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Aberdeen City Health & Social Care Partnership  
*A caring partnership*

To: Members of the Risk, Audit and Performance Committee

Town House,  
ABERDEEN 12 September 2023

## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

The Members of the **RISK, AUDIT AND PERFORMANCE COMMITTEE** are requested to meet in **Virtual - Remote Meeting on TUESDAY, 19 SEPTEMBER 2023 at 10.00 am.**

JENNI LAWSON  
INTERIM CHIEF OFFICER – GOVERNANCE (LEGAL)

### **BUSINESS**

#### **DECLARATION OF INTERESTS AND TRANSPARENCY STATEMENTS**

- 1.1 Members are requested to intimate any declarations of interest or transparency statements

#### **DETERMINATION OF EXEMPT BUSINESS**

- 2.1 Members are requested to determine that any exempt business be considered with the press and public excluded

#### **STANDING ITEMS**

- 3.1 Minute of Previous Meeting of 13 June 2023 (Pages 3 - 8)
- 3.2 Business Planner (Pages 9 - 14)

#### **RISK**

- 4.1 There are no items under this heading

#### **AUDIT**

- 5.1 Adult Support and Protection Inspection Report 2022 - Update - HSCP.23.061 (Pages 15 - 20)
- 5.2 Internal Audit Update Report - HSCP.23.065 (Pages 21 - 30)
- 5.3 Internal Audit Report – Adults with Incapacity - HSCP.23.066 (Pages 31 - 36)

## **PERFORMANCE**

- 6.1 Quarter 1 (2023/24) Financial Monitoring Update - period ended 30 June 2023 - HSCP.23.063 (Pages 37 - 50)
- 6.2 Locality Planning Annual Reports and Presentation - HSCP.23.060 (Pages 51 - 120)
- 6.3 Quarterly Performance Reports against the Delivery Plan - HSCP.23.062 (Pages 121 - 148)
- 6.4 Justice Social Work Delivery Plan Update 2022-23 - HSCP.23.064 (Pages 149 - 164)

## **EXEMPT / CONFIDENTIAL BUSINESS**

- 7.1 None at the time of issuing the agenda

## **COMMITTEE DATES**

- 8.1 Date of Next Meeting - 28 November 2023

Should you require any further information about this agenda, please contact Emma Robertson, [emmrobertson@aberdeencity.gov.uk](mailto:emmrobertson@aberdeencity.gov.uk)



## **Risk, Audit and Performance Committee**

### **Minute of Meeting**

**Tuesday, 13 June 2023**

**11.00 am Virtual - Remote Meeting**

ABERDEEN, 13 June 2023. Minute of Meeting of the RISK, AUDIT AND PERFORMANCE COMMITTEE. Present:- Councillor Martin Greig Chairperson; and Councillor John Cooke, June Brown, Luan Grugeon, Jamie Dale, Anne MacDonald, Alison MacLeod and Paul Mitchell.

Also in attendance: Martin Allan, Susie Downie, John Forsyth, Stuart Lamberton, Graham Lawther, Judith McLenan, Shona Omand-Smith, Simon Rayner and Sandy Reid.

**The agenda and reports associated with this minute can be found [here](#).**

**Please note that if any changes are made to this minute at the point of approval, these will be outlined in the subsequent minute and this document will not be retrospectively altered.**

## **DECLARATIONS OF INTEREST OR TRANSPARENCY STATEMENTS**

1. Members were requested to intimate any declarations of interest or connections in respect of the items on the agenda.

### **The Committee resolved:-**

to note that there were no Declarations of Interest or Transparency Statements.

## **EXEMPT BUSINESS**

2. There was no exempt business.

## **MINUTE OF PREVIOUS MEETING OF 2 MAY 2023**

3. The Committee had before it the minute of its previous meeting of 2 May 2023, for approval.

### **The Committee resolved:-**

- (i) to note that those present should read Anne MacDonald; not Anne MacKenzie; and
- (ii) to otherwise approve the minute as a correct record.

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### **BUSINESS PLANNER**

4. The Committee had before it the planner of committee business, as prepared by the Chief Finance Officer.

**The Committee resolved:-**

- (i) to note the reasons outlined in the planner for the delay to items 11 (Justice Social Work Performance report and Justice Social Work Annual Report) and 12 (Navigator Project evaluation);
- (ii) to note that a Service Update regarding the Navigator Project would be circulated in the interim; and
- (iii) to otherwise note the Planner.

### **REVIEW OF FINANCIAL GOVERNANCE HSCP.23.042**

5. The Committee had before it a report outlining the results of the review undertaken by the Aberdeen City Health and Social Care Partnership (ACHSCP) Leadership Team against financial governance requirements contained in the Chartered Institute of Public Finance and Accountancy (CIPFA) statement on the 'Role of the Chief Financial Officer in Local Government (2016)'.

The Chief Finance Officer introduced the report and responded to questions from members.

**The report recommended:-**

that the Committee note the content of the report and the accompanying results of the Executive team review contained at Appendix A.

**The Committee resolved:-**

to note the information provided.

### **QUARTER 4 (2022/23) FINANCIAL MONITORING UPDATE - HSCP.23.043**

6. The Committee had before it the Quarter 4 (2022/23) Financial Monitoring Update and associated appendices, prepared by the Chief Financial Officer.

**The report recommended:-**

that the Committee:

- (a) note the report in relation to the IJB budget and the information on areas of risk and management action that were contained therein; and
- (b) approve the budget virements indicated in Appendix E of the report.



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**The Committee resolved:-**

to agree the recommendations.

### **REVIEW OF DUTIES AND YEAR END REPORT - ANNUAL REVIEW OF RAPC - HSCP.23.031**

7. The Committee had before it a review of reporting for 2022/23 and a draft intended schedule of reporting for 2023/24, providing assurance that the Committee was fulfilling all the duties as set out in its terms of reference. The Strategy and Transformation Lead introduced the report and responded to questions from members

**The report recommended:-**

that the Committee note the content of Appendix A – Risk, Audit & Performance Duties report.

**The Committee resolved:-**

to note the information provided.

### **STRATEGIC RISK REGISTER - HSCP.23.045**

8. The Committee had before it an updated version of the Strategic Risk Register prepared by the Business Manager.

**The report recommended:-**

that the Committee approve the revised Strategic Risk Register as detailed in Appendix to the report.

**The Committee resolved:-**

- (i) to note that a deep dive on specific high risk areas would be carried out and presented to Members at a workshop, in addition to the workshop addressing the annual overview/refresh of the whole Strategic Risk Register; and
- (ii) to otherwise agree the recommendation.

### **INTERNAL AUDIT REPORTS - ANNUAL REPORT AND IJB PERFORMANCE MANAGEMENT REPORTING - HSCP.23.044**

9. The Committee had before it the Internal Audit Annual Report for the year ended 31 March 2023, prepared by the Chief Internal Auditor.

In respect of a question regarding Data Sharing arrangements across Aberdeen, Aberdeenshire and Moray IJBs, the Business Manager advised that he had raised this

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with the Data Protection Officer for NHS Grampian and undertook to circulate an update to Members.

With regard to the four Major Recommendations across the four Internal Audit reports issued during 2022/23, assurance was provided by the Business Manager that specific Senior Management Team members had been assigned these Assurance Recommendations as actions and they were working with Internal Audit to close them off.

### **The report recommended:-**

that the Committee:

- (a) note the Internal Audit (IA) Annual Report 2022/23;
- (b) note that the Chief Internal Auditor had confirmed the organisational independence of Internal Audit;
- (c) note that there had been no limitation to the scope of Internal Audit work during 2022/23; and
- (d) note the progress that management had made with implementing recommendations agreed in Internal Audit reports.

### **The Committee resolved:-**

- (i) to note that an update on Data Sharing would be circulated; and
- (ii) to otherwise agree the recommendations.

## **CAMHS UPDATE REPORT - YOUNG PEOPLE MONITORING REPORT 2020-21, MENTAL WELFARE COMMISSION - HSCP.23.046**

**10.** The Committee had before it an update on the Young People Monitoring Report for 2021-22, which provided assurance regarding the progress in relation to the recommendations made by the Mental Welfare Commission.

Judith McLenan - Lead for Mental Health and Learning Disability Inpatient Services, Specialist Services and CAMHS, introduced herself. She presented the report and responded to questions from members regarding admission rates and funding challenges.

### **The report recommended:-**

that the Committee note the recommendation made by the Mental Welfare Commission in the Young People's Monitoring Report 2021-22 as attached at Appendix A of the report and local progress made to implementing the recommendation.

### **The Committee resolved:-**

- (i) to instruct the Lead for Mental Health and Learning Disability Inpatient Services, Specialist Services and CAMHS to bring a report back to Committee in 12

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- months' time in order to provide a local update on the full Mental Welfare Commission report; and
- (ii) to otherwise note the information provided.

**DATE OF NEXT MEETING - 19 SEPTEMBER 2023 AT 10AM**

11. The Committee had before it the date of the next meeting: Tuesday 19 September 2023 at 10am.

**The Committee resolved:-**

to note the date of the next meeting.

- **COUNCILLOR MARTIN GREIG, Chair.**

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| RISK and AUDIT PERFORMANCE COMMITTEE BUSINESS PLANNER  |   |   |               |                                 |                                       |             |               |   |  |
|--|---|---|---------------|---------------------------------|---------------------------------------|-------------|---------------|---|--|
| The Business Planner details the reports which have been instructed by the Committee as well as reports which the Functions expect to be submitting for the calendar year. |   |   |               |                                 |                                       |             |               |   |  |
| Date Created   | Report Title  | Minute Reference/Committee Decision or Purpose of Report  | Report Number | Report Author                   | Lead Officer / Business Area          | Directorate | Update/Status | Delayed or Recommended for removal or transfer, enter either D, R, or T | Explanation if delayed, removed or transferred |
| 19 September 2023  |   |   |               |                                 |                                       |             |               |   |  |
|  | Adult Support and Protection Inspection Report Update   | To note the progress update regarding Next Steps following the ASP Inspection published in April 2022.  | HSCP23.061    | Claire Wilson / Val Vertigans   | Lead for Social Work                  |             |               |   |  |
| 29.08.2023   | Internal Audit Update Report                            | To provide an update on Internal Audit's work since the last update. Details are provided of the progress against the approved Internal Audit plans, audit recommendations follow up, and other relevant matters for the RAPC to be aware of.   | HSCP23.065    | Jamie Dale                      | Internal Audit                        |             |               |   |  |
| 29.08.2023   | Internal Audit Report – Adults with Incapacity          | To present the outcome from the planned audit of Adults with Incapacity that was included in the Internal Audit Plan.   | HSCP23.066    | Jamie Dale                      | Internal Audit                        |             |               |   |  |
| 22.08.23   | Quarter 1 (2023/24) Financial Monitoring Update         | To summarise the revenue budget performance to 30 June 2023 for the services within the remit of the IJB, to advise on any areas of risk and management mitigating action and to approve the budget virements so that budgets more closely align to anticipated income and expenditure. | HSCP23.063    | Paul Mitchell                   | Chief Finance Officer                 | ACHSCP      |               |   |  |
|  | Locality Planning Annual Reports                        | To note the update - At IJB on 30 August 2022, members instructed the Chief Officer to report to the Risk, Audit and Performance committee in 12 months with an update on locality planning   | HSCP23.060    | Alison Macleod / Iain Robertson | Lead Strategy and Performance Manager | ACHSCP      |               |   |  |
| 30.11.2022   | Quarterly Performance Reports against the Delivery Plan | To note the position.   | HSCP23.062    | Alison Macleod                  | Strategy and Transformation Team      | ACHSCP      |               |   |  |

|    | A                       | B  | C   | D             | E  | F                                | G           | H   | I   | J   |
|----|-------------------------|--|---|---------------|--|----------------------------------|-------------|---|---|---|
|    | Date Created            | Report Title                                     | Minute Reference/Committee Decision or Purpose of Report  | Report Number | Report Author  | Lead Officer / Business Area     | Directorate | Update/Status   | Delayed or Recommended for removal or transfer, enter either D, R, or T | Explanation if delayed, removed or transferred  |
| 3  |                         |  |   |               |  |                                  |             |   |   |   |
| 11 | 02.05.23                | Mental Health/LD Portfolio Board                 | On 2 May 2023, Members instructed the Strategy and Transformation Lead to provide a report to the Committee in June 2023 in respect of the Mental Health/LD Portfolio Board and its progress.   | N/A           | Alison Macleod   | Strategy and Transformation Team | ACHSCP      |   | T   | As part of the quarterly performance reporting a deeper dive was agreed on this programme within the Delivery Plan. When the quarterly report is presented, this programme will be incorporated into it in the form of presentations followed by opportunity for Q&A. |
| 12 | 02.05.23                | Frailty Pathway Performance                      | On 2 May 2023, Members instructed the Strategy and Transformation Lead to provide a report to the Committee in respect of the Frailty Pathway Performance.  | N/A           | Alison Macleod   | Strategy and Transformation Team | ACHSCP      |   | T   | As part of the quarterly performance reporting a deeper dive was agreed on this programme within the Delivery Plan. When the quarterly report is presented, this programme will be incorporated into it in the form of presentations followed by opportunity for Q&A. |
| 13 | 22.06.2021              | Justice Social Work Delivery Plan update 2022-23 | On 22.06.21, from Justice Social Work Performance Management Framework - HSCP.21.053; (i)to approve the Justice Social Work Performance Management Framework as a first iteration of work in progress and agree to its implementation by the justice service; and (ii)to instruct the Chief Officer (ACHSCP) to use this framework as the basis for a report outlining the performance of the justice service and present this report to RAPC no later than the end of Q1 2022-2023 and then similarly on an annual basis thereafter. | HSCP23.064    | Kevin Toshney/<br>Claire Wilson /<br>Lesley Simpson /<br>Liz Cameron | Chief Social Work Officer        | ACHSCP      | Annual Report. Approved by RAPC on 23 June 2022, therefore meeting date in June 2023 to be decided for next consideration. Members agreed on 13 June 2023 to defer to RAPC in September 2023 due to workload pressures.   |   |   |
| 14 | 22.06.2021              | Justice Social Work Performance report           | On 22.06.21, from Justice Social Work Performance Management Framework - HSCP.21.053; (i)to approve the Justice Social Work Performance Management Framework as a first iteration of work in progress and agree to its implementation by the justice service; and (ii)to instruct the Chief Officer (ACHSCP) to use this framework as the basis for a report outlining the performance of the justice service and present this report to RAPC no later than the end of Q1 2022-2023 and then similarly on an annual basis thereafter. |               | Liz Cameron  | Chief Social Work Officer        | ACHSCP      | Request for deferral to November 2023: The annual Scottish Government return is being worked on and is due at the end of October. When commencing the work for this report and indeed our own performance report, there have been some anomalies with the data which we are investigating. This would result in only partial data being able to be presented to the Committee. I would like to enquire with your permission that we delay the performance report until the following committee to enable the whole suite of data to be available. | D   |   |
| 15 | Standing Item           | Whistleblowing Updates                           | Quarterly update  |               | Martin Allan   | Business Manager                 |             |   | R   | There are no reported incidents.  |
| 16 | <b>28 November 2023</b> |  |   |               |  |                                  |             |   |   |   |
| 17 | Standing Item           | Directions Tracker                               | 6 monthly reporting   |               |  |                                  |             |   |   |   |
| 18 |                         | IJB Annual Performance Report                    |   |               | Alison Macleod   | Strategy and Transformation Team |             |   |   |   |
| 19 | Standing Item           | Internal Audit Update Report                     | To provide assurance that services are operating effectively and to note the update on the work of Internal Audit.  |               | Jamie Dale   | Chief Internal Auditor           | Governance  |   |   |   |

|    | A                      | B   | C  | D             | E              | F                                     | G           | H  | I   | J  |
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| 3  |                        |   |  |               |                |                                       |             |  |   |  |
| 20 | 30.11.22               | Quarterly Performance Reports against the Delivery Plan (TBC November 2023 or March 2024) | To note the position.  |               | Alison Macleod | Strategy and Transformation Team      |             |  |   |  |
| 21 | Standing Item          | Financial Regulations Review  | To approve the revised Financial Regulations. Last reviewed 17 November 2022.  |               | Paul Mitchell  | Chief Finance Officer                 | ACHSCP      |  |   |  |
| 22 |                        | Workforce Plan  | Members agreed at IJB in November 2022 to instruct the Chief Officer to report progress annually to the Risk, Audit, and Performance Committee.  |               | Sandra MacLeod | Chief Officer                         | ACHSCP      |  |   |  |
| 23 | 01.08.22               | Strategic Risk Register   |  |               | Martin Allan   | Business Manager                      | ACHSCP      |  |   |  |
| 24 | Standing Item          | Equalities and Equalities Outcomes  | To note the progress towards evidencing compliance with the Human Rights Act 1998, the Equality Act 2010, the Scottish Specific Public Sector Equality Duties 2012 and the Fairer Scotland Duty 2018, outlining how person-centered equality and human rights culture is being delivered across all services.<br><br>At IJB on 25 May 2021 Members resolved to instruct the Chief Officer, ACHSCP to submit 6-monthly reports alternately to the RAPC (starting December 2021 and then IJB - June 2022). |               | Alison Macleod | Lead Strategy and Performance Manager | ACHSCP      | Expected to IJB in April 2024.   |   |  |
| 25 | 24.08.21               | Navigator project evaluation  | IJB 24.08.21 - NAVIGATOR REPORT - HSCP.21.086 - to instruct the Chief Officer, ACHSCP to present an evaluation and update report to the RAPC prior to conclusion of Year 2 funding. (First two years October 21 to October 23)   |               | Simon Rayner   | ADP Strategic Lead                    | ACHSCP      | Simon Rayner advised: The Navigator service only went live in August 2022 due to the service getting set up and recruitment etc. We have 6 months of initial data but not the qualitative work yet or feedback from service users or HSCP staff. This will be issued as a Service Update. Members agreed on 13 June 2023 to defer report to November 2023. |   |  |
| 26 | <b>23 January 2024</b> |   |  |               |                |                                       |             |  |   |  |
| 27 | Standing Item          | Whistleblowing Updates  | Quarterly update   |               | Martin Allan   | Business Manager                      | ACHSCP      |  |   |  |
| 28 | 30.11.22               | Quarterly Performance Reports against the Delivery Plan (TBC November 2023 or March 2024) | To note the position.  |               | Alison Macleod | Strategy and Transformation Team      |             |  |   |  |
| 29 | Standing Item          | Board Assurance and Escalation Framework (BAEF)   | To note the Framework (reviewed by the Committee on an annual basis as per resolution on 26.08.2020)   |               | Martin Allan   | Business Manager                      | ACHSCP      |  |   |  |
| 30 |                        | Internal Audit Plan 2023-26   | To seek approval of the Internal Audit Plan for the Aberdeen City Integration Joint Board for 2023-26  |               | Jamie Dale     | Chief Internal Auditor                | Governance  |  |   |  |
| 31 | <b>2 April 2024</b>    |   |  |               |                |                                       |             |  |   |  |





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|----|--------------|--|---|---------------|----------------|---------------------------------|-------------|--------------------------------|---|--|
|    | Date Created | Report Title   | Minute Reference/Committee Decision or Purpose of Report  | Report Number | Report Author  | Lead Officer / Business Area    | Directorate | Update/Status                  | Delayed or Recommended for removal or transfer, enter either D, R, or T | Explanation if delayed, removed or transferred |
| 3  | 07.09.23     | Strategic Risk Register                                  |   |               | Martin Allan   | Business and Resilience Manager | ACHSCP      | Expected approx. November 2024 |   |  |
| 43 | 04.09.2023   | Staff sickness/absence rates at Royal Cornhill Hospital' | Referred from CCG on 15 August 2023 - that with reference to the decision at the previous meeting in April, specifically "that sickness absence rates, including the reasons for absence and whether they were work related and short, medium or long term be included within the update report to be submitted to the next meeting", that this would be reported via the Risk Audit and Performance Committee and/or the IJB |               | Judith McLenan | CAMHS                           | NHSG        | Timeframe to be discussed      |   |  |
| 44 |              |  |   |               |                |                                 |             |                                |   |  |

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## RISK, AUDIT AND PERFORMANCE COMMITTEE

|   |   |
|---|---|
| <b>Date of Meeting</b>                  | 19 <sup>th</sup> September 2023                                     |
| <b>Report Title</b>                     | ASP Inspection 2022 - Update  |
| <b>Report Number</b>                    | HSCP.23.061   |
| <b>Lead Officer</b>                     | Claire Wilson, Chief Officer Adult Social Work, HSCP                |
| <b>Report Author Details</b>            | Val Vertigans, Lead Strategic Officer Adult Public Protection, HSCP |
| <b>Consultation Checklist Completed</b> | YES   |
| <b>Appendices</b>                       | n/a   |

### 1. Purpose of the Report

- 1.1. To update members about progress regarding Next Steps following the Joint Inspection of Adult Support and Protection in Aberdeen which was published in June 2022. [[Joint inspection of adult support protection in the Aberdeen City partnership \(careinspectorate.com\)](https://www.careinspectorate.com/joint-inspection-of-adult-support-and-protection-in-the-aberdeen-city-partnership)]

### 2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee:
- a) Note the update provided below which gives assurance regarding Next Steps following the inspection of ASP in Aberdeen published in June 2022.

