

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting Date:	Monday 8 June 2026
Title:	Quality & Safety Report - Gynaecology & Sexual Health Services
Responsible Director:	Jennifer Wilson, Executive Nurse Director Vicki Campbell, Director of Acute Services
Report Author:	Attica Wheeler, Site Director Women and Children's / Midwifery Director and Associate Nurse Director – Women and Children's Services

1. Purpose

This is presented to the Board for:

- Awareness

This paper relates to:

- Annual Operational Plan

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

This supports the following Corporate Objectives:

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- Better Value – Delivering innovative and sustainable services for everyone
- Better Care – Improving your experience of care

2. Report summary

2.1 Situation

This paper is for information to the NHS Board following detailed discussion at Healthcare Governance Committee. The paper provides an overview of quality and safety activity within NHS Ayrshire and Arran Gynaecology and Sexual Health Services.

2.2 Background

This paper will set out the progress of Gynaecology and Sexual Health Services aligned to the four quality pillars:

- Quality Planning
- Quality Control
- Quality Assurance
- Quality Improvement

2.3 Assessment

- Inpatient Gynaecology:
 - Falls rate demonstrates variation with a median of 1.72 per 1000 occupied bed days, this is lower than the median for University Hospital Crosshouse which is 4.4 per 1000 occupied bed days.
 - No falls with harm have been sustained since April 2024.
 - No cardiac arrests have been sustained since April 2024.
 - Compliance with completion of MUST Score demonstrates normal variation with 95% compliance being achieved in 11 out of the last 12 months.
- There is a year-on-year increase in the number of terminations of pregnancy within NHSAA for the past 5 years.

2.3.1 Quality/ patient care

Quality Improvement work contributes to improve outcomes and reduce inequalities in outcomes by providing a safe, high quality care experience for all service users. Gynaecology Services within NHSAA are participating in the Scottish Patient Safety (SPSP) Adults in Hospital Programme, with the aim of improving the safety and reliability of care and reduce harm and the Excellence in Care Programme.

2.3.2 Workforce

The service remains assured with gynaecology and sexual health staffing levels and succession planning, ensuring safe staffing levels remain a priority for the service.

2.3.3 Financial

There may be financial implications identified as national recommendations are identified and require implementation. This is assessed and monitored by the Senior Management Team.

2.3.4 Risk assessment/management

Participation in national improvement and assurance programmes aim to reduce harm within services. Not participating in the programmes could impact on the provision of a safe service and reputation of the organisation.

2.3.5 Equality and diversity, including health inequalities

An EQIA has not been completed however, national programmes of work have completed an EQIA considering all elements of the programmes.

2.3.6 Best Value

This paper support Best Value across the following themes.

- Vision and Leadership: through clear priorities for improving quality and safety across Gynaecology and Sexual Health Services
- Effective Partnerships: by aligning with national programmes such as SPSP and Excellence in Care and by working collaboratively with clinical teams and wider stakeholders.
- Governance and accountability: enhanced through robust oversight structures, regular data scrutiny, and clear reporting on risks, performance, and assurance.
- Use of resources: targeting improvement activity where harm, cost, and operational impact are greatest, supporting more efficient and sustainable service delivery
- Performance management: evidenced through continuous monitoring of safety measures, enabling focused action and improvement.

2.3.7 Other impacts

We aim to provide compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values; and result in the people using our services having a positive experience of care.

2.3.8 Communication, involvement, engagement and consultation

Engagement and consultation include:

- Regular reporting through clinical governance for Gynaecology and Sexual Health Services.
- Bi-monthly Gynaecology and Sexual Health QI Group meeting

2.3.9 Route to the meeting

A version of this paper has been discussed at the Women and Children's Quality Improvement meeting and the Gynaecology and Sexual Health Clinical Governance meeting. This paper was also discussed at the Healthcare Governance Committee on 12 May 2026.

2.4 Recommendation

For awareness. The Board is asked to note the quality and safety activity within NHS Ayrshire and Arran Gynaecology and Sexual Health Services.

