

Annual Review 2023-24

NHS Ayrshire & Arran
University Hospital Ayr
3 October 2024





Welcome

Linda Semple Interim Board Chair

Caring for Ayrshire





Home with Care / Self Care

Self / supported care provided in or accessed from individuals home setting



Homely Environment

Continuing care provided on residential basis in local community



Primary Care

First point of care coordinating access to health and wellbeing services supported by multi disciplinary teams







Providing care closer to home as safe and effective alternatives to hospital admission

Acute Services



Bed based care addressing acute / complex health needs on an emergency and planned basis

Recovery



Challenges



Transformation



Whole System



Innovation



Priorities



Sustainable Financial Future



Re-defining Bed Based Care





Digital Reform



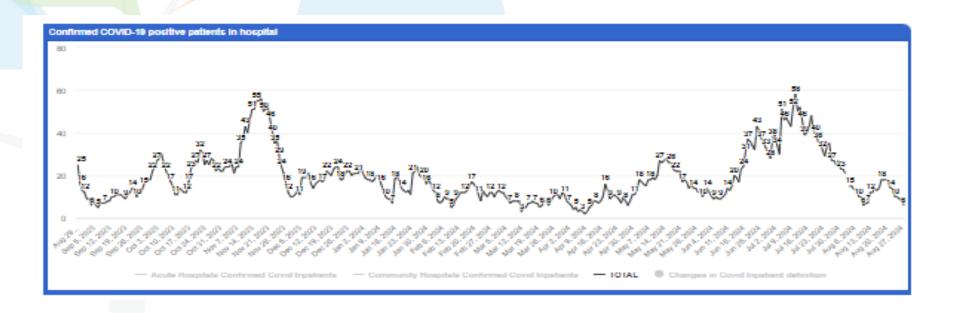
System Pressures – COVID-19





At the end of March 2024, there were 11 patients in hospital testing positive for Covid-19.

Since then numbers have risen and in July 2024, we reached a high of 58 patients occupying a bed who had tested positive for COVID-19.



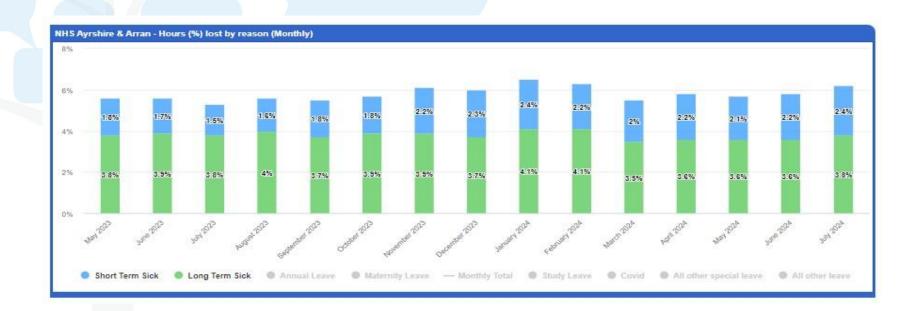
System Pressures – Staff Sickness Absence





In April 2023 staff sickness absence rate was 5.2% with this remaining relatively stable over the summer months. Approaching winter the sickness absence rate increased with a peak in January 2024 of 6.5%.

The sickness absence rate fell again before increasing to 6.2% in July 2024.



Urgent Care Performance



Throughout 2023/24 almost 115,000 patients were in contact with the Ayrshire Urgent Care Service (AUCS). The majority of these patients (91%) received alternative pathways of care within a community setting and did not require attendance at our EDs.

Ayrshire



During 2023/24 the Call Before Convey pathway – a collaboration between SAS and AUCS - ensured that almost 3,200 ambulances avoided attendance at our Emergency Departments (EDs) with these patients receiving support and care within community settings.



The AUCS Care Homes pathway provides direct access to AUCS clinicians for Care Home residents in Ayrshire. During 2023/24 a total of 6,842 frail and elderly residents of Care Homes used this pathway and received alternative care within the community as an alternative to attending an acute hospital.