### 3. Summary of Key Information

- 3.1. The findings of the Joint Inspection Report on Adult Support and Protection in Aberdeen, as published on 21<sup>st</sup> June 2022, and related Next Steps, were provided to the Committee on 9<sup>th</sup> August 2022. This report provides an update on the Next Steps.
- 3.2. The inspection programme was led by the Care Inspectorate in collaboration with Her Majesty's Inspectorate of Constabulary Scotland (HMICS) and



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Healthcare improvement Scotland (HIS). The inspection focused on key processes and leadership (see national [quality indicator framework](#)). The key activities included submission of a short position statement, submission of supporting evidence under specific themes, a case file audit and a staff survey across social work, health and police, which was completed by 327 staff across the multi agency partnership.

3.3. The main findings of the inspection were as follows:

- Our **Key Processes** are effective, with areas for improvement which are outweighed by clear strengths supporting positive experiences and outcomes for individuals;
- Our **Strategic Leadership** is very effective, demonstrating major strengths in supporting positive experiences and outcomes for individuals.

3.4. Key Strengths were identified as:

- The new Adult Protection Social Work Team undertaking collaborative and effective screening of referrals;
- Communication and information-sharing, at every stage of the process;
- Our commitment to joint learning and development;
- Our Vision being well embedded, with a strong culture of strategic change and improvement; and
- Our user engagement strategy and initiatives – including seeking feedback from users at the end of the process, and the Adult Protection Committee's User Forum.

3.5. Priority Areas for Improvement were identified as:

- Quality of chronologies and protection planning (albeit the inspectors noted that we have well-designed tools and templates in place);
- Length of time taken to complete some investigations and case conferences;
- Lack of consistent and accurate recording by Health staff of their involvement in ASP;
- Need for more adults at risk to access independent advocacy; and
- Need to develop multi-agency evaluation approach, and better involve staff in change and improvement work.

It should be noted that all of these issues had previously been identified as areas for improvement, through local quality assurance and self evaluation work, and related activity had been incorporated into the Adult Protection Committee (APC) Improvement Plan.



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- 3.6. The following Next Steps were identified, and related update information is provided:

**Next Step 1:** *Following receipt of the final published report, the APC will review its Improvement Plan in light of the detailed findings. This is required to be submitted to the Care Inspectorate by 3rd August 2022.*

Update: The APC reviewed its Improvement Plan to ensure that areas for improvement identified in the inspection were clearly identified as priorities therein. This review was progressed in collaboration with the Care Inspectorate Link Inspector on the APC, and was 'formally' submitted to the Care Inspectorate as required,

**Next Step 2:** *Progress in relation to the areas identified for improvement will be overseen by the Care Inspectorate Link Inspector, who is a member of the APC.*

Update: Work has been progressed in relation to the areas for improvement, by the relevant APC Sub Committees, with regular updates being provided to the APC (including the Link Inspector). All actions have either been completed or are being actively progressed towards completion, albeit national work in relation to chronologies, which it was hoped would feed in to local improvement work, is still at an early stage.

**Next Step 3:** *A session has already been held with Council Officers to thank them for their engagement and involvement in the inspection process, and to advise them of issues which have emerged as a result of our own quality assurance as well as queries and issues raised by the inspectors during the course of the inspection.*

Update: Regular Council Officer peer support sessions continue to be held to consider specific issues including those which derive from the APC Improvement Plan where these relate to practice.

**Next Step 4:** *It is intended to hold a multi agency session to update staff across the partnership about the findings of the inspection and our approach going forwards in terms of addressing areas for improvement.*

Update: The APC hosted two multi agency 'Moving Forwards Together' sessions in October and November 2022 for this purpose – these were attended by over 50 members of staff in total, and received very positive feedback.



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### **4. Implications for IJB**

#### **4.1. Equalities, Fairer Scotland and Health Inequality**

There are no direct implications arising from the recommendations in this report.

#### **4.2. Financial**

There are no direct financial implications arising from the recommendations of this report.

#### **4.3. Workforce**

There are no direct workforce implications arising from the recommendations of this report. Staff will be involved on an ongoing basis in driving forward required improvements.

#### **4.4. Legal**

There are no direct legal implications arising from the recommendations of this report.

### **5. Links to ACHSCP Strategic Plan**

#### **5.1. This report links to the Strategic Plan 'Caring Together' Strategic Aim:**

Strategic Priority: Undertake whole pathway reviews ensuring services are more accessible and coordinated

Programme / Project: Implement the recommendations from the current Adult Support and Protection inspection

### **6. Management of Risk**

#### **6.1. Identified risks(s)**

Risk that an essentially positive inspection report leads to complacency in delivering high quality operational services and driving forwards improvement.



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This risk is being mitigated by continual oversight by the APC and accountability of the members thereon in undertaking duties and responsibilities.

### **6.2. Link to risks on strategic or operational risk register:**

This report links to the below from the IJB Strategic Risk Register as at May 2023:

#### Risk 4

Cause: Performance standards/outcomes are set by national and regulatory bodies and those locally-determined performance standards are set by the board itself.

Event: There is a risk that the IJB, and the services that it directs and has operational oversight of, fails to meet the national, regulatory and local standards.

Consequence: This may result in harm or risk of harm to people.

### **6.3. How might the content of this report impact or mitigate these risks:**

The findings of the inspection were overall very positive. Progression of work to address areas identified for improvement is close to completion and is being monitored by the APC. The risk is therefore low.

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## Risk, Audit and Performance Committee

|   |   |
|---|---|
| <b>Date of Meeting</b>                  | 19/09/2023  |
| <b>Report Title</b>                     | Internal Audit Update Report  |
| <b>Report Number</b>                    | HSCP23.065  |
| <b>Lead Officer</b>                     | Jamie Dale<br>Chief Internal Auditor                                    |
| <b>Report Author Details</b>            | Jamie Dale<br>Chief Internal Auditor<br>Jamie.Dale@aberdeenshire.gov.uk |
| <b>Consultation Checklist Completed</b> | Yes   |
| <b>Appendices</b>                       | Appendix A – RAPC - Internal Audit Update Report September 2023         |

### 1. Purpose of the Report

The purpose of this report is to provide the Risk, Audit and Performance Committee (RAPC) with an update on Internal Audit’s work since the last update. Details are provided of the progress against the approved Internal Audit plans, audit recommendations follow up, and other relevant matters for the RAPC to be aware of.

### 2. Recommendations

It is recommended that the Risk, Audit and Performance Committee:

- 2.1. Note the contents of the RAPC - Internal Audit Update Report September 2023 (“the Internal Audit Update Report”), as appended at Appendix A, and the work of Internal Audit since the last update;
- 2.2. Note the progress against the approved 2022/23 and 2023/24 Internal Audit plans as detailed in the Internal Audit Update Report; and



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- 2.3. Note the progress that has been made with implementing recommendations agreed in Internal Audit reports as outlined in the Internal Audit Update Report.

### **3. Summary of Key Information**

- 3.1. Internal Audit's primary role is to provide independent and objective assurance on the Board's risk management, control and governance processes. This requires a continuous rolling review and appraisal of the internal controls of the Board involving the examination and evaluation of the adequacy of systems of risk management, control and governance, making recommendations for improvement where appropriate. Reports are produced relating to each audit assignment and summaries of these are provided to the RAPC.

### **4. Implications for IJB**

- 4.1. **Equalities** – An equality impact assessment is not required because the reason for this report is for the RAPC to discuss, review and comment on the contents of the Internal Audit Update Report and there will be no differential impact, as a result of this report, on people with protected characteristics.
- 4.2. **Fairer Scotland Duty** – There are no direct implications arising from this report.
- 4.3. **Financial** – There are no direct implications arising from this report.
- 4.4. **Workforce** – There are no direct implications arising from this report.
- 4.5. **Legal** – There are no direct implications arising from this report.
- 4.6. **Other** - NA

### **5. Links to ACHSCP Strategic Plan**

- 5.1. Internal Audit's role is to provide assurance regarding the adequacy and effectiveness of the Integration Joint Board's framework of governance, risk management and control. Each of these areas helps ensure that the IJB can deliver on all strategic priorities as identified in its strategic plan.



## Risk, Audit and Performance Committee

### 6. Management of Risk

- 6.1. **Identified risks(s):** The Internal Audit process considers risks involved in the areas subject to review. Any risk implications identified through the Internal Audit process are as detailed in the resultant report.
- 6.2. **Link to risks on strategic risk register:** The Internal Audit Plan, and this output report, is developed following consideration of the Aberdeen City Health and Social care Partnership Risk Register and through consultation with management.
- 6.3. **How might the content of this report impact or mitigate these risks:**  
Where risks are identified during the Internal Audit process, recommendations are made to management in order to mitigate these risks.

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Aberdeen City Health & Social Care Partnership  
*A caring partnership*



## **Internal Audit**

# **Risk, Audit and Performance Committee Internal Audit Update Report September 2023**

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# 1 Executive Summary

## 1.1 Introduction and background

Internal Audit's primary role is to provide independent and objective assurance on the Council's risk management, control, and governance processes. This requires a continuous rolling review and appraisal of the internal controls of the Board involving the examination and evaluation of the adequacy of systems of risk management, control, and governance, making recommendations for improvement where appropriate. Reports are produced relating to each audit assignment and these are provided to the Risk, Audit and Performance (RAP) Committee. Along with other evidence, these reports are used in forming an annual opinion on the adequacy of risk management, control, and governance processes.

This report advises the RAP Committee of Internal Audit's work since the last update. Details are provided of the progress against the approved 2022/23 and 2023/24 Internal Audit plans, audit recommendations follow up, and other relevant matters for the Committee to be aware of.

## 1.2 Highlights

Full details are provided in the body of this report however Internal Audit would like to bring to the Committee's attention that since the last update:

- The final review from the previous financial year has been finalised.
- Work is underway with regards to delivery of the 2023/24 Internal Audit Plan.
- Five audit recommendations have been closed, with two carried forward.

## 1.3 Action requested of the RAP Committee

The Committee is requested to note the contents of this report and the work of Internal Audit since the last update.

---

## 2 Internal Audit Progress

### 2.1 2022-23 Audits

| Service                   | Audit Area                                   | Position            |
|---------------------------|--|---------------------|
| Council Led HSCP Services | Adults with Incapacity (Management of funds) | Final Report Issued |

### 2.2 2023/24 Audits

| Service                   | Audit Area                        | Position           |
|---------------------------|-----------------------------------|--------------------|
| Council Led HSCP Services | Social Care Financial Assessments | Review Scheduled   |
| Council Led HSCP Services | Care Management System            | Review In Progress |
| IJB                       | Compliant Handling                | Review In Progress |
| IJB                       | IJB Hosted Services               | Review Scheduled   |

### 2.3 Follow up of audit recommendations

Public Sector Internal Audit Standards require that Internal Audit report the results of its activities to the Committee and establishes a follow-up process to monitor and ensure that management actions have been effectively implemented.

As at 31 July 2023 (the baseline for our exercise), Seven audit recommendations were due and outstanding:

- Six rated as Moderate
- One rated as Minor

As part of the audit recommendations follow up exercise, five recommendations were closed:

- Four rated as Moderate
- One rated as Minor

For the remaining two<sup>1</sup>, these have been discussed with management and updates provided on the progress of their implementation.

Appendix 1 – Grading of Recommendations provides the definitions of each of the ratings used.

Appendix 2 – Audit Recommendations Follow Up – Outstanding Actions provides a detailed breakdown of the outstanding audit recommendations that will be taken forward and followed up as part of the next cycle.

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<sup>1</sup> This is the position with regards to recommendations that were due as at 31 July 2023. Recommendations falling due past this date and those made as part of subsequent Internal Audit Reports will be followed up as part of the standard follow up cycle and reported to Committee session on session.



### 3 Appendix 1 – Grading of Recommendations

| Risk level                   | Definition  |
|------------------------------|---|
| <b>Corporate</b>             | This issue / risk level impacts the Council as a whole. Mitigating actions should be taken at the Senior Leadership level.  |
| <b>Function</b>              | This issue / risk level has implications at the functional level and the potential to impact across a range of services. They could be mitigated through the redeployment of resources or a change of policy within a given function. |
| <b>Cluster</b>               | This issue / risk level impacts a particular Service or Cluster. Mitigating actions should be implemented by the responsible Chief Officer.   |
| <b>Programme and Project</b> | This issue / risk level impacts the programme or project that has been reviewed. Mitigating actions should be taken at the level of the programme or project concerned.   |

| Net risk rating | Description  | Assurance assessment |
|-----------------|--|----------------------|
| <b>Minor</b>    | A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.  | <b>Substantial</b>   |
| <b>Moderate</b> | There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified, which may put at risk the achievement of objectives in the area audited.                    | <b>Reasonable</b>    |
| <b>Major</b>    | Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.                       | <b>Limited</b>       |
| <b>Severe</b>   | Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited. | <b>Minimal</b>       |

| Individual issue / risk | Definitions  |
|-------------------------|--|
| <b>Minor</b>            | Although the element of internal control is satisfactory there is scope for improvement. Addressing this issue is considered desirable and should result in enhanced control or better value for money. Action should be taken within a 12 month period.   |
| <b>Moderate</b>         | An element of control is missing or only partial in nature. The existence of the weakness identified has an impact on the audited area's adequacy and effectiveness. Action should be taken within a six month period.   |
| <b>Major</b>            | The absence of, or failure to comply with, an appropriate internal control, such as those described in the Board's Scheme of Governance. This could result in, for example, a material financial loss, a breach of legislative requirements or reputational damage to the Board. Action should be taken within three months.   |
| <b>Severe</b>           | This is an issue / risk that is likely to significantly affect the achievement of one or many of the Board's objectives or could impact the effectiveness or efficiency of the Board's activities or processes. Examples include a material recurring breach of legislative requirements or actions that will likely result in a material financial loss or significant reputational damage to the Board. Action is considered imperative to ensure that the Board is not exposed to severe risks and should be taken immediately. |

## 4 Appendix 2 – Audit Recommendations Follow Up – Outstanding Actions

| Overall Report Area        | Report | Grading         | Recommendation  | Original Due Date | Current Due Date | Committee Update   | Status             |
|----------------------------|--------|-----------------|---|-------------------|------------------|--|--------------------|
| Transformational Programme | AC2211 | <b>Moderate</b> | 2.5.2 - Finance should liaise with budgets holders and apply MTFS savings as appropriate to H&SCP budgets.  | Apr-23            | Dec-23           | Work is ongoing with regards to monitoring and the application of the MTFF, including sessions with SLT to address the budget. All of these points will be addressed by the time of Q2 monitoring reporting. | <b>In progress</b> |
| Transformational Programme | AC2211 | <b>Moderate</b> | 2.6.13 - Where relevant, budget monitoring information should be regularly reported to groups responsible for Delivery Plan projects with sufficient detail to identify project budget underspends and pressures requiring corrective action. | Jun-23            | Dec-23           | Work is ongoing with regards to this recommendation and will be addressed by the time of Q2 monitoring reporting, and inline with other recommendations.   | <b>In progress</b> |



## RISK, AUDIT AND PERFORMANCE COMMITTEE

|   |  |
|---|--|
| <b>Date of Meeting</b>                  | 19/09/23   |
| <b>Report Title</b>                     | Internal Audit Report – Adults with Incapacity   |
| <b>Report Number</b>                    | HSCP23.066   |
| <b>Lead Officer</b>                     | Jamie Dale,<br>Chief Internal Auditor  |
| <b>Report Author Details</b>            | Name: Jamie Dale<br>Job Title: Chief Internal Auditor<br>Email Address:<br>jamie.dale@aberdeenshire.gov.uk |
| <b>Consultation Checklist Completed</b> | Yes  |
| <b>Directions Required</b>              | No   |
| <b>Appendices</b>                       | None   |

### 1. Purpose of the Report

- 1.1. The purpose of this report is to present the outcome from the planned audit of Adults with Incapacity that was included in the Internal Audit Plan.

### 2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee review, discuss and comment on the issues raised within this report.

### 3. Summary of Key Information

#### Assurance Assessment

- 3.1. Internal audit has identified an overall net risk rating of **MAJOR**, with **LIMITED** assurance obtained over this area.
- 3.2. Areas of controls are in development but have yet to be fully implemented. Efficiency is partly affected by ongoing development following the introduction of a new care management recording system – with specific



## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

service areas still identifying what needs to be recorded in the system. Procedures in respect of appointeeship, access to funds, financial guardianship and intervention are out of date and there is no evidence of review to ensure they are relevant and tried and tested for sufficiency. Reliance is largely placed on legislation and other high-level guidance, rather than locally relevant procedures and training. As a result, inconsistent practice was identified during the audit.

- 3.3. Records are not always accessible, and the lack of clarity over procedure results in inconsistent filing, recording, and annotation of records. Some records are not on file, including legal documentation, certification of incapacity, and intended use of funds. Where changes take place, records are not consistently being updated to reflect changes. System records are incomplete. This presents risks to service delivery, and to the need to keep accurate data in compliance with data protection legislation. Where records are in place these do not always demonstrate adherence to the minimum intervention principle set out in the Adults with Incapacity (Scotland) Act 2000.
- 3.4. Whilst there are controls over funds received into and distributed from a centralised corporate appointee account, these funds are regularly withdrawn in cash, and a number of weaknesses were identified including an absence of checks, authorisation controls, and evidenced segregation of duties. Following withdrawals there is limited evidence of management of service users' assets. Funds are generally managed by care workers, and their activities in respect of AWI finances are not subject to regular independent review. Supporting evidence in respect of client funds management is limited and is not being reviewed and investigated where there are potential irregularities; this includes an absence of clear plans for spending, and records of use of funds, and changes from confirmed benefit entitlements. Inventories are not routinely maintained or updated, and financial assets in excess of relevant thresholds are not considered for separate management (e.g. in interest bearing accounts).
- 3.5. The lack of control over this area means that there is substantial scope for fraud and error where funds and moveable property are being accessed and managed on others' behalf. Whilst no evidence of recent fraud or theft was identified in the audit, current controls may not prevent or identify it.



## RISK, AUDIT AND PERFORMANCE COMMITTEE

There are risks to vulnerable service users' funds, and to staff involved in the management of their funds, if appropriate procedures, checks, and balances are not in place and operating effectively.

- 3.6. Recommendations have been made to address the above risks, which Management has agreed to as part of a timebound action plan. This was discussed with Internal Audit and it considered to be proportionate in the wider context of ongoing work and recognising the need to consider flexibility and efficiency as well as control.

