governance groups for ongoing oversight and input if required.

Figure 6 below outlines the governance and monitoring structures within the Partnership, including examples of existing reporting arrangements which stem from operational delivery across the organisation, internal directions and statutory requirements.

A range of resources are available for staff to facilitate good practice in conducting these monitoring and reporting processes, including pre-populated report templates, annual governance meeting schedules, numerous project templates and guidance, reliable information sources, and the PRISM performance management system. Further information, tools and bespoke support can also be obtained from the HSCP Planning and Performance team.

Figure 6 : Governance and Monitoring Structures



The main components of our regular performance reporting within the HSCP are described below.

Focused Service Improvement Plan progress reports reflecting each respective service portfolio are presented to the Audit and Performance Committee once per year on a scheduled basis. These reports include detailed information in relation to each service portfolio’s improvement action plan, key performance indicators and risk registers to provide an overview of performance and assurance of progression. In addition, higher level Service Improvement Plan progress reports reflecting all service portfolio areas are presented to the Audit and Performance Committee on a quarterly basis to support continuous implementation monitoring. The HSCP Planning and Performance Team also support Senior Management Teams with Service Improvement Plan development, progress monitoring and reporting on a regular basis.

The HSCP Scorecard is refreshed and distributed to a wide range of colleagues in the Partnership including Service and Senior Managers, Heads of Service and the Director of Health and Social Care on a monthly basis, in addition to being regularly presented at various oversight groups including our Audit and Performance Committee and NHS Ayrshire and Arran Management Team meetings. The monthly Scorecard comprises comprehensive suites of key performance indicators and management information measures aligned to core themes (‘Process’, ‘Customers’, ‘Workforce’ and ‘Outcomes’), reflecting the HSCP’s main service portfolio areas, in addition to a higher level ‘Corporate’ section. This range of information is stored on and reported from the PRISM information management system, which enables live performance monitoring and reporting to inform our ongoing performance management.

The Partnership’s Audit and Performance Committee has a key role in supporting our performance management and scrutiny activities. The Committee meets on a bi-monthly basis and receives a diverse range of reports aligned to an annual programme of work, in addition to considering and providing a view on singular performance-related reports as required. Examples of previous reporting include: internal audit reports from the IJB Chief Auditor, external auditor reports from Audit Scotland, Financial Recovery Plan progress reports, risk register reports, Service Improvement Plan progress reports, governance and assurance arrangements and onward performance reporting to the Integration Joint Board.

The Integration Joint Board is responsible for the strategic planning of the health and social care functions delegated to it by the Local Authority and Ayrshire and Arran Health Board. It therefore has a significant oversight role in scrutinising various aspects of performance across the HSCP to ensure strategic and operational objectives are met. The Integration Joint Board generally meets on a monthly basis and receives a range of key agenda items for noting, assurance, approval and input if required. These items regularly contain performance-related information, with some examples including reports pertaining to the review and delivery of our Strategic Plan, the HSCP Annual Performance Report, the Annual Report of the Chief Social Work Officer, financial management reports, complaints reports, internal and external audit reports and Care Inspectorate reports.

The HSCP publishes an Annual Performance Report (APR) by the 31st of July every year to fulfil the performance reporting requirements set out in the Public Bodies (Joint Working) (Scotland) Act 2014. The APR evidences how we have performed in relation to our strategic priorities and the national outcomes for health, wellbeing, children and young people and justice over the reporting period. It also conveys service achievements and developments made in the year, evaluates the Partnership's financial performance and sets out our ambitions for going forward. The APR provides an opportunity to reflect on the past year and to celebrate the contributions and achievements of our services, workforce and partners. It also allows us to highlight key challenges that we currently face and will likely encounter in the future.

The APR includes a wide range of local and national performance measures, delivery examples, personal stories and highlights some of the main areas that we have been working on and the impact achieved for people. It also builds on the information presented in previous APRs, providing a year-on-year overview of our progress. The APR is published on the Partnership's ['Performance' webpage](#) and is presented to a number of governance groups for noting and comment, including the Integration Joint Board, Audit and Performance Committee, Strategic Planning Group, East Ayrshire Council and Ayrshire and Arran NHS Board.