System Pressures - Emergency Departments

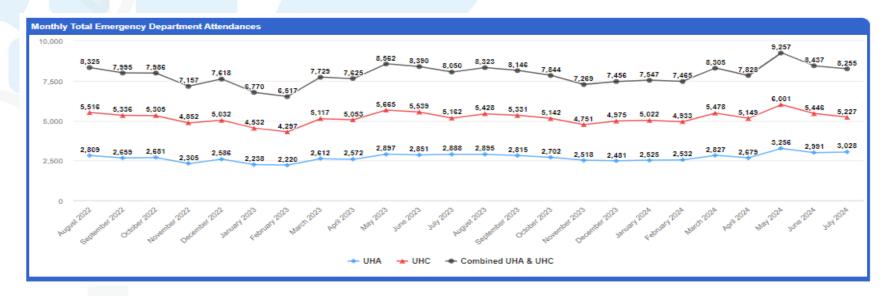


In April 2023 there were 7,625 unscheduled care presentations to our Emergency Departments. By March 2024 this had increased to 8,305.



By May this year the number rose again to 9,257 presentations the highest number of attendances since before the Covid-19 pandemic began.

In total this equates to 105 additional unscheduled presentations to our Emergency Departments (EDs) per week, compared to 2023.



Emergency Department Performance





In April 2023 our Emergency Department performance was that 68.8% of patients waited less than four hours in our Emergency Department to be treated, admitted or discharged.

By March 2024 performance was recorded as 64.5%. This has since improved with 68.1% of patients waiting less than four hours in July 2024.



At the end of March 2023 there were 30 patients per day waiting over 12 hours in our EDs to be treated, admitted, or discharged. Throughout 2023/24 this number fluctuated with some months where the average was 19 per day.

By end of March 2024 the average number of patients waiting over 12 hours was 30 per day. Improvements are being made with this number reducing slowly.



In January 2024 55.3% of Scottish Ambulance Service handovers had a turnaround time of 60 minutes or less at our Acute Hospitals. This has increased to 55.9% in July 2024 with further improvements planned.

Reducing length of stay in our Acute Hospitals





At the start of April 2024, we had 209 inpatients who were not a delayed discharge in our acute hospitals for over 14 days, this level has been maintained as at July 2024.



In April 2023, our average length of stay for patients admitted to our acute hospitals as an emergency was 8.9 days. This reduced to 7.7 days in July 2023, before rising to 8.2 days in March 2024.



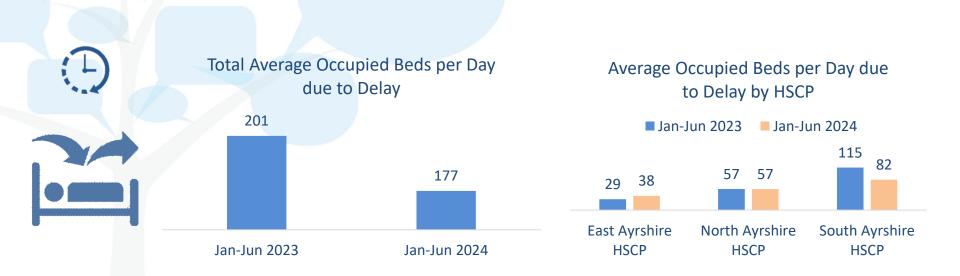
Our occupancy in our Acute Hospitals for our core funded beds remained above 100%.

System Pressures - Delayed Discharges



At end of April 2023 there were a total of 190 patients who were a delayed discharge, reaching 251 in July 2023. By end of March 2024 this had reduced to 168 patients.

When comparing 2023 with 2024 there has been some improvement in the number of beds occupied due to a delayed discharge reduced from 201 beds per day to 177 per day compared to the previous year.



Diagnostics Performance



Imaging



In April 2023 imaging waiting list performance showed that 65.7% of patients were waiting less than 6 weeks for an Imaging appointment. This reduced to 59.8% by March 2024.

Increased Imaging activity with 3,895 diagnostic tests provided in July 2024. Imaging waiting list are now at their lowest level since earlier this year (February 2024).



Endoscopy

The proportion of patients who waited less than 6 weeks for an Endoscopy improved from 42.3% in April 2023 to 57.5% by March 2024. There has been a subsequent reduction of patients on the waiting list with 1,915 in April 2023 to 1,643 by March 2024.