### Severe or Major Issues / Risks

- 3.7. Issues and risks identified are categorised according to their impact. The following are summaries of higher rated issues / risks that have been identified as part of this review:

| Ref | Severe or Major Issues / Risks   | Risk Agreed | Risk Rating |
|-----|--|-------------|-------------|
| 1.1 | <p><b>Written Procedures and Training</b> – Procedures, although out of date, are available to assist with aspects of the service. However, within the available procedures or signposted guidance there is insufficient detail in respect of practical application and management of arrangements for Adults with Incapacity, particularly in respect of Records and Funds Management. There was no practical documented guidance or training covering day to day management of funds or assets on behalf of service users.</p> <p>As a result, inconsistent practice was identified during the audit, as noted in the latter elements of this report. This presents risks including fraud, reputational risk and the cost of investigation and rework / corrections.</p>   | Y           | Major       |
| 1.2 | <p><b>Complete and Consistent Records</b> – Documentation to verify client classifications is essential to demonstrate that any interventions are appropriate and are being managed correctly. However, client documents are not held consistently or consolidated in an accessible location. There is no complete central record of all AWI service users, interventions, and activities. Varying records were held by Finance, The Financial Assessments team, Adult Mental Health Administration, Care Managers / Social workers, and Care Practitioners, each with different sets of service users recorded as in receipt of AWI support. Records varied between and within systems, reports, lists and shared hard drives. Classification of the type of intervention on the care management system also varied, and records were incomplete.</p> | Y           | Major       |



## RISK, AUDIT AND PERFORMANCE COMMITTEE

| Ref | Severe or Major Issues / Risks   | Risk Agreed | Risk Rating |
|-----|--|-------------|-------------|
|     | There is therefore a risk, particularly where there are changes in staffing, that important information will not be available when it is required. Inaccuracies in the data reduce the assurance the Service can obtain from system reports, that all adults with incapacity have appropriate interventions in place. The UK General Data Protection Regulation (GDPR) includes data accuracy as one of its seven key principles. There is a risk therefore of the Council breaching legislative requirements in this regard.  |             |             |
| 1.3 | <p><b>Minimum Intervention</b> – In contrast to Council and DWP guidance, and the ‘minimum intervention’ principle set out in the Adults with Incapacity (Scotland) Act 2000, corporate appointeeships are in place in cases where incapacity has not been specifically determined by a medical practitioner. This includes cases where clients had other bank accounts – indicating that other funds, and the means or capacity to manage them, are in place.</p> <p>There was no indication of review by another officer prior to submission and processing of requests to manage DWP benefits on service users’ behalf – limiting assurance that interventions have been appropriately assessed as necessary.</p>   | Y           | Major       |
| 1.4 | <p><b>Financial Controls</b> – Where financial interventions are appropriate and necessary, these need to be suitably controlled in order to satisfy local ACHSCP and national requirements, to protect vulnerable service users and their finances, and to protect staff responsible for their management. Whilst there are controls over funds in the corporate appointee account, weaknesses were identified including an absence of checks, authorisation controls and evidenced segregation of duties.</p> <p>Cash transactions present increased risk due to its portability, desirability, and the absence of an audit trail after it has been released. In the absence of appropriate controls, funds may be at increased risk of loss through fraud or error.</p> | Y           | Major       |
| 1.5 | <p><b>Funds Management Records</b> – Supporting evidence in respect of client funds management is poor. There are no records of routine review to identify any irregularities for further review. In the absence of detailed and verified records and independent checks there is a risk that funds will not be utilised as planned or may be subject to misuse – resulting in financial loss, or a perception that this may be the case – resulting in reputational damage.</p>   | Y           | Major       |

### Management Response

- 3.8. The Services welcome the improvements identified by the Internal Audit team. It recognises and acknowledges that there is a requirement to



## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

strengthen and streamline the exiting processes to ensure consistency and good practice across the service and to mitigate risk. Although there is a need to update processes and procedures, it is noted that controls in place ensured no material financial loss was identified. Furthermore, all service objectives were met in relation to service delivery which puts support for people at the centre. The services have implemented a short life working group including representatives from across adult services to take forward a comprehensive action plan. Sub-groups will be tasked with addressing the recommendations from each section. The short life working group will continually review the action plan to ensure the balance of appropriate controls are in place whilst allowing flexibility in the processes which meets the varied needs of service users. This is vital in enabling choice and control by service users as outlined in the Health & Social Care Standards and that service users are not negatively impacted. Updates to guidance and training are also in progress and will be further reviewed prior to implementation to ensure areas of improvement highlighted in the audit report are addressed. All timescales identified below for completion of the actions take are considered to be proportionate with regard to the level of risk. This work will be overseen by the Process Owner.

### **4. Implications for IJB**

- 4.1. **Equalities** – An equality impact assessment is not required because the reason for this report is for the Risk, Audit and Performance Committee to discuss, review and comment on the contents of an Internal Audit report and there will be no differential impact, as a result of this report, on people with protected characteristics.
- 4.2. **Fairer Scotland Duty** – There are no direct implications arising from this report.
- 4.3. **Financial** – There are no direct implications arising from this report.
- 4.4. **Workforce** – There are no direct implications arising from this report.
- 4.5. **Legal** – There are no direct implications arising from this report.
- 4.6. **Other** – NA

### **5. Links to ACHSCP Strategic Plan**





## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

5.1. Ensuring effective performance reporting and use of Key Performance Indicators will help the IJB deliver on all strategic priorities as identified in its strategic plan.

### **6. Management of Risk**

6.1. **Identified risks(s):** The Internal Audit process considers risks involved in the areas subject to review. Any risk implications identified through the Internal Audit process are as detailed in the resultant report.

6.2. **Link to risks on strategic risk register:** There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and projects an overspend.

6.3. **How might the content of this report impact or mitigate these risks:** Where risks have been identified during the Internal Audit process, recommendations have been made to management to mitigate these risks.





## RISK, AUDIT AND PERFORMANCE COMMITTEE

|   |   |
|---|---|
| <b>Date of Meeting</b>                  | 19 September 2023   |
| <b>Report Title</b>                     | Quarter 1 (2023/24) Financial Monitoring Update – period ended 30 June 2023   |
| <b>Report Number</b>                    | HSCP23.063  |
| <b>Lead Officer</b>                     | Paul Mitchell, Chief Finance Officer  |
| <b>Report Author Details</b>            | Paul Mitchell, Chief Finance Officer<br>PauMitchell@aberdeencity.gov.uk   |
| <b>Consultation Checklist Completed</b> | Yes   |
| <b>Appendices</b>                       | Appendix A -Finance Update as at end June 2023<br><br>Appendix B - Variance Analysis<br><br>Appendix C - Progress in implementation of agreed savings – June 2023<br><br>Appendix D - Budget Reconciliation<br><br>Appendix E - Budget Virements<br><br>Appendix F - Summary of risks and mitigating action |



## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

### **1. Purpose of the Report**

- a) To summarise the revenue budget performance to 30 June 2023 for the services within the remit of the Integration Joint Board (IJB), to advise on any areas of risk and management mitigating action and to approve the budget virements so that budgets more closely align to anticipated income and expenditure.

### **2. Recommendations**

#### **2.1.** It is recommended that the Risk, Audit and Performance Committee:

- a) Note this report in relation to the IJB budget and the information on areas of risk and management action that are contained herein.
- b) Approve the budget virements indicated in Appendix E

### **3. Summary of Key Information**

#### **Background**

- 3.1. During the budget setting process for the financial year 2023/24, significant pressures and savings were highlighted and agreed. These are accounted for in the full year revised budget column per Appendix A.

#### **Aberdeen City IJB Financial Information**

- 3.2. To maintain a consistent approach with the financial position reported in previous financial years, a prudent methodology continues to be taken in respect of forecasting. The financial position of the IJB as at 30 June 2023 is as follows:



## RISK, AUDIT AND PERFORMANCE COMMITTEE

|   | <b>As at<br/>30 June 2023</b> |
|---|-------------------------------|
|   | <b>£'000</b>                  |
| <b>Overspend\(\Underspend)<br/>as at (Appendices A and B)</b> | <b>(11)</b>                   |
| <b>Represented by:</b>  |                               |
| Overspend\(\Underspend) on Mainstream<br>Budgets (Appendix B) | <b>(11)</b>                   |

- 3.3. The mainstream position is showing a slight underspend on the budget and information on the individual variances to date are contained in Appendix B.
- 3.4. Prescribing received a significant budget uplift this financial year, unfortunately, this does not appear to have been sufficient. Pressures are being reported across Grampian and nationally.
- 3.5. The current budget position across Grampian is to be the focus of the Primary Care Prescribing Group on 14 November 2023.
- 3.6. All Budget Holders have regular review meetings with dedicated finance staff to ensure that service delivery remains within the agreed budgets. All forecast variations are reported on the quarterly monitoring statements, with the Senior Leadership Team receiving regular monthly financial updates to continually monitor the overall forecast position.
- 3.7. During the budget setting process, funding is allocated to budget lines based on current information. Throughout the year, actual expenditure can be incurred on a different basis and this may necessitate the requirement to realign the budgets. Additionally, funding may also be received from the Scottish Government that would increase our ability to spend, the mechanism to reallocate and realign the figures is by way of budget virements. Further information on the virement process is contained within paragraph 3.4 and Appendix 1 of the [JB Financial Regulations](#). Appendix E of this report lists the virements required in the first quarter and these balance to zero.



## RISK, AUDIT AND PERFORMANCE COMMITTEE

### 4. Implications for IJB

4.1. Every organisation must manage the risks inherent in the operation of large and complex budgets. These risks are minimised by the regular review of financial information by budget holders and corporately by the Board and the Risk Audit & Performance Committee. This report is part of that framework and has been produced to provide an overview of the current financial operating position.

Key underlying assumptions and risks are set out within the Appendices to this report.

4.2. **Equalities, Fairer Scotland and Health Inequality** – there are no implications arising from this report.

4.3. **Financial** – the financial implications are contained throughout the report.

4.4. **Workforce** – there are no workforce implications arising from this report.

4.5. **Legal** – there are no legal implications arising from this report.

4.6. **Other** – there are no other implications arising from this report

### 5. Links to ACHSCP Strategic Plan

5.1. A balanced budget and the medium financial strategy are a key component of delivery of the strategic plan and the ambitions included in this document.

### 6. Management of Risk

#### 6.1. Identified risk(s)

See directly below.

#### 6.2. Link to risks on strategic or operational risk register: Strategic Risk #2

There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and project an overspend.



## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

### **6.3. How might the content of this report impact or mitigate these risks:**

Good quality financial monitoring will help budget holders manage their budgets. By having timely and reliable budget monitoring any issues are identified quickly, allowing mitigating actions to be implemented where possible.

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Appendix A: Finance Update as at end June 2023

| Period 3   | Full Year      | Period        | Period        | Period       | Variance      | Forecast       | Full Year   | App B |
|--|----------------|---------------|---------------|--------------|---------------|----------------|-------------|-------|
|  | Revised Budget | Budget        | Actual        | Variance     | Percent       |                | Variance    |       |
|  | £'000          | £'000         | £'000         | £'000        | %             | £'000          | £'000       |       |
| Mainstream:                                      |                |               |               |              |               |                |             |       |
| Community Health Services                        | 42,310         | 10,672        | 10,845        | 173          | 1.6%          | 42,902         | 592         | a     |
| Aberdeen City share of Hosted Services (health)  | 30,781         | 7,877         | 7,474         | (403)        | (5.1)%        | 29,194         | (1,587)     | b     |
| Learning Disabilities                            | 41,050         | 10,277        | 9,685         | (592)        | (5.8)%        | 40,377         | (673)       | c     |
| Mental Health and Addictions                     | 26,250         | 6,642         | 6,633         | (9)          | (0.1)%        | 26,226         | (24)        | d     |
| Older People & Physical and Sensory Disabilities | 100,494        | 25,123        | 24,762        | (361)        | (1.4)%        | 98,752         | (1,742)     | e     |
| Directorate                                      | 2,076          | 519           | 519           | 0            | -             | 2,076          | 0           |       |
| Criminal Justice                                 | 167            | 42            | 42            | 0            | -             | 167            | 0           |       |
| Housing  | 1,748          | 437           | 437           | 0            | -             | 1,748          | 0           |       |
| Primary Care Prescribing                         | 44,003         | 10,743        | 11,666        | 923          | 8.6%          | 47,666         | 3,663       | f     |
| Primary Care                                     | 43,699         | 11,011        | 10,901        | (110)        | (1.0)%        | 42,606         | (1,093)     | g     |
| Out of Area Treatments                           | 1,750          | 437           | 676           | 239          | 54.7%         | 2,603          | 853         | h     |
| Set Aside Budget                                 | 52,719         | 13,180        | 13,180        | 0            | -             | 52,719         | 0           |       |
| City Vaccinations                                | 2,747          | 712           | 712           | 0            | -             | 2,747          | 0           |       |
| Transforming Health and Wellbeing                | 3,250          | 826           | 826           | 0            | -             | 3,250          | 0           |       |
| Uplift Funding                                   | 0              | 0             | 0             | 0            | -             | 0              | 0           |       |
|  | <b>393,044</b> | <b>98,498</b> | <b>98,358</b> | <b>(140)</b> | <b>(0.1)%</b> | <b>393,033</b> | <b>(11)</b> |       |
| Funds:   |                |               |               |              |               |                |             |       |
| Integration and Change                           | 85             | 86            | 86            | 0            | -             | 85             | 0           |       |
| Winter Funding                                   | 2,102          | 539           | 539           | 0            | -             | 2,102          | 0           |       |
| Primary Care Improvement Fund                    | 793            | 255           | 255           | 0            | -             | 793            | 0           | i     |
| Action 15 Mental Health                          | 12             | 12            | 12            | 0            | -             | 12             | 0           |       |
| Alcohol Drugs Partnership                        | 6              | 6             | 6             | 0            | -             | 6              | 0           |       |
|  | <b>2,998</b>   | <b>898</b>    | <b>898</b>    | <b>0</b>     | <b>-</b>      | <b>2,998</b>   | <b>0</b>    |       |
|  | <b>396,042</b> | <b>99,396</b> | <b>99,256</b> | <b>(140)</b> | <b>(0.1)%</b> | <b>396,031</b> | <b>(11)</b> |       |

**Appendix B: An analysis of the variances on the mainstream budget is detailed below:**

**a Community Health Services (Forecast Position - £592,000 overspend)**

Major Variances:

(72,000) Across non-pay budgets  
47,000 Under recovery on income  
617,000 Staff Costs

Staffing costs projected overspend due to unfunded savings target offset by underspends in AHPs and Nursing. This is augmented by an under recovery on income.  
Underspend in Non pay is largely due to Property costs and Equipment costs.  
All savings targets are now realigned to one budget code within community health.

**b Hosted Services (Forecast Position £1,587,000 underspend)**

The Hosted Services position is now reporting an underspend due to the allocation of cost pressure funding from the Integrated Joint Board and an ongoing service redesign.

**Intermediate Care:** Has an overspend position in city despite an allocation of additional funding. The Grampian Wide service has an overspend position due to locum costs, agency nursing costs and an overspend in medical supplies mainly in rehab.

**Grampian Medical Emergency Department (GMED):** Currently underspent as was allocated additional IJB funding. Relates mainly to pay costs and the move to provide a safer more reliable service which has been a greater uptake of shifts across the service. Non-pay overspend due to repair costs not covered by insurance, increased costs on software and hardware support costs, increased usage of medical surgical supplies and an increase in drug costs.

**Hosted services** are led by one IJB, however, the costs are split according to the projected usage of the service across the three IJBs. Decisions required to bring any budget back into balance may need to be discussed with the three IJBs, due to the impact on service delivery.

**c Learning Disabilities (Forecast Position - £673,000 underspend)**

**Council:** £727,000 underspent on staffing due to staff vacancies and £251,000 underspend on other costs.

**NHS:** This is partially offset by a pressure of £305,000 arising due to a high dependency patient that is not funded.

**d Mental Health & Addictions (Forecast Position - £24,000 underspend)**

**Council:** £90,000 underspent due to staffing vacancies.

**NHS:** £66,000 over due to various small overspends across the service.

**e Older People & Physical and Sensory Disabilities (Position £1,742,000 underspend)**

£915,000 underspent on staffing, £585,000 underspend on supplies & services and £242,000 of other various small underspends across the service, including additional client income received.



**Appendix B: An analysis of the variances on the mainstream budget is detailed below:**

**f Primary Care Prescribing (Forecast Position – £3,662,000 overspent)**

The year end position for 22/23 included an under accrual of £570k which impacts on position for 23/24. (March 2023 was the greatest monthly spend recorded for Prescribing in NHSG)

For April the number of items prescribed continues to increase and is 4.59% greater than April 22. (The number of items for NHSG may now exceed 10.5 Million in 23/24) This, coupled with a continuance of average item price increase to current April level of £11.53/item.

For comparison, the average item price in April 22 after Tariff reduction was £10.62.

The position for May and June assumes this price will continue and that volume pattern will be sustained.

The current prescribing position will need to be discussed at Primary Care Prescribing Group to consider any further mitigation measures.

The above noted does not include impact of 23/24 Tariff price increase of £20m across Scotland outlined in PCA(P)(2023) 23 to be implemented from May 23 where funding has still to be confirmed.

**g Primary Care Services (Forecast Position - £1,093,000 underspend)**

The GP contract uplift for 2023/24 has yet to be concluded and a breakeven position has been assumed for Global Sum to date.

The existing cost pressure on enhanced services has reduced following resumption of normal processes for recording and claiming as actual claims are reduced.

The estimated premises position remains favourable but with reduced underspends following budget realignment in 23/24 within City and Shire.

Board Administered funds have a reduced underspend to M3 reflecting the pattern of current expenditure including revised seniority payments which are reduced alongside sickness and maternity claims received.

**h Out of Area Treatments (Forecast Position - £853,000 overspend)**

The number of placements remain high and with the pressure on salary costs and the rates requested by the suppliers, this budget is under considerable pressure.

Client placements are under constant review to try and find a similar level of care within Aberdeen City at a reduced cost to the Service.

**i Funds (Forecast Position - balanced)**

Income will match expenditure at the end of the financial year.

**Appendix C: Progress in implementation of savings – June 2023**

| <b>Programme for Transformation:</b>             | <b>Agreed Target £'000</b> | <b>Status</b>  | <b>Forecast £'000</b> |
|--|----------------------------|--|-----------------------|
| Reshaping our approach to commissioning services | (2,434)                    | Description - A review of all supplier contracts will take place, with a view to reducing the costs where appropriate.<br><br>Status - With the increased level of pay awards, cost of living increases and ongoing inflationary pressures faced by our providers, the full saving is challenging, but the service is confident that this will be made   | (2,434)               |
| Primary Care                                     | (650)                      | Description - Regular yearly savings that were not previously budgeted for were taken this year as permanent savings.<br><br>Status - These savings are already being made.  | (650)                 |
| Out of Area Placements                           | (600)                      | Description - To bring clients back with Aberdeen City with a similar level of care for a reduced cost to the Service.<br><br>Status - The budget is regularly reviewed and although no savings have made to date, it is hope that savings will materialise prior to the year-end  | 0                     |
| Prescribing                                      | (1,350)                    | Description - To seek alternatives to medicines (social prescribing), ensuring our prescribing processes and management of patients using medicines is as efficient as it can be and also stopping the prescription of drugs where there is evidence of little clinical value<br><br>Status - The budget is regularly reviewed and greater focus has been placed on the Primary Care Prescribing Group to materialise savings. | 0                     |
| Vacancy management                               | (1,000)                    | Description - With the natural delay in replacing staff, savings have been historically made on vacancy turnover.<br><br>Status - As in previous years, regular movement of staff will continue and this saving is expected to materialise.  | (1,000)               |
| Increased Income                                 | (1,000)                    | Description - A back-log in financial assessments has resulted in the IJB failing to maximise their income.<br><br>Status - Two additional Finance Assistants are to be employed on a fixed term basis to review all financial assessments and clear the back-log. This will ensure that all clients are paying the correct contribution to their care   | (1,000)               |
| Cost recovery from Partners                      | (888)                      | Description - To recharge other IJBs for staffing that is paid by Aberdeen City which do work across Grampian.<br><br>Status - Regular quarterly recharges have been agreed  | (888)                 |
| Whole system and connected remobilisation        | (1,501)                    | Description - undertake a strategic review of the data, demographic and demand picture to understand the "bed base" for unscheduled care.<br><br>Status - The budget is regularly reviewed and the saving is expected to materialise.  | (1,501)               |
|  | <b>(9,423)</b>             |  | <b>(7,473)</b>        |

**Appendix D: Budget Reconciliation**

|  | <b>NHSG</b><br>£   | <b>ACC</b><br>£    | <b>IJB</b><br>£    |
|--|--------------------|--------------------|--------------------|
| ACC per full council:                    | 0                  | 122,528,677        |                    |
| NHS per letter from Director of Finance: | 255,435,656        |                    |                    |
| Budget NHS per letter                    |                    | 0                  |                    |
|  | <hr/>              |                    |                    |
|  | 255,435,656        | 122,528,677        |                    |
| Reserves Drawdown                        |                    |                    |                    |
| Quarter 1                                | 18,079,037         |                    |                    |
| Quarter 2                                |                    |                    |                    |
| Quarter 3                                |                    |                    |                    |
| Quarter 4                                |                    |                    |                    |
|  | <hr/>              |                    |                    |
|  | <b>273,514,694</b> | <b>122,528,677</b> | <b>396,043,370</b> |
|  | <hr/>              |                    |                    |