3. List of appendices

The following appendices are included with this report:

Appendix 1 – Gynaecology & Sexual Health Services Quality and Safety Update

Gynaecology & Sexual Health Services - Quality and Safety Update

1. Introduction

This paper outlines quality of care and progress with national and local quality improvement and assurance programmes of work. It describes current progress and plans going forward in relation to patient safety measures and workforce including:

- National and local improvement and assurance programmes
 - Falls
 - Pressure Ulcers
 - Deteriorating Patient/ Cardiac Arrest
 - Food, Fluid and Nutrition
- Women’s Health Plan
- Termination of Pregnancy Service
- Complaints
- Human Embryology and Fertilisation Authority (HEFA) Inspections

2. National and local improvement and assurance programmes.

NHSAA are participating in the SPSP Adults in Hospital Programme, which aims to improve the safety and reliability of care and reduce harm and the Excellence in Care (EiC) programme commissioned by the Scottish Government in response to the Vale of Leven Inquiry recommendations which equips clinical teams with quality and safety oversight to provide assurance of quality of care.

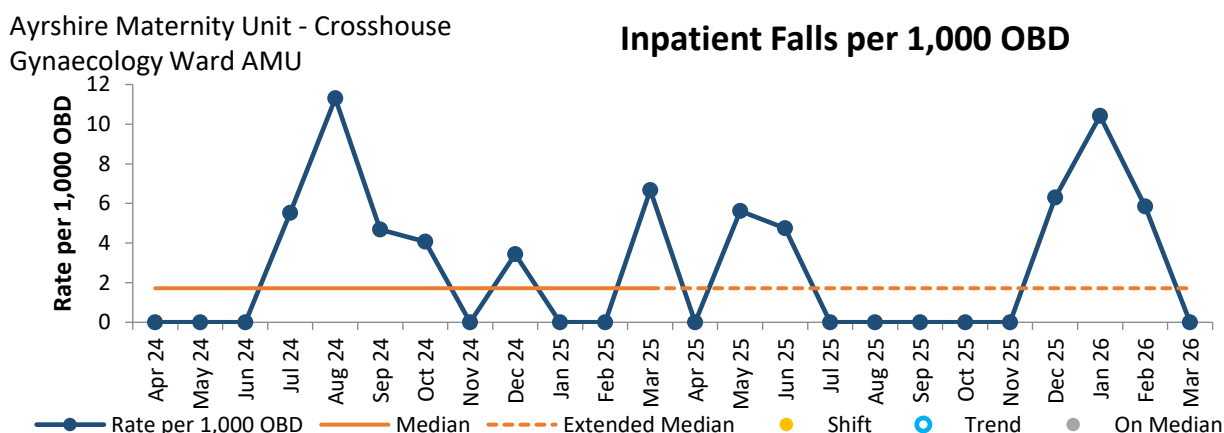
Gynaecology Services report on the following agreed measures:

- Falls and Falls with Harm
- Pressure Ulcers
- Deteriorating Patient/ Cardiac Arrest
- Food, Fluid and Nutrition

2.1 Falls

The gynaecology ward at University Hospital Crosshouse (UHC) falls rate demonstrates variation with a median of 1.72 per 1000 occupied bed days (Chart 1), this median is lower than UHC median which is 4.4 per 1000 occupied bed days. No falls with harm have been sustained since April 2024.

Chart 1: Inpatient Falls per 1000 Occupied Bed Days, Gynaecology Ward UHC



2.2 Pressure Ulcers

The gynaecology ward at UHC pressure ulcer rate demonstrates variation with 2 months in May 2025 and September 2025 demonstrating an increase in pressure ulcers (Chart 2). Following this increase, the Pressure Ulcer Prevention and