There have continued to be increased activity levels with 896 endoscopy procedures provided in July 2024 compared with 810 in March 2023.

Planned Care Performance



New Outpatient Appointment



Throughout 2023/24 the number of patients waiting less than 12 weeks from referral to a first (new) outpatient appointment has remained below 40%.

Activity has increased from 6,731 appointments in April 2023 to 8,736 in March 2024.



Inpatients/Daycase Treatment

In March 2023 51.6% of patients waited less than 12 weeks from referral to being treated and by March 2024 this had risen to 56.2%.

Throughout 2023/24 the number of patients on the waiting list remained fairly stable with a peak in March 2024 of 8,227 patients. Since then there have been a monthly reduction in number of Inpatient/Daycase patients.

A focus on eliminating long waits has resulted in fewer patients waiting over 12 months for treatment.

Cancer Performance



62 Days Cancer



In April 2023 the proportion of patients with a suspicion of cancer referral who started treatment within 62 days was 85% and by March 2024 this had fallen to 80%. However performance has improved again and in July 2024 85.6% of patients started their treatment within 62 days.

Eight out of ten cancer types are meeting the Delivery Plan trajectory for this measure.

31 Days Cancer

Over 98% of patients start their cancer treatment within 31 days following a decision to treat. Over the past year performance has consistently been in excess of 96%.

Nine out of ten specialties are meeting the Delivery Plan trajectory for this measure.

Mental Health Performance





Throughout 2023/24 the target for over 90% of children and young people to start treatment within 18 weeks of initial referral to CAMHS has consistently been met. This has continued into 2024 with performance of 98.7% in July 2024.



Psychological Therapies

In April 2023 88.8% of patients started treatment within 18 weeks of initial referral for Psychological Therapy and by March 2024 this had reduced to 83.7%. This has since improved with performance in July 2024 at 91%.



Drug and Alcohol

Throughout 2023/24 the target for over 90% of clients to wait less than 3 weeks from referral to appropriate service to receive treatment has consistently been met. This has continued into 2024 with performance of 99.3% in July 2024.

Partnership Working



East Ayrshire Health and Social Care Partnership

Successes

- Continued high performance and improvements in discharge without delay
- Selection and progress as PCPIP demonstrator site
- Development of new ways of person centred, inter agency working recognised nationally (eg Getting It Right For Everyone)

Challenges

- Financial constraints: limiting the ability to invest and develop community based preventative services
- Recruitment and retention in key professional areas and impact on workload, staff wellbeing and performance
- Ongoing concerns with the provision of healthcare services in HMP Kilmarnock (prison estate and increased population)

Partnership Working



North Ayrshire Health and Social Care Partnership

Successes

- Care at Home Strategic Review
- Robust Public Protection Approach
- Drug Deaths Mission joint work with ADP and statutory services, eg in the delivery of MAT standards

Challenges

- Financial constraints
- Workforce particularly for specialist roles and Island Services
- Meeting the physical and mental health needs of our population/demographic

Partnership Working



South Ayrshire Health and Social Care Partnership Successes

- Implementation of Front Door AHP Service
- Rehabilitation Service Strategic Learning Review
- Ageing Well Strategy and Engagement with Community Planning Partnership
- Locality Working and emerging action plans for improvement

Challenges

- Workforce availability; particularly in-house Care At Home
- Care Home placements available to the public sector

Resilience



Winter Preparedness





Safe and Effective Pathways



Workforce









People strategy – People matter



Working together to achieve the healthiest life possible for everyone in Ayrshire and Arran





Volunteers



We have over 500 amazing volunteers!

Fund raising

- To date raised £5,050,000
- Last year alone raised £155,000

Improving Patient Experience

- Refurbishment of relatives/quiet rooms
- Specialist beds and mattresses
- Birthing beds for labour suite

Volunteer Roles

- Welcome and Administrators
- Gardeners
- Ward and Patient Experience
- Pet Handlers
- Activity and Occupational Health
- Peers

Achievements 2023/24

NHS

New Outpatient Service Endometrial ablation - UHA

Heart Health Event Success

Systemic Anti-Cancer Therapy services





Question and Answers