## Appendix E: Budget Virements (balancing)

| <b>Health 1 - 3</b>    |                              | £           |
|------------------------|------------------------------|-------------|
| HCH REALIGNMENT        | City H&SCP Core              | 191,092     |
| HCH REALIGNMENT        | City Primary Care            | (191,092)   |
| CITY PAY AWARD HSCP    | Uplift Adjustments           | (5,766,986) |
| CITY PAY AWARD HSCP    | City H&SCP Core              | 4,350,408   |
| CITY PAY AWARD HSCP    | Strategy and Transformation  | 169,166     |
| CITY PAY AWARD HSCP    | City Learning Disabilities   | 156,969     |
| CITY PAY AWARD HSCP    | City Community Mental Health | 1,090,443   |
| HCSW REGRADE           | Uplift Adjustments           | (115,241)   |
| HCSW REGRADE           | City H&SCP Core              | 53,129      |
| HCSW REGRADE           | City Prior Year              | 6,844       |
| HCSW REGRADE           | City Learning Disabilities   | 698         |
| HCSW REGRADE           | City Community Mental Health | 5,155       |
| HCSW REGRADE           | Ring Fenced Funding          | 49,414      |
| <b>Total Virements</b> |                              | <b>(0)</b>  |

| <b>Social Care 1-3</b>                      |                                      | £            |
|---|--------------------------------------|--------------|
| Clear S57136 Budget and Clear S60212 Budget | Strategy & Transformation            | -            |
| Remove Original Ijb Budget Allocation 23/24 | Directorate                          | (12,887,499) |
| Remove Original Ijb Budget Allocation 23/24 | Learning Disabilities                | (36,833,190) |
| Remove Original Ijb Budget Allocation 23/24 | Mental Health/Substance Misuse       | (12,357,456) |
| Remove Original Ijb Budget Allocation 23/24 | Older People and Physical Disability | (99,008,377) |
| Remove Original Ijb Budget Allocation 23/24 | Strategy & Transformation            | (1,441,231)  |
| Remove Original Ijb Budget Allocation 23/24 | Transformation Projects              | (904,283)    |
| Remove Original Ijb Budget Allocation 23/24 | Resource Transfer                    | 42,804,382   |
| Remove Original Ijb Budget Allocation 23/24 | Criminal Justice                     | (153,213)    |
| Revised Ijb Budget Allocation V1 23/24      | Directorate                          | 2,076,288    |
| Revised Ijb Budget Allocation V1 23/24      | Learning Disabilities                | 39,575,580   |
| Revised Ijb Budget Allocation V1 23/24      | Mental Health/Substance Misuse       | 13,104,220   |
| Revised Ijb Budget Allocation V1 23/24      | Older People and Physical Disability | 100,358,917  |
| Revised Ijb Budget Allocation V1 23/24      | Strategy & Transformation            | 1,631,736    |
| Revised Ijb Budget Allocation V1 23/24      | Transformation Projects              | 205,313      |
| Revised Ijb Budget Allocation V1 23/24      | Resource Transfer                    | (36,338,612) |
| Revised Ijb Budget Allocation V1 23/24      | Criminal Justice                     | 167,425      |
| <b>Total Virements</b>                      |                                      | <b>0</b>     |

**Appendix F: Summary of risks and mitigating action**

|  | <b>Risks</b>   | <b>Mitigating Actions</b>   |
|--|--|---|
| <b>Community Health Services</b>                       | The current financial position is dependent on vacancy levels.   | Monitor levels of staffing in post compared to full budget establishment.<br>A vacancy management process has been created which will highlight recurring staffing issues to senior staff.  |
| <b>Hosted Services</b>                                 | There is the potential of increased activity in the activity-led Forensic Service.<br><br>There is the risk of high levels of use of expensive locums for intermediate care, which can put pressure on hosted service budgets.   | Work is being undertaken at a senior level to consider future service provision and how the costs of this can be minimised.<br><br>The movement of staff from elsewhere in the organisation may help to reduce locum services.  |
| <b>Learning Disabilities</b>                           | There is a risk of fluctuations in the learning disabilities budget because of:<br>Staff vacancy levels<br>Expensive support packages<br>Increase in provider rates  | Monitor levels of staffing in post compared to full budget establishment.<br>Review packages to consider whether they are still meeting the needs of the clients.<br>All learning disability packages are going for peer review at the fortnightly resource allocation panel.   |
| <b>Mental Health and Addictions</b>                    | Increase in activity in needs led service.<br><br>Potential complex needs packages being discharged from hospital.<br>Increase in consultant vacancies resulting in inability to recruit which would increase the locum usage. Average consultant costs £12,000 per month average locum £30,000 per month. | Work has been undertaken to review levels through using D365.<br>Review potential delayed discharge complex needs and develop tailored services.<br>A group has been established in the city to look at supplementary staffing on a regular basis.  |
| <b>Older people services incl. physical disability</b> | There is a risk that staffing levels change which would have an impact on the current financial position.<br><br>There is the risk of an increase in activity in needs led service, which would also impact the financial position.  | Monitor levels of staffing in post compared to full budget establishment.<br><br>Regular review packages to consider whether they are still meeting the needs of the clients.   |
| <b>Prescribing</b>                                     | There is a risk of increased prescribing costs as this budget is impacted by volume and price factors, such as the increase in drug prices due to short supply. As both of which are forecast on basis of available date and evidence at start of each year by the Grampian Medicines Management Group     | Monitoring of price and volume variances from forecast.<br>Review of prescribing patterns across General Practices and follow up on outliers.<br>Implementation of support tools – Scriptswitch, Scottish Therapeutic Utility.<br><br>Poly pharmacy and repeat prescription reviews to reduce wastage and monitor patient outcomes.<br><br>The drug budget position across Grampian is a core item on the agenda for the Primary Care Prescribing Group meeting on 20th September 2023. |
| <b>Out of Area Treatments</b>                          | There is a risk of an increase in number of Aberdeen City patients requiring complex care from providers located out with the Grampian Area, which would impact this budget.   | Groups to be re-established reviewing placements and considering if these patients can be cared for in a community setting.   |

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## RISK, AUDIT AND PERFORMANCE COMMITTEE

|   |   |
|---|---|
| <b>Date of Meeting</b>                  | 19 September 2023   |
| <b>Report Title</b>                     | Locality Planning Annual Reports  |
| <b>Report Number</b>                    | HSCP23.060  |
| <b>Lead Officer</b>                     | Alison Macleod, Strategy and Transformation Lead, ACHSCP<br><br>Michelle Crombie, Community Planning Manager, Aberdeen City Council   |
| <b>Report Author Details</b>            | Name: Iain Robertson<br>Job Title: Transformation Programme Manager, Communities, ACHSCP<br>Email Address:<br><a href="mailto:iairobertson@aberdeencity.gov.uk">iairobertson@aberdeencity.gov.uk</a><br><br>Jade Leyden, Community Development Manager, Aberdeen City Council<br><a href="mailto:jleyden@aberdeencity.gov.uk">jleyden@aberdeencity.gov.uk</a> |
| <b>Consultation Checklist Completed</b> | Yes   |
| <b>Directions Required</b>              | No  |
| <b>Exempt</b>                           | No  |
| <b>Appendices</b>                       | <ol style="list-style-type: none"> <li>1. Central Locality Plan Annual Report</li> <li>2. North Locality Plan Annual Report</li> <li>3. South Locality Plan Annual Report</li> </ol>  |
| <b>Terms of Reference</b>               | <p><b>Risk, Audit and Performance Committee</b></p> <p>5. Receive and scrutinise performance reports and receive assurance that actions in respect of emerging trends are proportionate to the IJB's Risk Appetite Statement.</p>   |



## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

### **1. Purpose of the Report**

- 1.1 To present the locality plan annual reports 2022-23 for approval.
- 1.2 The Aberdeen City Health and Social Care Partnership (ACHSCP) has a statutory duty under the Public Bodies (Joint Working) Scotland Act 2014 to deliver a locality planning system. The Partnership has three locality areas in Central, North and South of the city. These localities are aligned with Community Planning Aberdeen's locality areas to better enable joint planning, delivery, and reporting.

### **2. Recommendations**

- 2.1. It is recommended that Committee:
  - a. Approve the 2022-23 annual reports attached as **Appendices 1,2 and 3**;
  - b. Instruct the Lead Officer to submit the 2023-24 Locality Planning Annual Reports to this Committee in September 2024;
  - c. Note that new Locality Plans would be prepared during the refresh of the Local Outcome Improvement Plan during 2023-24 in a collaborative way with our Locality Empowerment Groups (LEGs) and Priority Neighbourhood Partnerships (PNPs); and
  - d. Note the Committee would continue to receive regular updates on locality planning through its regular Performance Report.

### **3. Strategic Plan Context**

- 3.1. ACHSCP has a commitment within the Strategic Plan under the Caring Together strategic aim to support community empowerment, deliver Locality Plans and report on progress.

### **4. Summary of Key Information**

- 4.1 Since 2021, Aberdeen City Council and Aberdeen City Health and Social Care Partnership have been working together to facilitate and deliver an integrated locality planning model on behalf of Community Planning Aberdeen. The approach ensures that Community Planning partners are meeting their locality planning duties in respect of both the Public Bodies (Joint Working) (Scotland) Act 2014 and the Community Empowerment





## RISK, AUDIT AND PERFORMANCE COMMITTEE

(Scotland) Act 2015. At the same time, this joint working enables more efficient and effective working between partner staff and communities to secure better outcomes for the economy, people and place. Integrated locality planning is an innovative approach in Scotland.

- 4.2 In July 2021, Community Planning Aberdeen published Locality Plans for the North, South and Central [Localities of the City](#). This approach sees every neighbourhood in Aberdeen covered by a Locality Plan. The plans incorporate improvement activity for the whole locality and/or targeted neighbourhoods, in most cases priority neighbourhoods. Priority neighbourhoods are those areas within the North, South and Central localities which experience poorer outcomes as a result of their socio-economic status, as identified by SIMD data. These include: for the North, **Heathryfold, Middlefield, Northfield, Cummings Park and Mastrick**; for South, **Torry and Kincorth**; and for Central, **Tillydrone, Seaton, Woodside, Ashgrove, Stockethill and George Street**.
- 4.3 This report presents the draft annual reports against the locality plans for 2022-23, this is the first year since the Covid-19 pandemic was declared in March 2020 where social distancing regulations have been fully lifted and large scale community engagement events have taken place. The successful delivery and high attendance of community members and partners at the Community Gathering on 13 May 2023 and the Granite City Gathering on 24 June 2023 is evidence that there is an appetite from all community stakeholders to reengage with each other providing ACHSCP with new opportunities for widespread community engagement.

### NORTH, SOUTH AND CENTRAL KEY HIGHLIGHTS 2022-23

- 4.4 The three Locality Planning Annual Reports 2022-23 attached as **Appendices 1-3** provide IJB and members of the public with an overview of progress made in the last 12 months to address priority issues, some highlights from each plan are set out against the Economy, People, and Place themes below:

#### Central Locality

- 4.4.1 **Economy** – Community Planning partners have made progress with a number of initiatives to help remove financial inclusion barriers which impact some of the most vulnerable people in Aberdeen City. For example, the online benefit calculator was launched in 2022 to help support more people to find out what benefits they are entitled to. This has been



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accessed 7274 times across the city during 2022-23, with 887 of those being from Central priority neighbourhoods.

- 4.4.2 **People** – Of the 68 Health Improvement Fund (HIF) projects in 2022-23, 33 HIF projects were either from bidders based in the Central Locality or aimed to support health improvement activities within Central Locality.
- 4.4.3 In 2022-23, 431 unpaid carers accessed the Quarriers Adult Carer Support Service in the Central Locality, an increase of 38.1% on the 312 unpaid carers who accessed the service during 2021-22.
- 4.4.4 In 2022, the rate of drug related hospital stays for the Central Locality was 249.6 people per 100,000 of the population, this was a slight increase on 2021's data, where the rate stood at 244.3 admissions. Central Locality was the only locality in Aberdeen City where drug related hospital stays increased between 2021-22. Central Locality continues to have the highest rate of drug related hospital stays across Aberdeen City.
- 4.4.5 **Place** – 16 new community green spaces were established in Central Locality by June 2022. 66.5% of Central Locality respondents to the City Voice survey reported being satisfied or fairly satisfied with the overall quality of green/open spaces. 70.2% of respondents from the Central priority neighbourhoods reported being satisfied or fairly satisfied with the overall quality of green/open spaces.
- 4.4.6 16.8% of Central Locality residents regularly cycle compared to 14.8% of citywide respondents. People in the Central Locality are most likely to cycle regularly in Aberdeen City.
- 4.5 **North Locality**
- 4.5.1 **Economy** - The complex landscape around child age benefits can sometimes make it difficult for families to access benefits they are entitled to. To address this, a families booklet was developed to increase awareness and uptake of these benefits such as Education Maintenance Allowance and School Clothing Grants. The booklet targeted families and provided guidance on how to claim. Across the City, 2749 families benefited financially by accessing additional benefits with 792 families in North Locality seeing an increase to their benefits.



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- 4.5.2 CFine has 928 members of the North Locality shopping at the pantry at Poynerook Rd who attend on a regular basis. The mobile food pantry also had 106 visits from residents of the North Locality during 2022-23.
- 4.5.3 92.6% of school leavers from North Locality achieved a positive destination in 2021-22, this is lower than the 96.2% of school leavers in 2020-21, and lower than the Aberdeen City average of 93.8%.
- 4.5.4 **People** - All schools in North Locality offer counselling and 100% of schools have signed up to the [Safer Scotland app](#). The app launched in 2022, is promoted widely in school newsletters and is accessible to all parents and carers. Initial feedback from parents and carers has been positive.
- 4.5.5 The Saltire Awards are the Scottish Government's way of celebrating, recognising and rewarding the commitment, contribution and achievements of volunteers aged 12-25 in Scotland. Of the 2459 Aberdeen Saltire Award recipients between December 2021- March 2023, 1155 young people were from North Locality. This is the highest number by locality area in Aberdeen City.
- 4.5.6 **Place** – Bridge of Don and Danestone were identified as areas at increased risk of flooding in Aberdeen City. This was based on historic incident data and SEPA flood modelling. Through the community led resilience project led by Aberdeen City Council and Scottish Fire and Rescue Service. A pilot community resilience group in Bridge of Don was established which is made up of several local organisations, including Kings Church, Local Men's Shed, and the rotary club. The group are currently being supported to develop a community resilience plan.
- 4.6 **South Locality**
- 4.6.1 **Economy** - Supporting people into employment is a major priority for South Locality. During 2022-23, a range of employability support events targeted at people who face barriers and challenges were held, such as dedicated sessions for people over 50 years of age, people with a disability, and people living in the Torry priority neighbourhood.
- 4.6.2 As well as providing warm spaces, the Partnership have been raising awareness of the support available to households at a number of community events and training frontline staff. This promotion activity, coupled with an increase in home visits to deliver insulation and energy efficiency measures has led to South Locality households making £32,725.77 in fuel bill savings last year.



## RISK, AUDIT AND PERFORMANCE COMMITTEE

- 4.6.3 According to the City Voice Survey carried out in 2022, 28.3% of people in the South Locality worried they would not be able to heat their home compared to 55.6% of people living in Torry and Kincorth.
- 4.6.4 **People** - Over 45,000 people were involved with, or benefitted from 36 funded initiatives within the Fairer Aberdeen Fund. 739 volunteers contributed 114,280 hours of volunteering with a value of over £2 million. 21 of the 36 Fairer Aberdeen Fund projects benefitted South Locality.
- 4.6.5 Alcohol related mortality rates in South Locality have been improving since 2019, with a rate of 13.91 per 100,000 recorded in 2021, compared to 17.31 in 2018. South Locality now has the lowest alcohol related mortality rate across Aberdeen City.
- 4.6.6 **Place** – Community Learning and Development's (CLD's) Family Learning Team have been committed to using the city's outdoor resources to benefit disadvantaged families. Within South Locality, CLD have organised multiple activities including Wellbeing walks, Holidays of Play and exploring the impact of climate change in Cullen. CLD's Family Learning Team has supported approximately 46 families in the South Locality to access outdoor learning opportunities as well as others who attended residential throughout the year.
- 4.7 Locality Empowerment Groups (LEGs) restarted on 27 April 2023, having not met since early 2022. Meetings are now held on a two monthly cycle and alternate between virtual meetings and in person meetings at a community venue. LEGs are facilitated by the Locality Planning Team and agenda items are driven by LEG members. Meetings provide an opportunity for LEG members to influence and shape LOIP project design, delivery, and evaluation and hold Community Planning Partners to account on delivery of priorities within their respective Locality Plans. LEGs also provide the Locality Planning Team and Outcome Improvement Group project managers an opportunity to involve community members in their projects to strengthen representativeness, robustness, and support for projects within communities.

### NEXT STEPS

- 4.8 The Locality Planning Team will continue planning for the refresh of the Local Outcome Improvement Plan (LOIP) and three Locality Plans expected to be completed by April 2024.



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- 4.9 The Locality Planning Team will ensure locality planning and community empowerment are effectively embedded into ACHSCP's new Strategic Plan which will be developed during 2024 ensuring Locality Empowerment Group (LEG) and Priority Neighbourhood Partnership (PNP) members can contribute towards evaluation, planning, and delivery of projects, with an increased focus on co-production and co-delivery.
- 4.10 Engagement between Community Planning, third sector, and community partners will continue. [Stretch Outcome 16](#) projects aim to connect, support, build capacity, and promote community activity within localities.
- 4.11 Progress reporting on locality planning will continue on a monthly basis through ACHSCP's Strategic Planning Group and through the Stretch Outcome 16.4 project group which reports to the CPA Management Group and Community Empowerment Group.

### **5. Implications for IJB**

#### **5.1. Equalities, Fairer Scotland and Health Inequality**

This report will have a positive impact on people with protected characteristics as defined in the Equality Act (2010), and those affected by socio-economic disadvantage. The Locality Empowerment Groups and Priority Neighbourhood Partnerships (PNPs) provide an opportunity for those with protected characteristics to participate in the locality planning process and have their voice and views taken into account. Locality Planning team leads also co-project manage the Stretch Outcome 16.4 project group on community participation which aims to increase the number and diversity of Locality Empowerment Group members. This project group will deliver a citywide locality planning workshop session later in 2023 to recruit new members and design an induction programme to sustain membership. A Proportionality and Relevance Health Impact Assessment has been prepared for this report.

#### **5.2. Financial**

There are no direct financial implications arising from the recommendations of this report.

Integration of locality planning between Aberdeen City Council and ACHSCP, along with the creation of an integrated Locality Planning Team in February 2023 has enabled the ACHSCP Public Health Team and Community Learning and Development to share workload and resources which has cut



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down on duplication of effort, led to a more efficient delivery of locality planning, and freed up officer time to focus on other strategic priorities.

### **5.3. Workforce**

There are no direct workforce implications arising from the recommendations of this report.

### **5.4. Legal**

ACHSCP has a statutory duty under s29(3) of the Public Bodies (Joint Working) Scotland Act 2014 to deliver a locality planning system. ACHSCP is currently fulfilling its statutory obligations as it has three locality areas across Aberdeen City.

### **5.5. Unpaid Carers**

The annual reports for all three of our localities have reported an increase in the number of unpaid carers accessing support over the previous year. The annual reports have a positive impact on unpaid carers as they help to promote the invaluable work they do to support our health and social care colleagues. Each report also sets out where unpaid carers can access dedicated services and support.

### **5.6. Information Governance**

There are no direct information governance implications arising from the recommendations.

### **5.7. Environmental Impacts**

There are no direct environmental implications arising from the recommendations of this report.

### **5.8. Sustainability**

There are no direct sustainability implications arising from the recommendations of this report.

### **5.9. Other**

As integrated locality planning arrangements are in place with Community Planning Aberdeen, the annual reports were also reported to the





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Community Planning Management Group on 9 August 2023 and to the Community Planning Aberdeen Board on 6 September 2023. The annual reports will be presented to Full Council on 11 October 2023.

### 6. Management of Risk

#### 6.1. Identified risks

6.1.1 During volunteer week in April 2023, ACVO found significant barriers which prevent people from volunteering in the community. Survey respondents reported work commitments, cost of living challenges, childcare and/or caring responsibilities, and other work, family, or leisure commitments were the most common reasons why they were unable to support a community group.

Likelihood of occurrence – High

Impact if the risk does occur - Medium

6.1.2 This is a known risk and being mitigated through the Locality Planning Team's ongoing community outreach and engagement programme and through citywide events such as the Community Gathering and Granite City Gathering. Community Planning Aberdeen have also recently published its Community Empowerment Strategy with the creation of Stretch Outcome 16 and its seven dedicated Improvement projects to deliver the Strategy. Improvement Project 16.4 aims to increase community participation in locality planning and monthly reports are presented to the Community Empowerment Group. Locality Planning updates are also a standing item on ACHSCP's Strategic Planning Group which is attended by LEG members from across our three locality areas.