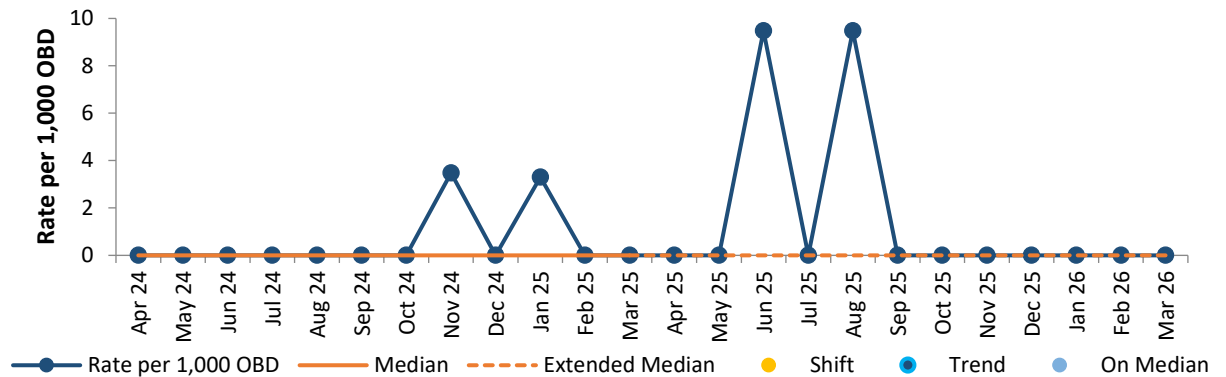
Management Care Bundle was introduced in October 2025, with no further pressure ulcers have been recorded.

Chart 2: Pressure Ulcer Rates per 1000 OBD's.

Ayrshire Maternity Unit - Crosshouse

Inpatient acquired PU's per 1,000 OBD

Gynaecology Ward AMU

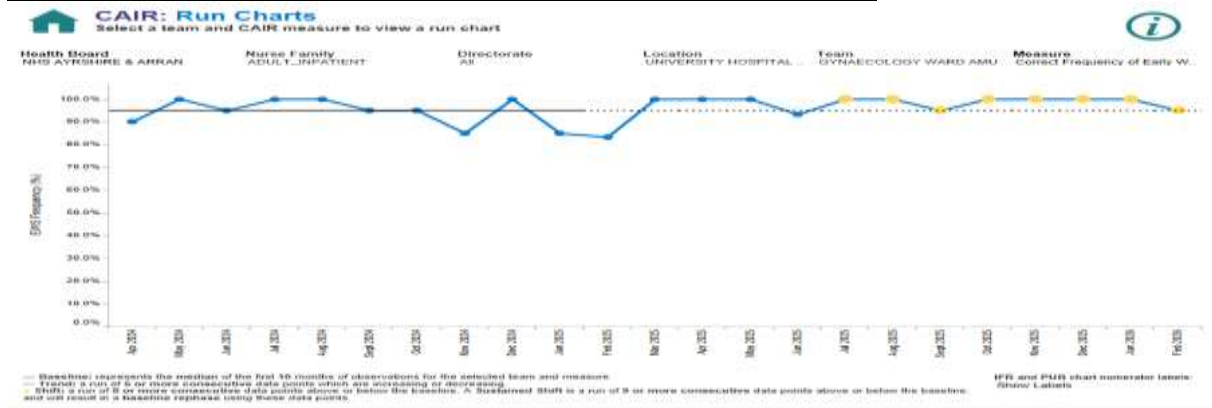


2.3 Deteriorating Patient/ Cardiac Arrest

No cardiac arrests have been sustained since April 2024.

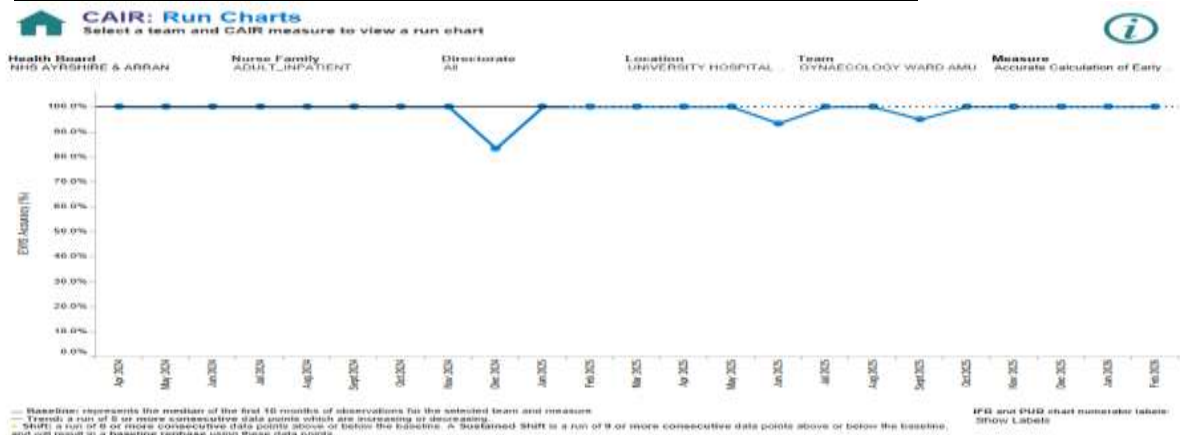
Correct frequency of National Early Warning Scores (NEWS2) demonstrates normal variation with compliance above 95% in 10 out of the last 12 months (Chart 3).