The various components of our Performance Management Framework and associated assurance and reporting arrangements allow our operational and strategic performance to be comprehensively monitored and scrutinised on an ongoing basis. This ensures that sufficient progress is made towards our objectives and that situations which require intervention are identified timeously. These also enable the Partnership to effectively convey its performance against local and national outcomes to all stakeholders, which strengthens our accountability and transparency as an organisation.

A performance reporting schedule is available at Appendix 1 which provides details of key HSCP related reports presented throughout the year, including the expected deadlines, reporting frequencies, recipient groups and the responsible leads.

Appendix 1. Performance Reporting Schedule

Table 5 : Performance Reporting Schedule

Report Title	Lead Service / Individual	Reporting Frequency	Recipient(s)	Submission Deadline
Audit and Performance: Annual Self Assessment	Chief Officer	Annual	Audit and Performance Committee	January
Annual Self-Directed Support Assurance Report	Senior Manager: Wellbeing, Planning and Performance	Annual	Audit and Performance Committee	March
HSCP Strategic Plan Annual Review	Senior Manager: Wellbeing, Planning and Performance	Annual	Integration Joint Board	March
Complaints Annual Report for Social Work and IJB Complaints	Senior Manager Business Support	Annual	Integration Joint Board; Audit and Performance Committee	March; August
Statutory Performance Indicators	Planning and Performance	Annual	East Ayrshire Council	May
Strategic Commissioning Board Annual Report	Director of Health and Social Care	Annual	Audit and Performance Committee; Governance and Scrutiny	May; October
Alcohol and Drug Partnership Annual Report	Independent ADP Chair	Annual	Integration Joint Board	June
Unaudited Annual Accounts	Chief Finance Officer	Annual	Integration Joint Board	June
HSCP Annual Performance Report	Planning and Performance	Annual	Audit and Performance Committee; Strategic Planning Group; Integration Joint Board Stakeholder Forum; Integration Joint Board; East Ayrshire Council; NHS Ayrshire and Arran Health Board; Scottish Government	July (publish) August – October (reporting)
Integration Joint Board Internal Audit Annual Report	IJB Chief Internal Auditor	Annual	Audit and Performance Committee	August

Report Title	Lead Service / Individual	Reporting Frequency	Recipient(s)	Submission Deadline
Audit and Performance Committee Annual Report	Chair of Audit and Performance Committee	Annual	Audit and Performance Committee; Integration Joint Board	August
Health and Care Governance Annual Report	Clinical Director	Annual	Integration Joint Board; NHS Ayrshire and Arran Health Board	August
HSCP Service Improvement Plans	Senior Manager: Wellbeing, Planning and Performance	Three-yearly	Audit and Performance Committee; Integration Joint Board	August
Wellbeing Delivery Plan Updates	Planning and Performance	Annual	East Ayrshire Council	September
Audited Annual Accounts	Chief Finance Officer	Annual	Integration Joint Board	September
Annual Report of the Chief Social Work Officer	Planning and Performance / Chief Social Work Officer	Annual	East Ayrshire Council; Integration Joint Board; Scottish Government	October
Partnership Performance Reporting	Senior Manager Business Support	Bi-monthly	Audit and Performance Committee	January; March; May; September; November
Financial Recovery Plan Update	Chief Finance Officer	Bi-monthly	Audit and Performance Committee	January; March; May; September; October; December
Financial Management Report	Chief Finance Officer	Bi-monthly	Integration Joint Board	February; June; August; October
EA Performs Business Briefing	Planning and Performance Officer	Quarterly	Governance and Scrutiny	March; June; September; December
HSCP Risk Registers	Senior Manager Business Support	Quarterly	Risk Management Committee	March; May; August; November