#### 6.2. Link to risks on strategic or operational risk register:

6.2.1 This links to Risk 6 on the **Strategic Risk Register**:

**Cause:** Need to involve lived experience in service delivery and design as per Integration Principles

**Event:** IJB fails to maximise the opportunities created for engaging with our communities

**Consequences:** Services are not tailored to individual needs; reputational damage; and IJB does not meet strategic aims



## **RISK, AUDIT AND PERFORMANCE COMMITTEE**

- 6.2.2 The Locality Planning Team has been put in place to facilitate LEG and PNP meetings and to support delivery of the three Locality Plans. Performance updates are reported to this Committee, the Strategic Planning Group, and the Community Empowerment Group on a cyclical basis.
- 6.2.3 LEG and PNP meetings are held on a 6-8 weekly cycle and the Stretch Outcome 16.4 project group is tasked with increasing the number and diversity of LEG members which will help ACHSCP meet its delivery plan obligations and statutory duties to deliver a locality planning system.
- 6.2.4 LEG and PNP members, in addition to Outcome Improvement Groups and locality based services were fully consulted on the annual reports and had the opportunity suggest changes for improvement.
- 6.2.5 The end of social distancing regulations following the Covid-19 pandemic provides the Locality Planning Team with more options to engage with our communities as we can now host large scale public events such as the Community Gathering and Granite City Gathering, in addition to in-person LEG and PNP meetings to complement the ongoing virtual meetings and workshops. These measures help to mitigate the risk of ACHSCP not maximising opportunities to engage with our communities and to involve them in locality planning and service delivery.



# Aberdeen City - Central Locality

## Annual Outcome Improvement Report 2022-23



### Central Locality Neighbourhoods:

Ashgrove, City Centre, Froghall, George St, Hanover, Hilton, Midsocket, Old Aberdeen, Powis, Rosemount, Tillydrone, Seaton, Stockethill, Sunnybank, West End and Woodside



Community Planning  
Aberdeen



# WELCOME

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Welcome to our second annual report against the Central Locality Plan first published in 2021. The Central Locality Plan sets out how Community Planning Aberdeen and its member organisations will work together and with communities to deliver improved outcomes for the 14 neighbourhoods in the locality and the locality as a whole. The Locality Plan was prepared by Community Planning Aberdeen staff and community members involved in the Central Locality Empowerment Group and Tillydrone, Woodside and Seaton Partnership. Click on the links to view a copy of the full Central Locality Plan and Summary Locality Plan. Also see the end of this report to find out more about the organisations and community groups involved in preparing the plan.



This report provides an update on progress made against the priorities that were identified in the Central Locality Plan. It includes information about key activities and initiatives and also the impact that these have in the Central Locality and in target neighbourhoods. The information and data within the report demonstrates success in many areas. However, we also recognise where we need to do better and have identified priorities for improvement next year.

Our focus is always on impact on outcomes for communities. Central to our approach is involving and empowering communities which we have made clear in our new Community Empowerment Strategy published in 2022. Behind the scenes, Community Planning Aberdeen has also made some changes to ensure member organisations are working better together to empower communities. Our new locality planning team has been in place since February 2023 and epitomises our renewed vigour for working together with local communities. This report provides an important baseline for how we are currently performing in the Central Locality and a commitment to improvement going forward.

This report is split into the following sections:

|                              |                |
|------------------------------|----------------|
| <b>Our Economy</b>           | <b>page 3</b>  |
| <b>Our People</b>            | <b>page 9</b>  |
| <b>Our Place</b>             | <b>page 18</b> |
| <b>Community Empowerment</b> | <b>page 20</b> |



## OUR PRIORITIES

The Central Locality Plan 2021-26 sets out two priorities to improve our local economy:

**Priority 1: Reduce the number of people living in poverty**

**Priority 2: Ensure people have the digital means to ensure they do not miss out on opportunities**

## PROGRESS MADE DURING 2022/23



### *Supporting communities who experience poverty & our most vulnerable families*

#### **Community food provision and community pantries**

With food prices rising at the fastest rate in 40 years we have been working with CFine to increase access to affordable food across the locality, particularly for our most vulnerable communities and low-income families. Through our community food pantry project, we have focused on increasing access to affordable food in our priority neighbourhoods which include Tillydrone, Woodside, Seaton, Ashgrove Stockethill and George Street in the Central Locality. Recognising the challenges people can face attending one of our fixed food pantries, a mobile food pantry was launched in September 2021. CFine has 192 members of the Central Locality shopping at the pantry at Poynerook Rd on a regular basis. The mobile food pantry also had 810 visits from residents of the Central locality during 2022-23.

#### ***Affordable Food Providers in Central***

[CFine](#) operates a mobile food pantry on Thursdays at:

-Tillydrone Church 1pm-1:40pm

-Seaton Aulton Pitches 1:50pm -2:20pm

The [Woodside Pantry](#) is also available in the Central Locality, alongside other local [Food Banks](#).

#### **Supporting communities with financial inclusion**

Ensuring that household income is maximised through the uptake of unclaimed benefits is a key aspect to supporting households to come out of poverty and improve their financial security. There continues to be barriers which can mean people do not claim benefits they are entitled to, such as stigma of claiming, unaware of what they are entitled to, and onerous applications processes.

We have made progress with a number of initiatives to help remove these barriers. For example, we launched the online benefit calculator last year to help support more people to find out what benefits they are entitled to. This has been accessed 7274 times across the city during 2022/23, with 887 of those being from the Central priority neighbourhoods. We have also taken action to identify households who should be entitled to Pension Credits and have contacted them directly by letter. Using this approach 410 households were identified from across the City which qualified for Pension Credits. Finally, a booklet for families was developed to increase awareness and uptake of child benefits such as Education Maintenance Allowance and School Clothing Grants. The booklet targeted families and provided guidance on how to claim. Across the City 2749 families benefited financially by accessing additional benefits with 1067 families in the Central Locality benefiting financially by accessing additional benefits.

## Fuel poverty/ affordable heating



**Staying Warm & Well Winter Roadshow**

Thursday 8 December, 10am - 2pm  
Central Library, Rosemount Viaduct, Aberdeen

Pop in for a free cuppa and chat to friendly staff who will share information and advice.

**WARM SPACE**  
We are open and the heating's on



As the cost of living increases it is important that we work together to do everything we can to support every household in Aberdeen. We have been working together with partner organisations across Aberdeen to provide a range of public warm spaces that will provide an opportunity for people to come together, share and use resources. Every warm space is unique however all warm spaces offer a friendly welcome and comfortable environment to meet friends or socialise. There are 18 warm spaces across the Central Locality but of course people are free to visit any warm space across the City. You can find your nearest warm space by visiting [here](#).

As well as providing warm spaces we have been increasing awareness of the support available to households during a variety of community events and we have trained frontline staff. As a result of the promotion of support available and an increase in home visits to deliver insulation and energy efficiency measure a total of £134,464.52 fuel bill savings was made last year across the Central Locality.

## Support English as Second Language (ESOL) families to access services

The CLD Adult Learning Team assessed 900 learners in the year 22/23 (which included over 600 Ukrainian Learners). The assessment learners were either offered a class or sign-posted to the most appropriate provider for their ESOL needs. The Adult Learning team has delivered 197 classes at an average of 45 classes per term. That is an average of 150 learners per term receiving a minimum of 2 classes per week. The classes range from pre-beginner to pre-intermediate. In addition to our mainstream classes, we have offered additionality of walk and talks, employability short courses and x2 ESOL for the Care Sector which has resulted in all but 1 participant either gaining employment or a paid placement.



**Strengthening opportunities for Business Growth.**

## Support development of Social Enterprises and small businesses.

Local community start-ups benefit everyone. Not only do they help get people back into employment, they can also create new jobs and bring new money into the community. We are delighted to have secured local community support for people wishing to start their own business. Through Business Gateway we now have a Community Business Advisor attending the Tillydrone Community Campus to provide a monthly drop-in service. Over the last 12 months the service has attracted an average of 2 attendees per drop in which has resulted in 8 people starting their own business.





## Social Enterprise, Community Case Study

### Seaton Community Café, Seaton Community Centre

The idea for the community café grew from a post covid plan to encourage over 55s back into a social environment. Initially we formed a Community group with help from ACVO for the Constitution and offered a free soup & sandwich lunch with transport and entertainment once a month. A year later we run the event twice a month and frequently sell out, capacity is 28 for each event and we get around 40 customers a month. In addition, we ran the Seaton Warm Space and the Seaton Pantry.



We had always intended to open a Community Café and the Warm Space Initiative, and the Community Pantry allowed us to meet more of the community. Now we had a real idea of what we wanted to achieve and why, the Cost-of-Living Crisis just made us even more determined.

With initial funding from the HIF fund and support from communities and the Health and Social Care Partnership we opened the Café in its current form four months ago. The café is open twice a week in the afternoons and attracts around 70 customers each week. There were seven volunteers for the Soup & Sandwich team, all of whom passed their Food Hygiene assessment. In addition, we had four committee members, but we soon added another six. These volunteers also supported the Pantry which ran twice a week.

We work with a range of partners - Fresh Wellness, Aberdeen in Recovery, Shmu, Tree Life and CLICC to promote use of the café, pantry and the community centre. We are members of Social Enterprise Scotland and are intending to continue the development of this. In addition, we are working on a new Green project with Nescans which will include the target of Carbon Zero. For the Café we plan to develop an external catering service, initially for fellow Third Sector groups with a view to expanding. Plans and costings are very positive although we need to consider working towards becoming a SCIO which will allow us to access funds.



*Developing approaches  
opportunities.*

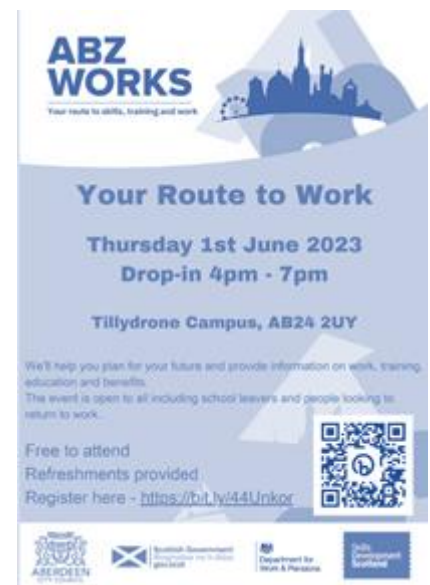


*to support employment*

### Local employability support and job opportunities

Supporting people into employment is a top priority for the locality. Over the year we have delivered a range of employability support events targeted at people who face barriers and challenges. For example, we have delivered sessions for people over 50 years of age, people with a disability, and people living in our priority neighbourhoods in the Central Locality.

Partners Aberdeen City Council, Skills Development Scotland, DWP and Business Gateway have also delivered ‘Your Route to Work’ sessions through our ABZ works initiative. These are aimed at young people living in priority neighbourhoods who are disengaged from school, school leavers, work returners and their wider families. During these sessions participants can find out information on how to get into employment, training, education or volunteering as well as receive money and benefit advice. There were 16 attendees at the Tillydrone event. Exit surveys were completed with a small number of event attendees. Everyone who attended and who provided feedback felt the event was useful or very useful and all would be likely to visit a future event.



### Increase the number of Modern and Graduate Apprenticeships

We are committed to creating accessible pathways to both employment and education, two such paths are Modern and Graduate Apprenticeships. These apprenticeships offer people the opportunity to blend academic qualifications whilst also gaining practical experience on the job. This enables people to earn as they learn, creating more realistic and inclusive opportunities for local people. Across Aberdeen City, North East of Scotland College (NESCoL) data shows that the promotional events for employers and potential apprentices, focus groups with pupils from St. Machar Academy, as well as the introduction of incentives for employers through the Apprentice Employer Grant where employers were offered £5k on recruitment of a new Modern Apprentice (MA) have resulted in a 36% increase in [Modern Apprenticeships](#) from 157 in 2019/20 to 214 in 2022/23.







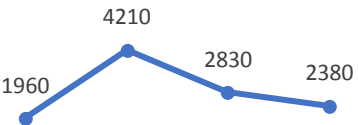
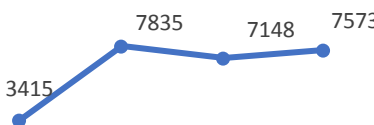




### Improved digital access and increase skill base across the community

#### Digital Access

Through our digital improvement project, we have seen positive outcomes for both digital access and skills. This work included the promotion of existing access and new access to digital devices such as library computers, council digital resources and universities. In addition to this Silver City Surfers continue to offer face to face tuition for over 55’s in the City helping them to become more comfortable using digital tools, and offering support to community members in the central locality at the Central Library.

**79.4%** of City Voice respondents in the Central Locality reported they had at least basic digital skills.

| Tackling Poverty |              |                 |
|------------------|--------------|-----------------|
| Food Insecurity  | Food Poverty | Affordable Food |

|   |   |  |
|---|---|--|
|  <p><b>9.7%</b> of people in the Central Locality worried they would not have enough to eat compared to <b>18%</b> of people living in Tillydrone, Woodside, Seaton, Ashgrove, Stockethill and George Street. (City Voice 46, 2022)</p>            |  <p><b>4.3%</b> of households in the Central Locality ran out of food compared to <b>1.9%</b> of households Citywide (City Voice 46, 2022)</p>   |  <p><b>1,002</b> families in the Central Locality accessing <b>affordable food</b> at their local community pantry (mobile and located in Tillydrone and Seaton)</p>    |
| <p><b>Fuel Insecurity</b></p>   | <p><b>Fuel Poverty</b></p>  | <p><b>Fuel Bill Savings</b></p>  |
|  <p><b>34.8%</b> of people in the Central Locality worried they would not be able to heat their home compared to <b>43.1%</b> of people living in Tillydrone, Woodside, Seaton, Ashgrove, Stockethill and George Street. (City Voice 46, 2022)</p> |  <p><b>5.4%</b> of households in the Central Locality have had to seek support for paying for heating, compared to <b>8.3%</b> of households in Tillydrone, Woodside, Seaton, Ashgrove, Stockethill and George Street. (City Voice 46, 2022)</p> |  <p><b>£134,464.52</b> fuel bill savings made across the Central Locality through energy efficiency measures and support such as provision of <b>18</b> warm spaces</p> |
| <p><b>Claimant Count</b></p>  | <p><b>People on Universal Credit</b></p>  | <p><b>Benefit Maximisation</b></p>   |
|  <p>Has decreased after a spike in 2021. 49% of claimants live in central locality priority neighbourhoods</p>   |  <p>Has increased in the central locality since 2020. 52% of UC claimants live in priority neighbourhoods</p>  |  <p>The online benefit calculator has been accessed <b>887</b> times by people from Central priority neighbourhoods</p>   |
| <p><b>Children in low income families</b></p>   | <p><b>Business Start Ups</b></p>  | <p><b>Digital Access and Skills</b></p>  |
|  <p>Child poverty has increased in the central locality since 2019. 54% of children in low income families live in priority neighbourhoods</p>   |  <p>8 people in the Central Locality supported to start their own business.</p>  |  <p><b>79.4%</b> of City Voice respondents in the Central Locality reported they had at least basic digital skills. (City Voice 46, 2022)</p>                         |

**AREAS FOR IMPROVEMENT IN 2023/24**

- Make childcare more affordable and accessible to increase parental employment
- Utilise empty premises to encourage new businesses.
- Grow the number of job opportunities in the locality.

- Strengthen relationships with local businesses.
- Support 50 people to start a business.
- Increase the number of responsible businesses working with Community Planning Aberdeen (CPA).
- Ensure support extends to Priority Neighbourhoods Ashgrove, Stockethill and George Street as well as Tillydrone, Woodside and Seaton.



## OUR PRIORITIES

Central Locality Plan 2021-26 sets out three priorities to improve outcomes for our people

### Priority 3. Improve Mental Wellbeing of the Population

**Priority 4. Ensure People can access services timely** through a person-centred approach where the needs of the whole population are considered.

**Priority 5. Create safe and resilient communities** where hate crime will not be tolerated and develop initiatives which reduce the impact of substance use and anti-social behaviour.

## WHAT PROGRESS HAVE WE MADE DURING 2022/23?



### Improve Health and Wellbeing

The Health Improvement Fund supports initiatives that improve the health and wellbeing of people across Aberdeen. During 22-23, 68 projects received funding, with initiatives ranging from community gardening and lunch clubs to birthing classes and Virtual Reality (VR) training. In a bid to streamline funding opportunities across the City, the Health Improvement Fund linked up with ACVO Community Mental Health and Wellbeing Fund and Aberdeen City COVID Recovery Fund to ensure an additional 14 applications could receive funding. Funded projects are evaluated to measure impact and achievement of the Aberdeen City Health and Social Care Partnership (ACHSCP) priorities.

Of the 68 HIF funded projects, 33 were either from bidders based in the Central Locality or aimed to support health improvement activities within Central Locality. The Health Improvement Fund received 122 applications, of which 63 were from, or would benefit Central Locality. **Gerrard Street Lunch Club** received HIF funding to set up a new lunch club at Gerrard Street Baptist Church, run by volunteers. The aim of the lunch club is to



*“The volunteers do a great job organising the lunch club, the sandwiches are always tasty!”*

provide community members with a free nutritious lunch while tackling social isolation. The club now has a core group attending with friendships being made and is always open for new attendees to pop along.

## Volunteering in the Community



We have continued to build our volunteering community across the City that was so crucial during the covid pandemic. Between December 2021 and March 2023, we saw a 17.4% increase in volunteer opportunities being advertised across the City on the volunteer hub run by ACVO. Volunteering across the Central Locality is invaluable in supporting stretched public services. For example, through the Fairer Aberdeen Fund 739 volunteers contributed 114,280 hours of volunteering with a value of over £2m. Over 45,000 people were involved or benefitted from the 36 funded initiatives within the programme and 33 of the Fairer Aberdeen Fund projects benefited the Central

Locality. Another project to support volunteering is Station House Media Unit's (SHMU's) community project to support prisoners in HMP Grampian, offering them post-release support and engaging them in opportunities at SHMU upon release. including employability, volunteering, and meaningful activity.

## Supporting Unpaid Carers

In January 2023, Aberdeen City Health and Social Partnership published the new Carers Strategy which acknowledged the huge contribution that Carers make and seeks to support all unpaid Carers in Aberdeen City.

During the development of the new strategy there were several key inputs including: the National Carers Inquiry, publication of the National Carers Strategy from Scottish Government, the dedicated work and support of the Carers Strategy Implementation Group and most importantly the wider consultation and engagement of Carers across the City.

The new Carers Strategy identifies four key priorities to support Carers:

- Identifying as a Carer and the first steps to support
- Accessing advice and support
- Supporting future planning, decision making, and wider Carer involvement
- Community support and advice for Carers

In 2022-23, 431 carers accessed the Quarriers Adult Carer Support Service in the Central Locality which is an increase of 38.1% on the 312 carers who accessed the service in 2021-22.

Since the Respite Bureau started in June 2022, 320 people have been referred for a short break as of March 2023. Three further tests promoting different types of carer breaks were also tested this year, Doorstep Breaks, Scot Spirit and Time to Live. Data from these tests will be evaluated and shared for future learning. More information on the Carers Strategy and how carers can access services and support can be found [here](#)



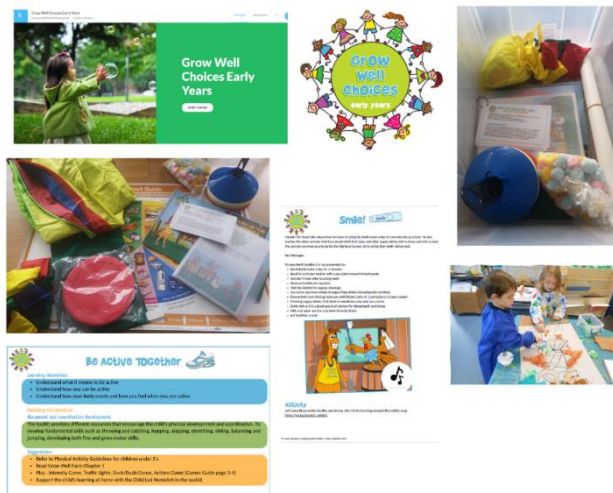
## *Create opportunities to upskill knowledge and understanding*

### **Use digital tools to support Mental Health and Wellbeing for young people**

All schools in the Central Locality offer counselling, and each provides free physical activity to enhance the mental wellbeing of children, regardless of circumstances. The Safer Schools app was launched in 2022 with 100% of schools signed up in the Central Locality. The app includes features to help parents and carers navigate challenges such as absence reporting and safeguarding concerns, as well as develop easier channels of communication. All local parents and carers can access the app, which has been promoted widely in school newsletters. Initial feedback from parents has been positive, and formal evaluation data will be available for future reporting periods. We recognise the role physical activity plays in supporting good mental health and through the Active Schools Programme, all Central Locality schools provide free physical activity opportunities for pupils.