Chart 3: Percent compliance with correct frequency of NEWS2



Compliance with accurate calculation of National Early Warning Scores (NEWS2) demonstrates normal variation with compliance greater than 95% since January 2025. (Chart 4).

Chart 4: Percent compliance with accurate calculation of NEWS2

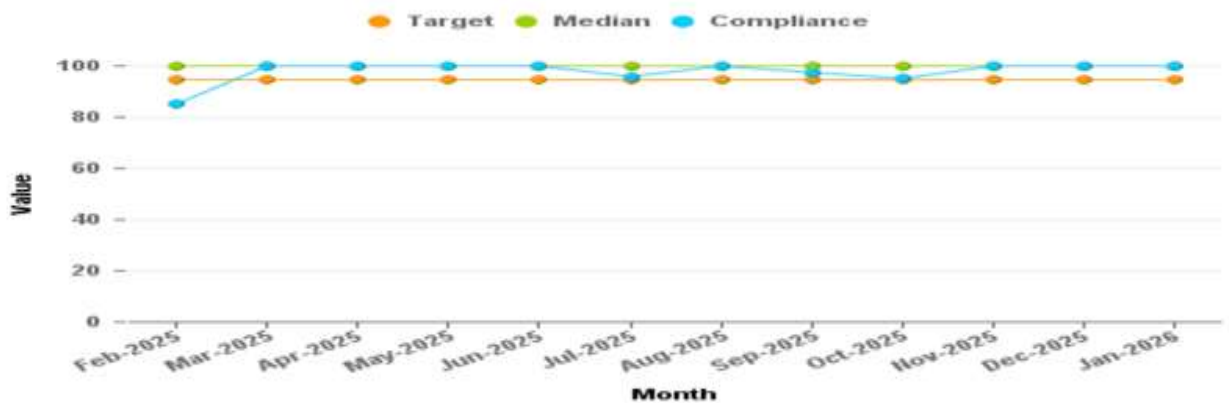


2.4 Food, Fluid and Nutrition

2.4.1 MUST Score

Compliance with completion of the MUST Score demonstrates normal variation with 95% compliance being achieved in 11 out of the last 12 months.

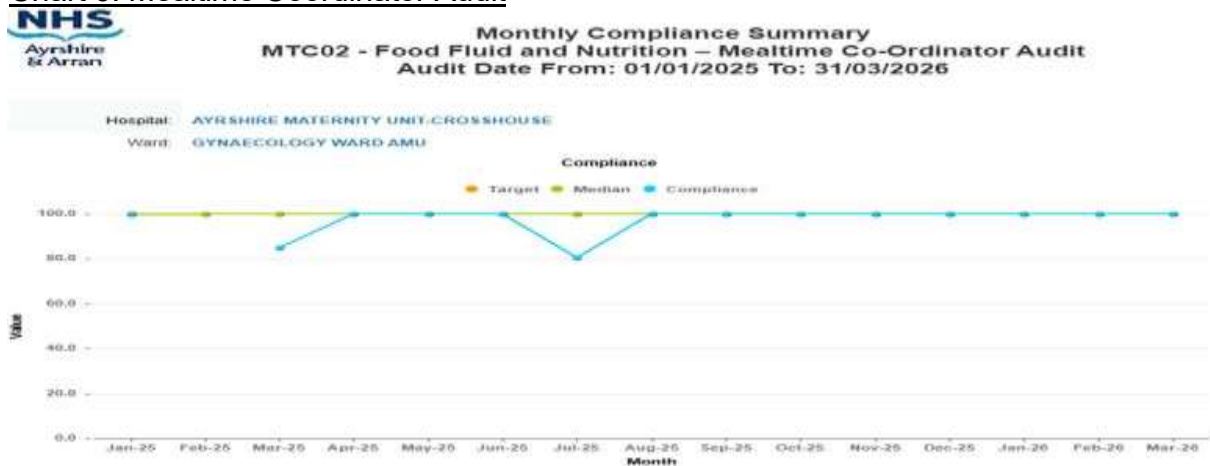
Chart 5: Food Fluid and Nutrition - MUST Score Compliance