Report Title	Lead Service / Individual	Reporting Frequency	Recipient(s)	Submission Deadline
Care Inspectorate Inspection Report	Head of Locality Health and Care	Quarterly	Audit and Performance Committee	Dependent on Audit and Performance Committee Workplan
HSCP Combined Service Improvement Plan Progress Update	Senior Manager: Wellbeing, Planning and Performance	Quarterly	Audit and Performance Committee	Dependent on Audit and Performance Committee Workplan
Focussed Service Improvement Plan Portfolio Progress Updates*	Heads of Service	Quarterly	Audit and Performance Committee	Dependent on Audit and Performance Committee Workplan
Best Value Review Stage Reports	Review Leads	Dependent on Best Value Review Programme	Strategic Commissioning Board; Integration Joint Board	Dependent on Best Value Review Programme

* Locality Health and Care, Children's Health, Care and Justice, Allied Health Professionals, Primary and Urgent Care.

Appendix 2. Monitoring Templates

Table 6. Performance Indicator Template

Measure	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025	Nov 2025	Dec 2025	Target	RAG Status	Spark Chart	Latest Note
Performance indicator title	Period value	Period value	Period value	Period value	Period value	Period value	Period value	Period value	Period value	Period value	Period value	Period value	Target figure			Performance context narrative

Table 7. Performance Indicator Red, Amber, Green Status Icons

RAG Status Icon	Definition
	Adrift of target
	Slightly adrift of target
	Target met or exceeded
	'Data only' indicator (no target applied)
	Data is not yet available for the most recent period

Table 8. Service Improvement Action Monitoring Template

Improvement Action	Improvement Area	HSCP Strategic Deliverables	HSCP Strategic Priorities	Action Due Date	Progress	RAG Status	Update Notes	Responsible
Sub-action title	Parent action title	Alignment to relevant 2024-27 strategic deliverables	Alignment to HSCP strategic priorities	Sub-action due date	100%		Management narrative regarding progress of sub-action	Individual(s) assigned to sub-action

Table 9. Action Red, Amber, Green Status Icons

RAG Status Icon	Definition
	Action is overdue
	Action not yet assigned to relevant individual
	Action is in progress
	Action completed

Table 10. Risk Register Monitoring Template

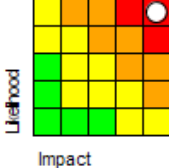
Code	Risk Description	Likelihood	Severity	Risk Score	Risk Status	Risk Matrix	Risk Mitigation
Risk code	Risk title and description	Likelihood score (1-5) 1 - Remote 2 - Unlikely 3 - Possible 4 - Likely 5 - Almost Certain	Severity score (1-5) 1 - Insignificant 2 - Minor 3 - Moderate 4 - Major 5 - Extreme	Overall risk score (L x S)			List of mitigations identified

Table 11. Risk Red, Amber, Green Icon Status

RAG Status Icon	Definition
	Alert
	High Risk
	Warning
	Ok

Appendix 3. Information Sources

- [Scottish Public Health Observatory \(ScotPho\)](#)
- [National Records of Scotland](#)
- [East Ayrshire by Numbers](#)
- [NOMIS](#)
- [Scottish Government Official Statistics](#)
- [Scottish Index of Multiple Deprivation](#)
- [Public Health Scotland](#)
- [Health & Care Experience Survey](#)
- [Scottish Household Survey](#)
- [Scottish Health Survey](#)
- [Scotland's Census](#)
- [East Ayrshire HSCP Governance Documents](#)
- [East Ayrshire HSCP Annual Performance Report & Appendices](#)
- [HSCP Locality Profiles](#)
- [HSCP Strategic Plan](#)
- [PRISM](#)
- [Engagement HQ](#)
- [Scottish Commission for People with Learning Disabilities](#)
- [Local Government Benchmarking Framework](#)
- [Scottish Children's Reporter Administration](#)
- Liquidlogic Helpdesk - liquidlogichelpdesk@east-ayrshire.gov.uk
- NHS Ayrshire and Arran Business Intelligence - businessintelligenceteam@aapct.scot.nhs.uk
- [East Ayrshire HSCP Planning and Performance Team](#)