**Grow Well Choices early years (GWCEYS)** is a toolkit which supports people working with children aged 3-5 to deliver learning about healthy lifestyles. In 2022, in partnership with NHS Grampian, ACHSCP engaged with those using the pack, allowing improvements to be made and the pack to be relaunched. In March 2023, 20 people from the Central Locality attended the virtual awareness session for updated toolkit.



The ACHSCP Public Health Team train practitioners to deliver the **PEEP programme (Parents as Early Education Partners)**. PEEP recognises that parents and carers are children's first and most important educators.

The Peep Learning Together programme supports parents and carers to:

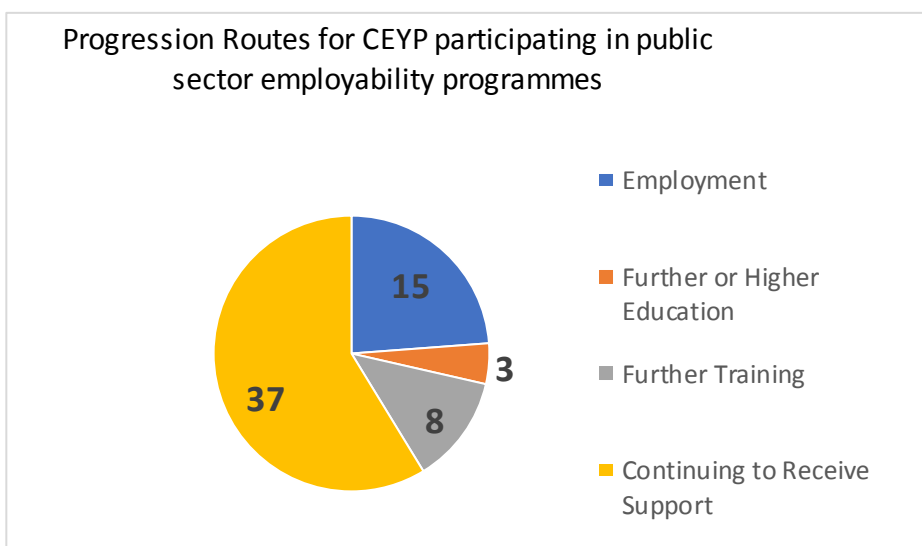
- value and build on the home learning environment by making the most of everyday learning opportunities.
- build and strengthen attachment relationships with their child through listening, talking, playing, singing and sharing books together.
- help babies and children to make the most of their opportunities by becoming confident communicators and active learners, ready for school



There were 36 referrals to PEEP from the Central Locality during 2022. Four people from the Central Locality were also referred by Health Visitors to the Family Learning Service.

### Positive Destinations for Care Experienced young people

Positive destinations mean that young people go on to attend further or higher education, a voluntary placement, begin an apprenticeship, or go into paid employment. In 2021-22, 96.2% of Central Locality school leavers achieved an initial positive destination which was slightly below the 2020-21 figure of 96.5%, but above the Aberdeen City average of 93.8%. Care experienced young people (CEYP) often face significant barriers to employment and need additional support and mentoring to help them achieve and sustain



employment. We are committed to supporting CEYP to achieve the same outcomes as their peers and one aspect of this is achieving positive destinations, with the ultimate goal of moving CEYP into paid employment. The journey and support required for each care experienced young person varies and through our employability support for care experienced young people project, we are testing a variety of ways to support them, such as a guaranteed interview scheme, tailored employability support programme, pathway planning and induction into work. A good example of youth volunteering is the Saltire Awards, which is the Scottish Government's way of celebrating, recognising and rewarding the commitment, contribution and achievements of volunteers aged between 12-25 in Scotland. Of the 2459 Saltire Award recipients in Aberdeen City between December 2021-March 2023, 541 young people were from the Central Locality.

### Supporting priority families via Fit Like hubs

[Fit like? Family Wellbeing Hubs](#) are a group of services working together to support children and young people's mental wellbeing. The Hubs help with:

- Finance and benefits
- Family relationships and communication
- Coping with daily pressures
- Promoting positive emotional and mental wellbeing
- Talking about traumatic things that have happened

The Fit Like Hub operates out of Tillydrone in the Central Locality.



## *Increase knowledge and understanding of Health Provision in Locality*

### Granite City Gathering: 24 June 2023

The ACHSCP Wellbeing Team deliver a number of initiatives under the **Stay Well Stay Connected** programme, which targets older people and those with disabilities who are at risk of becoming socially isolated or having poor health and wellbeing outcomes. A number of the sessions they deliver in the Central Locality are set out below:

The Granite City Gathering 2023 was a public health event held on 24 June at Kings Church Bridge of Don. The gathering helped people explore how to support themselves and retire positively. The aim and purpose of the gathering was to help people to understand and explore what a good retirement could look like, in their own communities and have a real sense of purpose and opportunity to contribute.



167 attendees  
 Targeted at those aged 45+  
 Aberdeen City Residents  
 1 Choir  
 6 crafting and art groups  
 1 Yoga group  
 1 gigong and taichi  
 Ballroom dancing  
 22 community groups and charities  
 4 speakers  
 20 volunteers



## Highlights

- The gathering focused on people who are planning to retire soon, or have already retired and live in Aberdeen
- The event had a number of taster sessions where people could try new activities such as movement with gigone, Tai chi, chair based yoga, sing in a choir, have a boogie at the gathering, try out crafting or an art session
- There was an opportunity for delegates to meet representatives of community groups and charities who told them about who they were, and what services they provide
- The speakers ranged from Horseback, UK; to Japanese wellbeing tips 'Ikigai'; to exploring what an Age Friendly Aberdeen could look like

**Boogie in the Bar** provides an opportunity for people at risk of social isolation to meet up at a local venue to have a blether and a dance. A monthly Boogie in the Bar is held in Dee Street with an average of 90 people attending throughout the year. Work is underway to create a resource for future Boogies so that they share the same ethos. It is important that we learn from the successes of the Boogies so that future sessions are sustainable and meaningful for those who attend.

**Relaxed Match Day Experience** aims to create a dementia and neurodivergent friendly environment providing a calm area for those who may have sensory or mental health challenges. The experiences are a truly intergenerational project and benefits can be captured in feedback by both young and older people attending. The Wellbeing Team so far have been allocated 3 sessions for participants to attend, and a total of 18 people from across the city have benefitted to date. Participants include people living independently and people living in care settings. Feedback has been incredibly positive for this project:

*"The staff at Pittodrie were extremely welcoming and helpful when we arrived and left."*

*"The elation created a fantastic atmosphere at the service as others got caught up in the excitement of the day being retold."*

**Meno & Pause Co-lab Café** at Pittodrie Stadium began in March 2022. Sessions are delivered in partnership between the Aberdeen City Health and Social Care Partnership Wellbeing Team and Aberdeen Football Club Community Trust. The first event was a facilitated session to explore what support currently exists in Aberdeen, where the gaps are, and how these could be filled. Sessions continued for 5 months, covering topics including friends and family, nutrition and sharing experiences. As a result of this engagement, all menopause work going forward has been rebranded 'The Mighty Oaks'.

The team has also worked in collaboration with an instructor from Aberdeen Sports Village to provide a menopause course. This included a combination of group exercise sessions, followed by a Q&A and discussion. This has now evolved into a weekly exercise class, delivered at Powis community centre, with the majority of those from the original course continuing to participate. A weekly menopause health walk has also started, lasting one hour, with the option of staying for an additional hour for a cuppa and chat. These walks will be starting in different areas throughout the city in the coming months.





## Innovative approaches to health issues



**The Tillydrone Health and Wellbeing Project at the Tillydrone Community Flat** is an initiative to increase relaxation and wellbeing by providing complementary therapies to Tillydrone residents. Complementary therapies – including Reiki and Reflexology - engage with the patient as a whole person rather than treating a specific symptom or symptoms. Therapies are called ‘complementary’

because they complement conventional health and medical treatments. Many individuals accessing treatments at the Flat are also using conventional medical treatments for long standing physical, mental or psycho-social health conditions. They report the complementary therapies are highly beneficial as a secondary treatment, helping relieve pain, lower stress and enhancing wellbeing and relaxation.

### Female, 43

*I have a child with Additional Support Needs and every day is different and brings different challenges. The treatments relax me and the mere aspect of taking time out of the day for myself makes me feel that I am my own person. The treatments have a positive impact on my mental health and I really notice the difference if I miss an appointment.*

## Upskilling communities and partners knowledge of Suicide Prevention

Suicide is more prevalent in middle-aged white males from deprived areas. However, being male, white, middle-aged, and living in a deprived area are not precursors to suicide. Trauma or events that lead up to suicide are more likely to occur in that demographic and this group is less likely to seek help in those circumstances. In an effort to fully understand the leading contributing factors in deaths by suicide in the North East, Police Scotland analysed all Death Reports since the start of 2021 and tracked all contributing factors that were highlighted in the reports including medical and family history and events leading up to the person’s death. These were not geographical or locality specific. The circumstances behind suicides are constantly changing, research is ongoing to keep abreast of these changes and to adapt training, information and resources accordingly in Aberdeen City and across the wider North East. The rate of death from suicide in Central Locality is 10.5 per 100,000, which is below the citywide average of 11.1 per 100,000 of the population.



## Create Educational Opportunities

The communities where we live, work and play have a significant influence on our health and wellbeing. Through our good health and wellbeing choices project we have trained 70 people working in our communities with **Making Every Opportunity Count (MEOC)**. MEOC is a brief intervention being rolled out across partners to support staff to make the best of every appropriate opportunity to raise the issues of a healthy lifestyle. Evaluation has shown increases in:

- Awareness of health and social issues that may affect people's health and wellbeing
- Confidence in speaking about issues which may affect their health and wellbeing
- Confidence to undertake a very brief intervention to support people to make positive health and wellbeing choices
- Confidence in the knowledge of health and wellbeing support and signposting to services

During February and March 2023, six Making every Opportunity Count (MEOC) awareness sessions were held on Microsoft Teams for Library staff. A small number of Communities (Aberdeen City Council) and Third Sector (Aberdeen Football Club Community Trust) staff also attended the sessions to support their work in Warm Hubs. The awareness session lasted approximately two hours depending on the interaction from participants and was comprised of short videos and infographics highlighting health inequalities across Aberdeen City to highlight the importance of MEOC as a prevention and early intervention approach. A breakout room allowed participants the opportunity to consider a delegated scenario and discuss what information could be provided and then each group fed back upon returning to the main meeting area.

## **Tackling Hate Crime**

We are committed to developing a range of community safety initiatives. We continue to tackle hate crime through expansion of Third-Party Reporting Centres and the provision of training to teams who support those victimised by hate crimes. We also acknowledge the need to work with people to improve community safety. In 2022 we established a new youth group co-designed with children and young people, resulting in a 70% increase in the number of 10-16 year-olds attending community activities (from 40 in 2019 to 68). Three new youth groups were also established in priority neighbourhoods. Similarly, we saw a 2.6% reduction in the number of youth disorder calls to the police in 2022. Indeed, latest data shows a sustained 40% reduction in the number of under 18s identified as being responsible for an offence since 2016.



## ***Support those affected by substance use***

### **Raise awareness of substance service and provision**

Latest Aberdeen City drug related death data shows an increase from 56 to 62 deaths in 2021. The Aberdeen City Alcohol and Drugs Partnership through its fatal drug overdose projects are focused on reducing drug related deaths through innovative developments and by increasing the distribution of naloxone. Naloxone is an emergency medication that can reverse the effects of an overdose of opioids like heroin or methadone and can save someone's life. Reviews from past drug related deaths have shown that many of those people who died were not in any drug treatment service but had come to the attention of many other services. By increasing the number of services who can distribute and administer Naloxone to those in need, we can get the lifesaving drug out to those people at risk of overdose, as well as to family members/friends of those in need. Over the past year, we have widened access to naloxone by increasing the number of non-drug and alcohol services able to supply and/or administer naloxone. We have seen increased supply of naloxone in each locality, with 226 kits supplied in the Central Locality. As well as naloxone, increasing education and access to a variety of treatments, the Partnership are taking a targeted approach, focusing on interventions and supports required at the various touchpoints. We are seeing the impact of this approach. For example, through our improvements focused on people liberated from prison we have seen a 56% reduction in drug related deaths of people liberated within 6 months.




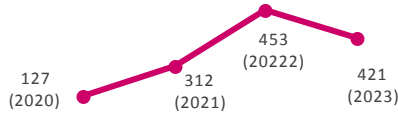








### **Reducing harms from alcohol use**

Alcohol is one of five lifestyle behavioural risk factors which contribute to the majority of chronic and non-communicable disease in our population. Throughout 2022/23 we have focused on increasing awareness of alcohol risks and widening access to alcohol interventions and support, including the development of a new alcohol audit screening tool to increase referrals for support both from professionals and individuals directly with a corresponding promotional campaign. As a result of the interventions and targeted campaigns we have seen the number of active clients with Alcohol and Drugs Action (ADA) Duty Drop-in



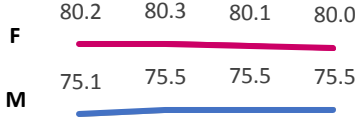
service in 2022/23 increase in each of the three priority neighbourhoods against the 3-year baseline. In the Central Locality, data shows a 66% increase in clients from AB24 postcodes. Other interventions ADA have taken during 2022-23 include:

- The piloting of a new referral pathway from Police to ADA
- Widening the number of settings for Alcohol Brief Interventions, including HMP Grampian
- Targeted social media campaign and subsequent levels of engagement with the 'Alcohol Aberdeen' online 'quiz'

## WHAT IMPACT HAVE WE HAD IN 2022/23?

| <p><b>Community Funding</b></p>  <p><b>33 community projects</b> in Central Locality were funded through the Health Improvement Fund.</p>   | <p><b>Positive destinations</b></p>  <p><b>96.2%</b> of school leavers from the Central Locality achieved an initial positive destination in 2021-22, this is similar to the 2020-21 figure of 96.5%, and higher than the Aberdeen City average of 93.8%.</p>  | <p><b>Young People Confidence</b></p>  <p><b>41%</b> of S1-S6 pupils reporting feeling confident compared to 35% last year.</p>  |      |     |      |     |      |     |      |     |   |   |
|--|---|---|------|-----|------|-----|------|-----|------|-----|---|---|
| <p><b>Young People Mental Health</b></p>  <p>No. of referrals each month to NHSG's children and adolescent mental health services have increased since 2020</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Referrals</th> </tr> </thead> <tbody> <tr> <td>2020</td> <td>127</td> </tr> <tr> <td>2021</td> <td>312</td> </tr> <tr> <td>2022</td> <td>453</td> </tr> <tr> <td>2023</td> <td>421</td> </tr> </tbody> </table> | Year  | Referrals   | 2020 | 127 | 2021 | 312 | 2022 | 453 | 2023 | 421 | <p><b>Counselling for Young People</b></p>  <p><b>100%</b> of schools in the Central Locality offer counselling and Active School activities</p> | <p><b>Working Together with Parents</b></p>  <p><b>36 referrals</b> were made to the Parents as Early Education Partners (PEEP) programme from the Central Locality in 2022.</p> |
| Year   | Referrals   |   |      |     |      |     |      |     |      |     |   |   |
| 2020   | 127   |   |      |     |      |     |      |     |      |     |   |   |
| 2021   | 312   |   |      |     |      |     |      |     |      |     |   |   |
| 2022   | 453   |   |      |     |      |     |      |     |      |     |   |   |
| 2023   | 421   |   |      |     |      |     |      |     |      |     |   |   |
| <p><b>Young People Volunteering</b></p>  <p><b>541</b> young people from the Central Locality received a Saltire Award during 2022.</p>   | <p><b>Healthy Eating</b></p>  <p><b>11.7%</b> of people in the Central Locality said they were unable to eat healthy and nutritious food due to poverty, compared to 15.4% in priority neighbourhoods. <b>20%</b> of people living in the locality said they ate only a few types of food. (City Voice 46, 2022)</p> | <p><b>Unpaid Carers</b></p>  <p><b>431 unpaid carers</b> were supported in the Central Locality by Quarriers Adult Carer Support Service during 2022-23, this is an increase of <b>38.1%</b> on 312 unpaid carers supported last year.</p> |      |     |      |     |      |     |      |     |   |   |
| <p><b>Alcohol Awareness</b></p>  <p><b>30.8%</b> of people in the Central Locality said they didn't know how many units are in the alcoholic drinks they consume. <b>42.9%</b> of people living in the Central Locality said they didn't think about units at all. (City Voice 46, 2022)</p>  | <p><b>Drug Related Deaths</b></p>  <p><b>226 naloxone kits</b> were supplied in the Central Locality in 2022.</p>  | <p><b>Drug Related Hospital Stays</b></p>  <p>The rate of drug related hospital stays for the Central Locality in 2022 was <b>249.6 per 100,000</b>. This is a slight increase from 244.3 per 100,000 of the population in 2021.</p>       |      |     |      |     |      |     |      |     |   |   |



| Alcohol Related Mortality Rates  | Deaths from Suicide   | Life Expectancy  |
|--|---|--|
|  <p>The alcohol related mortality rate in Central Locality in 2021 was <b>28.87 per 100,000</b>. This has increased since 2019 when the rate was 25.52 per 100,000 of the population.</p> |  <p>The rate of death from suicide in the Central Locality is <b>10.5 per 100,000</b>, this is below the citywide average of 11.1 per 100,000 of the population. This is an improvement from 2021 where the suicide rate for Central Locality stood at 13 per 100,000 of the population.</p> |  <p>Has stayed stable in the Central Locality since 2018 for males and females. But it is lower in priority neighbourhoods at 78.1 (F) and 72.8 (M)</p> |

### AREAS FOR IMPROVEMENT 2023/24?

- Renewed focus on active and accessible travel
- Create more opportunities for young people
- Renewed focus on promoting Healthy Weight Management
- Scale up Stay Well Stay Connected programme
- Increase the number of priority families accessing PEEP programme
- Increase the number of people attending Health Issues in the Community sessions and increase the number of trained practitioners

## OUR PRIORITIES

The Central Locality Plan 2021-26 sets out one priority to improve our local place:

**6. Maximise the spaces in communities to create opportunities for people to connect and increase physical activity.**

### WHAT PROGRESS HAVE WE MADE DURING 2022/23?



#### *Develop resilience plans*

##### **Resilience Plans**

Through our community led resilience project, led by Aberdeen City Council and Scottish Fire and Rescue Service, a pilot community resilience group in Aberdeen has been established, which is composed of several local organisations. This group are currently being supported to develop a community resilience plan, this will be a flexible document that can be used as a template for further community groups, with sections that can be added and removed, depending on specific risks a particular community might have, including but not limited to flooding. Community resilience packs have been issued across community centres in the Central Locality this year. Example box contents include: small power banks for mobile devices, wind up torches and radios, head torches, table lanterns battery, load hangers, first aid kits, stationary, space blankets, hi vis vests, free standing portable emergency lights. Battery generator packs are also being provided to the 3 existing Community Resilience Groups, to assist the overall response to a power outage emergency.



#### *Supporting outside activities*

##### **Promote and improve accessible, active travel**

During the year, Aberdeen City Council, in partnership with Big Issue eBikes launched an electric bike hire scheme in the city. [Big Issue E-Bikes](#) are available in 40 locations across the city and aim to make shorter journeys easier and affordable. The scheme will also have a positive impact on our environment.

The City Voice survey found that 16.8% of people in the Central Locality had cycled in the last year compared to the citywide average of 14.8%. People in the Central Locality are most likely to cycle regularly in the city.



##### **Develop Green Space**

There are 45 food growing projects in schools, communities, and workplaces as at November 2022, an increase of 42 from February 2022. 15 of the 45 food growing projects are in the Central Locality, with 16 new community run green spaces established as at June 2022.

**Woodside Wee Forest** The first Wee Forest has been planted in Aberdeen thanks to the joint efforts of Aberdeen City Council’s Environmental Services team, NatureScot, and pupils and staff of Woodside Primary School. The Woodside Wee Forest will join a group of 20 such forests across Scotland which are being planted.

Led by NatureScot, the programme aims to give people the opportunity to help tackle the twin crises of climate change and biodiversity loss by creating and caring for their own forest in their own neighbourhood.

To create each forest, around 600 native trees will be planted by “Wee Foresters” in an area the size of a tennis court. Volunteer keeper teams will look after the forests over the long term and schools will use the forests for outdoor learning.

The 600 plants, which include alder, cherry, Scots pine, crab apple, holly, juniper, elder, willow, oak, rowan, and hazel trees along with dog roses, broom, gorse, blaeberry, heather, hawthorn, and blackthorn, have been planted by staff and pupils in a grassy area across Clifton Road from the school with help from the City Council’s Countryside Rangers.