2.4.2 Mealtime Co-ordinator

The Food, Fluid and Nutrition Mealtime Co-ordinator was introduced in March 2025 and demonstrates 100% compliance since August 2025.

Chart 6: Mealtime Coordinator Audit



3. Women's Health Plan

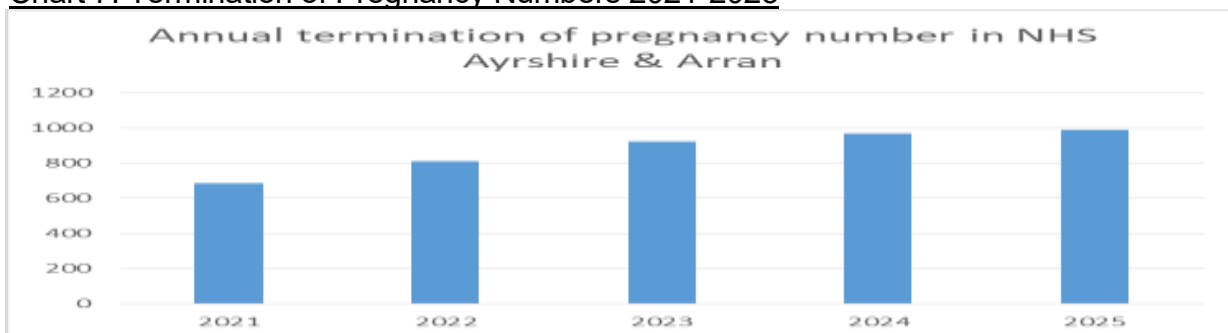
Building on the first Women's Health Plan published in August 2021, Phase Two Women's Health Plan (2026 - 2029) was published in January 2026, with a focus on advancing the ambition that all women and girls in Scotland enjoy the best possible health throughout their lives. This plan sets out new actions to address health inequalities faced by women and girls in Scotland. New actions include optimising women's future health through prevention and early intervention so women can live longer, healthier lives. This includes pelvic floor health, bone health and heart health.

NHS Ayrshire and Arran have developed a local action plan in collaboration with Public Health team to ensure each of the priorities highlighted in the Women's Health plan are supported and developed.

4. Termination of Pregnancy Service (TOP)

Over the past five years there has been a year-on-year increase in the number of terminations of pregnancy within NHSAA (Chart 7).

Chart 7: Termination of Pregnancy Numbers 2021-2025



Current waiting list for access for termination of pregnancy is three weeks; there is a plan to increase nursing capacity from existing resources within the service to help improve access for Women.

5. Complaints/Feedback

Gynaecology and Sexual Health services complaints are discussed at weekly assurance meeting to ensure complaints are being handled timeously and to analysis themes and trends. Table 6 displays complaints received January to March 2026.

Table 1: Gynaecology and Sexual Health Complaints

	COMPLAINTS		
	January	February	March
Concern	0	1	1
Stage 1	5	7	7
Stage 2	2	5	3
TOTAL	7	13	11

The most common identified theme is waiting times. This is being addressed through the waiting times initiative work being undertaken. We offer complainants the opportunity to meet the senior management team to address concerns in person prior to completing the complaints process.

Feedback

- There were 20 stories told on Care Opinion for Gyn and Sexual Health Services in Quarter 4 2025/26.
- 17 were positive and 3 had a level of criticality.
- All stories received a response from the Service.

6. Human Embryology and Fertilisation Authority (HEFA) Inspections

A HEFA Inspection was carried out on the 11th March 2026. The formal report has not been published however, initial feedback received was positive with 3 action points raised on the day by inspectors which will be taken forward. We are assured that our fertility service remains compliant within the HEFA accreditation framework with a dedicated predominantly nurse led team.