Pupils contributed many fantastic designs for the project and the overall winner demonstrated excellent design principals which will fit the Wee Forest ideals.

Woodside Primary School created a fantastic [film](#) to accompany the launch of the wee Forest.

This is a fantastic project, and it is thanks to the efforts of everyone involved that generations to come will enjoy the benefits of these native trees which have been planted in this green space.

### WHAT IMPACT HAVE WE HAD IN 2022/23?

| Satisfaction with Green Space  | Community Growing Spaces   | Cycling  |
|--|--|--|
|  <p><b>66.5%</b> of Central Locality respondents to the City Voice survey reported being satisfied or fairly satisfied with the overall quality of green/open spaces, compared to <b>70.2%</b> of people living in Tillydrone, Woodside, Seaton, Ashgrove, Stockethill and George Street. (City Voice 46, 2022)</p> |  <p><b>45</b> food growing projects happening across the Central Locality</p> |  <p><b>16.8%</b> of people in the Central Locality cycled in the last year compared to the citywide average of <b>14.8%</b> (City Voice 46, 2022)</p> |

### AREAS FOR IMPROVEMENT IN 2023/24

- Develop and implement innovative improvements to reduce waste and recycling opportunities
- Support communities across the Central locality to develop resilience plans



*Working Together*

## Community Empowerment Strategy

Community Planning Aberdeen is committed to working with communities to improve outcomes across each locality and indeed the City as a whole. In 2022 we launched a new Community Empowerment Strategy setting out our vision for all communities to be equal community planning partners. A number of improvement projects are now underway to strengthen community participation in community planning and ensure they have a voice and ability to influence what happens to them and their community.



This year, we have been pleased to see the return of in-person community-based events, including two citywide events, the Community Gathering and the Granite City Gathering.



These events provided a great chance to bring our community and partners together, make connections, and share learning and opportunities. Both events were open to people across the City and were an exhibition of community information and provided a chance for attendees to wander around the stalls and learn about the different opportunities to get involved in their local community. There were 25 stall holders on the day showcasing the work they do in local communities and approximately 121 people attended the gathering. Of the registered attendees, 48.6% were from the Central Locality. You can read the Community Gathering report for more information [here](#).

In addition to our citywide events, the Central Locality Empowerment Group (LEG) restarted on 13 June 2023, having not met since early 2022. Meetings are now held on a two monthly cycle and alternate between virtual meetings and in person meetings at a community venue. Meetings provide an opportunity for LEG members to influence and shape delivery of the Central Locality Plan and hold Community Planning Partners to account. LEGs also provide the Locality Planning Team and Outcome Improvement project managers an opportunity to involve community members in their projects and gain valuable feedback. The Woodside, Tillydrone and Seaton Priority Neighbourhood Partnership has continued to meet throughout 2022-23.

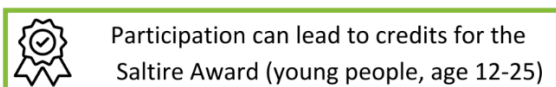
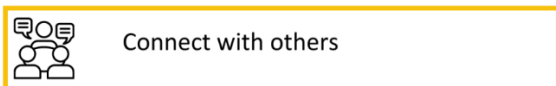
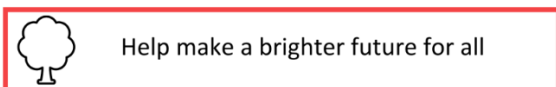
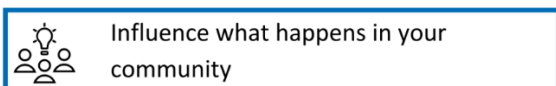


*Find out more & Get Involved!*

The [Central Locality Empowerment Group](#) and the [Woodside, Tillydrone and Seaton Priority Neighbourhood Partnership](#) are two of the main ways we connect with our local communities in the Central Locality. As a member of a LEG and Torry Partnership you will be able to provide a voice on behalf of the people and communities across your neighbourhood.



## What's in it for you?



Following a recent training session provided by SCDC in partnership with ACC/AHSCP, the community had this to say about community engagement:

*"Talk to us and talk to us early. Don't make decisions and then get it approved by us. Communities have knowledge and skills to know what's best for us. We're the local experts about our places"*

*"Community Engagement is where people grow"*

If you are interested in getting involved in helping achieve these aims in your local community, follow this link to find out more: [Our Communities - Community Planning Aberdeen](#) or email [localityplanning@aberdeencity.gov.uk](mailto:localityplanning@aberdeencity.gov.uk).

## Further Information

We understand the importance of working with communities to build a thriving environment for everyone. By engaging with local communities through our dedicated locality planning team, we aim to become more receptive, supportive and action-oriented. Community input is extremely valuable to this work.

The Locality Planning Team includes staff from Aberdeen City Council and the Aberdeen City Health and Social Care partnership working together to support improved outcome across all our localities and neighbourhoods. In the Central Locality your locality planning contacts are Iain, Jade, Graham and Chris.



Iain Robertson,  
Transformation Programme  
Manager, Aberdeen City Health and  
Social Care Partnership



Jade Leyden,  
Community Development Manager,  
Aberdeen City Council



Graham Donald, Community  
Development Officer, Aberdeen City  
Council



Chris Smillie, Public Health Coordinator, ACHSCP

Please take a moment to complete this [survey](#) and let us know how we can enhance our service delivery and collaboration with you. Together we can make a positive impact and create a place where all people can prosper.

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# Aberdeen City - North Locality

## Annual Outcome Improvement Report 2022-23



### North Locality Neighbourhoods:

Dyce, Danestone, Oldmachar, Denmore, Balgownie & Donmouth, Bucksburn, Heathryfold, Middlesfield, Kingswells, Northfield, Cummings Park, Sheddocksley, Mastrick, Summerhill



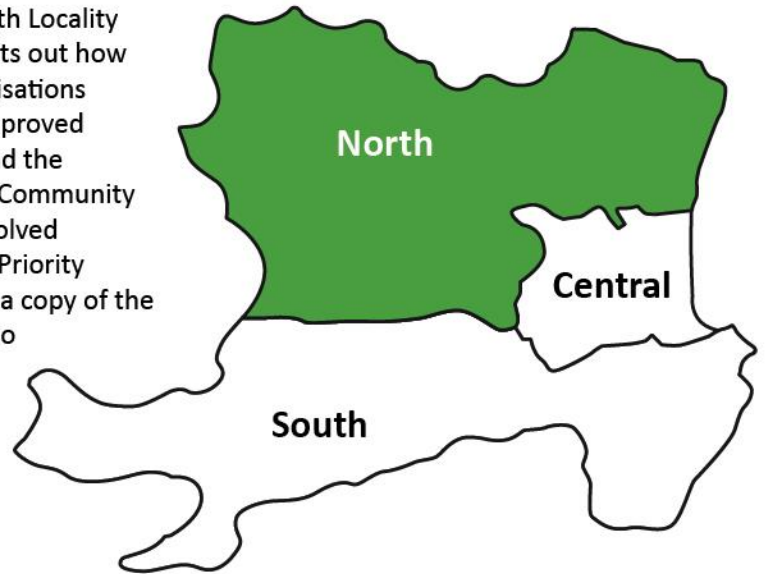
Community Planning  
Aberdeen



# WELCOME

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Welcome to our second annual report against the North Locality Plan first published in 2021. The North Locality Plan sets out how Community Planning Aberdeen and its member organisations will work together and with communities to deliver improved outcomes for the 14 neighbourhoods in the locality and the locality as a whole. The Locality Plan was prepared by Community Planning Aberdeen staff and community members involved in the North Locality Empowerment Group and North Priority Neighbourhood Partnership. Click on the links to view a copy of the full North Locality Plan and Summary Locality Plan. Also see the end of this report to find out more about the organisations and community groups involved in preparing the plan.



This report provides an update on progress made against the priorities identified in the Plan, including information about key activities and the impact these have had in the Locality. The information within the report demonstrates success in many areas. However, we also recognise where we need to do better and have identified priorities for improvement next year.

Our focus is always on impact on outcomes for communities. Central to our approach is involving and empowering communities which we have made clear in our new Community Empowerment Strategy published in 2022. Behind the scenes, Community Planning Aberdeen has also made some changes to ensure member organisations are working better together to empower communities. Our new locality planning team has been in place since February 2023 and epitomises our renewed vigour for working together with local communities. This report provides an important baseline for how we are currently performing in the North Locality and a commitment to improving going forward.

This report is split into the following sections:

- [Our Economy](#) [page 3](#)
- [Our People](#) [page 7](#)
- [Our Place](#) [page 15](#)
- [Community Empowerment](#) [page 17](#)





## OUR PRIORITIES

The North Locality Plan 2021-26 sets out two priorities to improve our local economy:

**Priority 1. Reduce the number of people living in poverty**

**Priority 2. Increase digital access and skills across the locality**

## PROGRESS MADE DURING 2022/23



### *Supporting our most vulnerable families*

#### **Supporting communities with benefit uptake**

Ensuring that household income is maximised through the uptake of unclaimed benefits is a key aspect to supporting households to come out of poverty and improve their financial security. There continues to be barriers which can mean people do not claim benefits they are entitled to such as ; stigma of claiming, unaware of what they are entitled to, and onerous applications processes.

We have made progress with a number of initiatives to help remove these barriers. For example, we launched the online benefit calculator last year to help support more people to find out what benefits they are entitled to. This has been accessed 7274 times across the city during 2022/23, with 724 of those being from the North priority neighbourhoods. We have also taken action to identify households who should be entitled to Pension Credits and have contacted them directly by letter. Using this approach 410 households were identified from across the City which qualified for Pension Credits. Finally, a booklet for families was developed to increase awareness and uptake of child benefits such as Education Maintenance Allowance and School Clothing Grants. The booklet targeted families and provided guidance on how to claim. Across the City 2749 families benefited financially by accessing additional benefits with 792 families in the North Locality benefiting financially by accessing additional benefits.

#### **Affordable heating**

As the cost of living increases it is important that we work together to do everything we can to support every household in Aberdeen. We have been working with partner organisations to provide a range of public warm spaces that will provide an opportunity for people to come together, share and use resources. Every warm space is unique however all warm spaces offer a friendly welcome and comfortable environment to meet friends or socialise. There are 15 warm spaces across the North Locality but of course people are free to visit any warm space across the City. You can find your nearest warm space by visiting [here](#).

As well as providing warm spaces we have been increasing awareness of the support available to households at a variety of community events and have also trained frontline staff. As a result of the promotion of support available and increase in home visits to deliver insulation and energy efficiency measure, a total of £51,909.47 of fuel bill savings was made last year across the North Locality.

## Community food provision and community pantries

### *Affordable Food Providers in the North*

[CFine](#) operates a mobile food pantry on Tuesdays at:

- Middlefield Community Centre from 10-10.30am
- Sheddocksley Sports Centre from 12-12.30pm

[Mastrick Community Centre](#) runs one of several [Food Banks](#) available to people experiencing food insecurity across the North.

With food prices rising at the fastest rate in 40 years we have been working with CFine to increase access to affordable food across the locality, particularly for our most vulnerable communities and low-income families. Through our community food pantry project we have focused on increasing access to affordable food in our priority neighbourhoods which include Middlefield, Mastrick, Cummings Park and Heathryfold and Northfield in the North Locality. Recognising the challenges people can face attending one of our fixed food pantries, a mobile food pantry was launched in September 2021. CFine has 928 members of the North Locality shopping at the pantry at Poynerook Rd on a regular basis. The mobile food pantry also had 106 visits from residents of the North locality during 2022-23.



*Create opportunities for fair work*

## Social Enterprises and small businesses







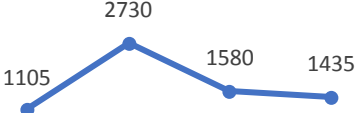
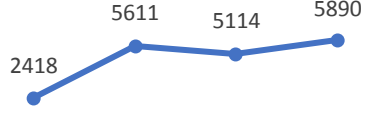

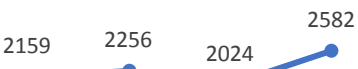


Local community start-ups benefit everyone. Not only do they help get people back into employment, they can also create new jobs and bring new money into the community. We are delighted to have secured local community support for people wishing to start their own business. Through Business Gateway we now have a Community Business Advisor attending the Cummings Park Community Centre to provide a monthly drop-in service. Over the last 12 months the service has attracted an average of 2 attendees per drop-in which has resulted in 3 people starting their own business.



Drop in sessions!

## Local employability support and job opportunities

Partners Aberdeen City Council, Skills Development Scotland, the DWP and Business Gateway have delivered 'Your Route to Work' sessions aimed at young people living in priority neighbourhoods that are disengaged from school, school leavers, work returners and their wider families to find out information on how to get into employment, training, education or volunteering as well as provide money and benefit advice. This has been done through our ABZ works initiative. There were 30 attendees at the Northfield event. Exit surveys were completed with a small number of event attendees. Everyone who attended and provided feedback felt the event was useful or very useful and all would be likely to visit a future event.

| Tackling Poverty  |   |  |
|---|---|--|
| <p><b>Food Insecurity</b></p>  <p><b>8.3%</b> of people in the North Locality worried they would not have enough to eat compared to <b>29.4%</b> of people living in Middlefield, Mastrick, Cummings Park, Heathryfold and Northfield (City Voice 46, 2022)</p>          | <p><b>Food Poverty</b></p>  <p><b>6.3%</b> of households in the North Locality ran out of food compared to <b>18.8%</b> of households in Middlefield, Mastrick, Cummings Park, Heathryfold and Northfield (City Voice 46, 2022)</p>                                  | <p><b>Affordable Food</b></p>  <p><b>1,034</b> families in the North Locality accessing <b>affordable food</b> at their local community pantry (mobile and located in Middlefield and Sheddocksley)</p> |
| <p><b>Fuel Insecurity</b></p>  <p><b>33.6%</b> of people in the North Locality worried they would not be able to heat their home compared to <b>62.5%</b> of people living in Middlefield, Mastrick, Cummings Park, Heathryfold and Northfield (City Voice 46, 2022)</p> | <p><b>Fuel Poverty</b></p>  <p><b>2.8%</b> of households in the North Locality have had to seek support for paying for heating, compared to <b>12.5%</b> of households in Middlefield, Mastrick, Cummings Park, Heathryfold and Northfield (City Voice 46, 2022)</p> | <p><b>Fuel Bill Savings</b></p>  <p><b>£51,909.47</b> fuel bill savings made across the North Locality through energy efficiency measures and support such as provision of <b>19</b> warm spaces</p>    |
| <p><b>Claimant Count</b></p>  <p>Has decreased after a spike in 2021. 39% of claimants live in North Locality Priority Neighbourhoods</p>  | <p><b>People on Universal Credit</b></p>  <p>Has increased in the North Locality since 2020. 43% of UC claimants live in Priority Neighbourhoods</p>   | <p><b>Benefit Maximisation</b></p>  <p>The online benefit calculator has been accessed <b>724</b> times by people from North priority neighbourhoods</p>  |
| <p><b>Children in low income families</b></p>  <p>Child poverty has increased in the North Locality since 2019. 51% of children in low income families live in Priority Neighbourhoods</p>   | <p><b>Business Start Ups</b></p>  <p>3 people in the North Locality supported to start their own business.</p>   | <p><b>Digital Access and Skills</b></p>  <p><b>82.6%</b> of City Voice respondents in the North Locality reported they had at least basic digital skills.</p>   |

- Support families with English as a second language to access services
- Increase the number of vulnerable learners entering positive and sustained work or training.
- Increase uptake of warm spaces
- Support and develop employment opportunities for young people.
- Strengthen relationships with local businesses.
- Develop locally available employability support
- Make childcare affordable and accessible to increase parental employment.
- Buy debt

## OUR PRIORITIES

North Locality Plan 2021-26 sets out three priorities to improve outcomes for our people

**Priority 3. Improve the physical health and wellbeing of people**

**Priority 4. Support local volunteering opportunities**

**Priority 5. Early intervention approach targeted at those who are involved in, or at risk in offending behaviour**

## WHAT PROGRESS HAVE WE MADE DURING 2022/23?



### *Providing support to existing services*

#### Volunteering in the Community



We have continued to build our volunteering community across the City that was so crucial during the covid pandemic. Between December 2021 and March 2023, we saw a 17.4% increase in volunteer opportunities being advertised across the City on the volunteer hub run by ACVO. Volunteering across the Locality is invaluable in supporting stretched public services. For example, through the Fairer Aberdeen Fund 739 volunteers contributed 114,280 hours of volunteering with a value of over £2m. Over 45,000 people were involved or benefitted from the 36 funded initiatives within the programme and 27 of the Fairer Aberdeen Fund projects benefitted the North Locality. Another project to support volunteering is Station House Media Unit's (SHMU) community project

to support prisoners in HMP Grampian, offering them post-release support and engaging them in opportunities at SHMU upon release - including employability, volunteering, and meaningful activity.

#### Supporting Unpaid Carers

In January 2023, Aberdeen City Health and Social Partnership published the new Carers Strategy which acknowledged the huge contribution that Carers make and seeks to support all unpaid Carers in Aberdeen City.

During the development of the new strategy there were several key inputs including: the National Carers Inquiry, publication of the National Carers Strategy from Scottish Government, the dedicated work and support of the Carers Strategy Implementation Group and most importantly the wider consultation and engagement of Carers across the City.

The new Carers Strategy identifies four key priorities to support Carers:

- Identifying as a Carer and the first steps to support
- Accessing advice and support
- Supporting future planning, decision making, and wider Carer involvement
- Community support and advice for Carers

In 2022-23, 359 carers accessed the Quarriers Adult Carer Support Service in the North Locality, an increase of 79.5% on the 200 carers who accessed the service in 2021-22.

Since the Respite Bureau started in June 2022, 320 people have been referred for a short break as of March 2023. Three further tests promoting different types of carer breaks were also tested this year, Doorstep Breaks, Scot Spirit and Time to Live. Data from these tests will be evaluated and shared for future learning. More information on the Carers Strategy and how carers can access services and support can be found [here](#)



## *Creating opportunities to upskill knowledge and understanding*

The Aberdeen City Health and Social Care Partnership Wellbeing Team deliver a number of initiatives under the **Stay Well Stay Connected** programme, which targets older people and those with disabilities who are at risk of becoming socially isolated or having poor health and wellbeing outcomes. A few of the sessions they deliver in the North Locality are set out below:

**The Granite City Gathering 2023** was a public health event held on 24 June 2023 at Kings Church, Bridge of Don. The gathering helped people explore how to support themselves and retire positively. The aim and purpose of the gathering was to help people to understand and explore what a good retirement could look like in their own communities and have a real sense of purpose and opportunity to contribute.



167 attendees  
Targeted at those aged 45+  
Aberdeen City Residents  
1 Choir  
6 crafting and art groups  
1 Yoga group  
1 gigong and taichi  
Ballroom dancing  
22 community groups and charities  
4 speakers  
20 volunteers

## **Highlights**

- The gathering focused on people who are planning to retire soon, or have already retired and live in Aberdeen
- The event had a number of taster sessions where people could try new activities such as movement with gigong, Tai chi, Chair based yoga, sing in a choir, have a boogie at the gathering, try out crafting or an art session
- There was an opportunity for delegates to meet representatives of community groups and charities who told them about who they were, and what services they provide
- The speakers ranged from Horseback, UK; to Japanese wellbeing tips 'Ikigai'; to exploring what an Age Friendly Aberdeen could look like.





## Supporting people to make healthy choices

### Health and Wellbeing

**Boogie in the Bar** provides an opportunity for people at risk of social isolation to meet up at a local venue to have a blether and a dance. A monthly Boogie in the Bar is held at Sunnybank Football Club with an average of 40 people attending throughout the year. Work is underway to create a resource for future Boogies so that they share the same ethos. It is important that we learn from the successes of the Boogies so that future sessions are sustainable and meaningful for those who attend.



**Roving Day Care Wee Blether** is a partnership between Care Management, Quarriers and the Wellbeing Team and it aims to deliver an alternative to traditional day care. The group meet on Mondays at Middlefield Community Hub in the North Locality where people can come and enjoy a light lunch alongside some great company and conversations. The *conversation café* element of this can be moved to any location that can cater to a café based activity, for example the group have met at the Aberdeen Art Gallery. Currently, there are around six participants attending and plans are in place to create a further two Wee Blethers in the city.



**Men's Hub at Middlefield Hub** was launched in January 2023 to enable men to socialise over a hot cooked breakfast, which they cook themselves. After breakfast, the men can play different games or just chat. There is a monthly programme where attendees go on visits to venues such as Fettercairn Distillery or Pittodrie Stadium utilising Middlefield Hub's bus. So far, these sessions are regularly attended by 12 men.

**The Health Improvement Fund** supports initiatives that improve the health and wellbeing of people across Aberdeen. During 2022-23, 68 projects received funding, with initiatives ranging from community gardening and lunch clubs to birthing classes and Virtual Reality (VR) training. In a bid to streamline funding opportunities across the City, the Health Improvement Fund linked up with ACVO Community Mental Health and Wellbeing Fund and Aberdeen City COVID Recovery Fund to ensure an additional 14 applications could receive funding. Funded projects are evaluated to measure impact and achievement of the Aberdeen City Health and Social Care Partnership (ACHSCP) priorities. Of the 68 HIF funded projects, 29 were either from bidders based in the North Locality or aimed to support health improvement activities within the North. The Health Improvement Fund received 122 applications, of which 51 were from, or would benefit the North Locality. Evaluation data has found the North Locality submitted the fewest applications for HIF funding across the three locality areas. A good example of how HIF funding was used in the North Locality was the funding allocated to **Friends of Westfield Park** to build a Sensory Garden in Westfield Park. This project has involved the whole community and the Bridge of Don & Districts Men Shed volunteers built wooden plant beds

*"It has been fabulous how many people have helped and become involved. We have even had a local resident filling up our water carriers from his tap."*

**Friends of Westfield Park volunteer**

which have been adopted by Braehead Primary, Scotstown Primary, Bridge of Don Academy, Aberdeen Family Learning and the Bridge of Don Community Council. Aberdeen Action for Disability are growing seeds to share with the project and some of members are also making signs for the beds. The Sensory Garden has been created so all members of the community can have the opportunity to learn about gardening and food growing.



## *Provide activities for children and young people*

### **Community activities for young people**

Through our youth community activity and reducing anti-social behaviour projects we are committed to developing a range of opportunities for children and young people to get involved in their local community and to support a reduction in crime and anti-social behaviour. Last year a youth work community-based activity project, co-designed with children and young people was launched in the Mastrick area. It was set up to cater for children who are too young to take part in the diversionary programme known as the Mastrick Hub. Attendance numbers so far show that the club is popular with the target audience. Nine children participated in the Mastrick Group at the start of 2023 with 42 attendances overall. At the request of the community centre, the group operates a ratio of four children to one member of staff. With a staff complement of three, the group will not exceed 12.

When asked what they liked about the group, attendees said they particularly enjoyed *“doing things with friends and getting to do cooking.”*

The **Northfield Community Centre Youth Group** was started by Community Centre volunteers this year and, owing to its popularity with young people, required additional staff and volunteers. The Project has been supported by the project team through the draft community led youth group model, which includes guidance on health and safety, safeguarding for children and young people, and how to run a youth group. The Northfield group is more informal than the other two youth groups in the city which have a programme of activities decided by the participants themselves. During 2019 there were three registered participants from Northfield taking part in ACC youth work community-based activities, however, by 2022, there were 43. Participants said it was a chance to hang out with friends, make new friends and take part in fun activities.

**The Middlefield Youth Flat and Under 11s** is an initiative to support young people especially those with low confidence, low literacy skills, and additional support needs which are not always picked up in the education system. The project provides positive adult support that meets their needs, challenging their view of the world, understanding the barriers they face and supporting them to overcome these challenges.



## Young People’s Mental Wellbeing

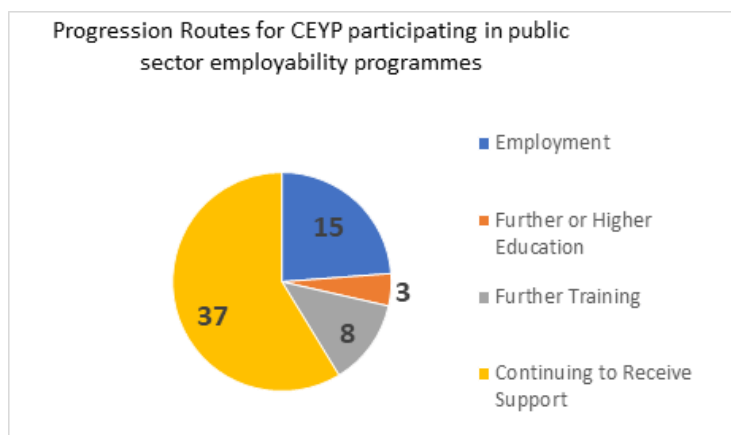
All schools in the North Locality offer counselling, and each school provides free physical activity to enhance the mental wellbeing of children, regardless of circumstances. The Safer Schools app was launched in 2022 with 100% of schools signed up in the North Locality. The app includes features to help



parents and carers navigate challenges such as absence reporting and safeguarding concerns, as well as develop easier channels of communication. All local parents and carers can access the app, which has been promoted widely in school newsletters. Initial feedback from parents has been positive, and formal evaluation data will be available for future reporting periods. We recognise the role physical activity plays in supporting good mental health and through the Active Schools Programme, all North Locality schools provide free physical activity opportunities for pupils.

### Positive Destinations for Care Experienced young people

Positive destinations mean that young people go on to attend further or higher education, a voluntary placement, begin an apprenticeship, or go into paid employment. In 2021-22, 92.6% of North Locality school leavers achieved an initial positive destination which was below the 2020-21 figure of 96.2% and the Aberdeen City average of 93.8%. Care experienced young people (CEYP) often face significant barriers to employment and need additional support and mentoring to help them achieve and sustain employment. We’re committed to supporting CEYP to achieve the same outcomes as their peers and one aspect of this is achieving positive destinations, with the ultimate goal of moving CEYP into paid employment. The journey and support required for each care experienced young person varies and through our employability support for care experienced young people project, we’re testing a variety of ways to support them, including a guaranteed interview scheme, tailored employability support programme, pathway planning and induction into work. A good example of youth volunteering are the Saltire Awards, which is the Scottish Government's way of celebrating, recognising and rewarding the commitment, contribution and achievements of volunteers aged between 12-25 in Scotland. Of the 2459 Saltire Award recipients between December 2021-March 2023 in Aberdeen City, 1155 young people were from the North Locality. This is the highest number by locality area across the City.



### Supporting priority families via fit like hubs

[Fit like? Family Wellbeing Hubs](#) are a group of services working together to support children and young people’s mental wellbeing. The Hubs help with:

- Finance and benefits
- Family relationships and communication
- Coping with daily pressures
- Promoting positive emotional and mental wellbeing
- Talking about traumatic things that have happened

The Fit Like Hub operates out of Manor Park School in the North Locality.

## Training community groups on issues impacting children

The ACHSCP Public Health Team train practitioners to deliver the **PEEP programme**. PEEP recognises that parents and carers are children's first and most important educators.



The Peep Learning Together programme supports parents and carers to:

- Value and build on the home learning environment by making the most of everyday learning opportunities.
- build and strengthen attachment relationships with their child through listening, talking, playing, singing and sharing books together.
- help babies and children to make the most of their opportunities by becoming confident communicators and active learners, ready for school

There were 14 referrals to PEEP from the North Locality during 2022. Six people from the North Locality were also referred by Health Visitors to the Family Learning Service.



## *Supporting those affected by substance use*

### Raise awareness of substance service and provision

Latest Aberdeen City drug related death data shows an increase from 56 to 62 deaths in 2021. The Aberdeen City Alcohol and Drugs Partnership through its fatal drug overdose projects are focused on reducing drug related deaths through innovative developments and by increasing the distribution of naloxone. Naloxone is an emergency medication that can reverse the effects of an overdose of opioids like heroin or methadone and can save someone's life. Reviews from past drug related deaths have shown that many of those people who died were not in any drug treatment service but had come to the attention of many other services. By increasing the number of services who can distribute and administer Naloxone to those in need, we can get the lifesaving drug out to those people at risk of overdose, as well as to family members/friends of those in need. Over the past year, we have widened access to naloxone by increasing the number of non-drug and alcohol services able to supply and/or administer naloxone. We have seen increased supply of Naloxone in each locality, with 120 kits supplied in the North Locality. As well as Naloxone, increasing education and access to a variety of treatments, the Partnership are taking a targeted approach, focusing on interventions and supports required at the various touchpoints. We are seeing the impact of this approach. For example, through our improvements focused on people liberated from prison we have seen a 56% reduction in drug related deaths of people liberated within 6 months.

### Reducing harms from alcohol use

Alcohol is one of five lifestyle behavioural risk factors which contribute to the majority of chronic and non-communicable disease in our population. Throughout 2022/23 we've focused on increasing awareness of alcohol risks and widening access to alcohol interventions and support, including the development of a new alcohol audit screening tool. As a result of the interventions and targeted campaigns we've seen the number of active clients with Alcohol and Drugs Action (ADA) Duty Drop-in service in 2022/23 increase in each of the three priority neighbourhoods against the 3-year baseline. In the North Locality, data shows a 59% increase in clients from AB16 postcodes. Other interventions ADA have taken during 2022-23 include:




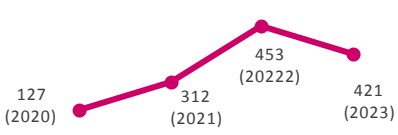





- The piloting of a new referral pathway from Police to ADA
- Widening the number of settings for Alcohol Brief Interventions, including HMP Grampian
- Targeted social media campaign and subsequent levels of engagement with the 'Alcohol Aberdeen' online 'quiz'






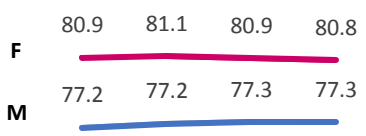
## Suicide Prevention

Suicide is more prevalent in middle-aged white males from deprived areas. However, being male, white, middle-aged, and living in a deprived area are not precursors to suicide. Trauma or events that lead up to suicide are more likely to occur in that demographic and this group are less likely to seek help in those circumstances.

In an effort to fully understand what are the leading contributing factors in deaths by suicide in the North East, Police Scotland analysed all Death Reports since the start of 2021 and tracked all contributing factors that were highlighted in the reports including medical and family history, and events leading up to the person's death. These were not geography or locality specific. The circumstances behind suicides are constantly changing, research is ongoing to keep abreast of these changes and to adapt training, information and resources accordingly in Aberdeen City and across the wider North East. The rate of death from suicide in the North Locality of 12.6 per 100,000 is above the citywide average of 11.1 per 100,000 of the population. This is the highest amongst the city's three locality areas.

### WHAT IMPACT HAVE WE HAD DURING 2022/23?

|   |   |   |
|---|---|---|
| <p><b>Activities for Young People</b></p>  <p><b>43 young people</b> from Northfield were involved in community based youth work activities in 2022, a <b>93% increase</b> from 2019.</p> | <p><b>Positive destinations</b></p>  <p><b>92.6%</b> of North Locality school leavers achieved an initial positive destination. The citywide average was 93.8%.</p>   | <p><b>Young People Confidence</b></p>  <p><b>41%</b> of S1-S6 pupils reporting feeling confident compared to 35% last year.</p>   |
| <p><b>Young People Mental Health</b></p>  <p>No. of referrals each month to NHSG's children and adolescent mental health services increasing</p>   | <p><b>Counselling for Young People</b></p>  <p><b>100%</b> of schools in North Locality offer counselling and Active School activities</p>   | <p><b>Working Together with Parents</b></p>  <p><b>14 referrals</b> were made to the Parents as Early Education Partners (PEEP) programme from the North Locality in 2022</p>  |
| <p><b>Young People Volunteering</b></p>  <p><b>1155</b> young people from the North Locality received a Saltire Award during 2022. The highest per locality in Aberdeen City.</p>        | <p><b>Healthy Eating</b></p>  <p><b>11.9%</b> of people in the North Locality said they were unable to eat healthy and nutritious food due to poverty, compared to <b>12.5%</b> living in priority neighbourhoods. <b>19.8%</b> of people living in the locality said they ate only a few types of food. (City Voice 46, 2022)</p> | <p><b>Unpaid Carers</b></p>  <p><b>359 unpaid carers</b> were supported in the North Locality by Quarriers Adult Carer Support Service during 2022-23, this is an increase of <b>79.5%</b> on 200 unpaid carers supported last year.</p> |

|  |  |   |  |      |      |          |      |      |          |      |      |
|--|--|---|--|------|------|----------|------|------|----------|------|------|
| <p><b>Alcohol Awareness</b></p>  <p>20.3% of people in the North Locality said they didn't know how many units are in the alcoholic drinks they consume. 48.4% of people living in the North said they didn't think about units at all. (City Voice 46, 2022)</p> | <p><b>Drug Related Deaths</b></p>  <p>120 naloxone kits were supplied in the North Locality in 2022.</p>  | <p><b>Drug Related Hospital Stays</b></p>  <p>The rate of drug related hospital stays for the North Locality in 2022 was <b>175.2 per 100,000</b>. This has improved from 193 per 100,000 of the population in 2021.</p>   |  |      |      |          |      |      |          |      |      |
| <p><b>Alcohol Related Mortality Rates</b></p>  <p>Alcohol related mortality rates in North Locality in 2022 are <b>15.54 per 100,000</b>. This has improved since 2018 when the rate was 16.86 per 100,000 of the population.</p>                                 | <p><b>Deaths from Suicide</b></p>  <p>The rates of death from suicide in the North Locality is <b>12.6 per 100,000</b>, this is above the citywide average of 11.1 per 100,000 of the population.</p> | <p><b>Life Expectancy</b></p>  <table border="1"> <tr> <td></td> <td>2018</td> <td>2022</td> </tr> <tr> <td><b>F</b></td> <td>80.9</td> <td>80.8</td> </tr> <tr> <td><b>M</b></td> <td>77.2</td> <td>77.3</td> </tr> </table> <p>Has stayed stable in the North Locality since 2018 for males and females. But it is lower in priority neighbourhoods at 78.3 (F) and 75.4 (M)</p> |  | 2018 | 2022 | <b>F</b> | 80.9 | 80.8 | <b>M</b> | 77.2 | 77.3 |
|  | 2018   | 2022  |  |      |      |          |      |      |          |      |      |
| <b>F</b>   | 80.9   | 80.8  |  |      |      |          |      |      |          |      |      |
| <b>M</b>   | 77.2   | 77.3  |  |      |      |          |      |      |          |      |      |

## AREAS FOR IMPROVEMENT 2023/24

- Increase the number of people volunteering in the North Locality
- Increase the number of successful Health Improvement Fund applications from the North Locality to tackle health inequalities
- Increase the number of priority families and community groups we work with through programmes such as PEEP and Health Issues in the Community
- Renewed focus on increasing community capacity and capability building
- Scale up Stay Well Stay Connected programme



# Our Place

## OUR PRIORITIES

The North Locality Plan 2021-26 sets out one priority to improve our local place:

### Priority 6. Maximise use of disused outdoor space to increase food growing Opportunities

#### WHAT PROGRESS HAVE WE MADE DURING 2022/23?

## Supporting greenspace development

Friends of Westfield Park received funding from the Health Improvement Fund to build a Sensory Garden in Westfield Park. This project has involved the whole community. The Bridge of Don & Districts Men Shed built wooden plant beds which have been adopted by Braehead Primary, Scotstown Primary, Bridge of Don Academy, Aberdeen Family Learning and the Bridge of Don Community Council. Aberdeen Action for Disability are growing seeds to share with the project and some of members are also making signs for the beds. The Sensory Garden has been created so all members of the community can have the opportunity to learn about gardening and food growing.

*"It has been fabulous how many people have helped and become involved. We have even had a local resident filling up our water carriers from his tap."*



## Encourage healthy outdoor activities




### Promote and improve accessible, active travel

In 2023, Aberdeen City Council, in partnership with Big Issue eBikes launched an electric bike hire scheme. [Big Issue E-Bikes](#) are available in 40 locations across Aberdeen and aim to make shorter journeys easier and affordable. The scheme also hopes to have a positive impact on our environment.

The City Voice survey found that 11.8% of people in the North Locality regularly cycled compared to the citywide average of 14.8%. People in the North Locality are least likely to cycle regularly (vs people living in the South and Central Localities).



## WHAT IMPACT HAVE WE HAD DURING 2022/23?

| Satisfaction with Green Space  | Community Growing Spaces   | Cycling   |
|--|--|---|
|  <p><b>66.5%</b> of North Locality respondents to the City Voice survey reported being satisfied or fairly satisfied with the overall quality of green/open spaces, compared to <b>64.7%</b> of people living in Middlefield, Mastrick, Cummings Park, Heathryfold and Northfield (City Voice 46, 2022)</p> |  <p><b>19</b> food growing projects happening across the North Locality</p> |  <p><b>11.8%</b> of people in the North cycled in the last year compared to the citywide average of <b>14.8%</b> (City Voice 46, 2022)</p> |

## AREAS FOR IMPROVEMENT 2023/24

- Increase community food growing in schools, communities and workplaces.
- Renewed focus on promoting active and accessible travel



*Working Together*

## Community Empowerment Strategy

Community Planning Aberdeen is committed to working with communities to improve outcomes across each locality and indeed the City as a whole. In 2022 we launched a new Community Empowerment Strategy setting out our vision for all communities to be equal community planning partners. A number of improvement projects are now underway to strengthen community participation in community planning and ensure they have a voice and ability to influence what happens to them and their community.



This year, we have been pleased to see the return of in-person community-based events, including two citywide events, the Community Gathering and the Granite City Gathering.



These events provided a great chance to bring our community and partners together, make connections, and share learning and opportunities. Both events were open to people across the City and were an exhibition of community information and provided a chance for attendees to wander around the stalls and learn about the different opportunities to get involved in their local community. There were 25 stall holders on the day showcasing the work they do in local communities and approximately 121 people attended the gathering. Of the registered attendees, 24.3% were from the North Locality. You can read the Community Gathering report for more information [here](#).

In addition to our citywide events, the North Locality Empowerment Group (LEG) restarted on 31 May 2023, having not met since early 2022. Meetings are now held on a two monthly cycle and alternate between virtual meetings and in person meetings at a community venue. Meetings provide an opportunity for LEG members to influence and shape delivery of the North Locality Plan and hold Community Planning Partners to account. LEGs also provide the Locality Planning Team and Outcome Improvement project managers an opportunity to involve community members in their projects and gain valuable feedback. The Middlefield, Mastrick, Cummings Park, Heathryfold and Northfield Priority Neighbourhood Partnership has continued to meet throughout 2022-23.



## *Find out more & Get Involved!*

The [North Locality Empowerment Group](#) and the [Cummings Park, Heathryfold, Northfield, Mastrick and Middlefield Priority Neighbourhood Partnership](#) are two of the main ways we connect with our local communities in the North Locality. As a member of a LEG and Torry Partnership you will be able to provide a voice on behalf of the people and communities across your neighbourhood.



## What's in it for you?



Influence what happens in your community



Help make a brighter future for all



Connect with others



Participation can lead to credits for the Saltire Award (young people, age 12-25)

Following a recent training session provided by SCDC in partnership with ACC/AHSCP, the community had this to say about community engagement:

*"Talk to us and talk to us early. Don't make decisions and then get it approved by us. Communities have knowledge and skills to know what's best for us. We're the local experts about our places"*

*"Community Engagement is where people grow"*

If you are interested in getting involved in helping achieve these aims in your local community, follow this link to find out more: [Our Communities - Community Planning Aberdeen](#) or email [localityplanning@aberdeencity.gov.uk](mailto:localityplanning@aberdeencity.gov.uk).



## Meet your Locality Planning Team

We understand the importance of working with communities to build a thriving environment for everyone. By engaging with local communities through our dedicated locality planning team, we aim to become more receptive, supportive and action-oriented. Community input is extremely valuable to this work.

The Locality Planning Team includes staff from Aberdeen City Council and the Aberdeen City Health and Social Care partnership working together to support improved outcome across all our localities and neighbourhoods. In the North Locality your locality planning contacts are Iain, Jade, Katie, and Kev.



Iain Robertson,  
Transformation Programme  
Manager, Aberdeen City Health and  
Social Care Partnership



Jade Leyden,  
Community Development Manager,  
Aberdeen City Council



Kev Donald, Community  
Development Officer, Aberdeen City  
Council



Katie Cunningham,  
Public Health Coordinator, ACHSCP

Please take a moment to complete this [survey](#) and let us know how we can enhance our service delivery and collaboration with you. Together we can make a positive impact and create a place where all people can prosper.

# Aberdeen City - South Locality

## Annual Outcome Improvement Report 2022-23



### South Locality Neighbourhoods:

Culter; Cults, Bieldside, Milltimber & Countesswells; Hazlehead; Braeside, Mannofield, Broomhill, Seafield; Garthdee; Ferryhill; Torry; Cove; Kincorth, Leggart & Nigg



Community Planning  
Aberdeen



# WELCOME

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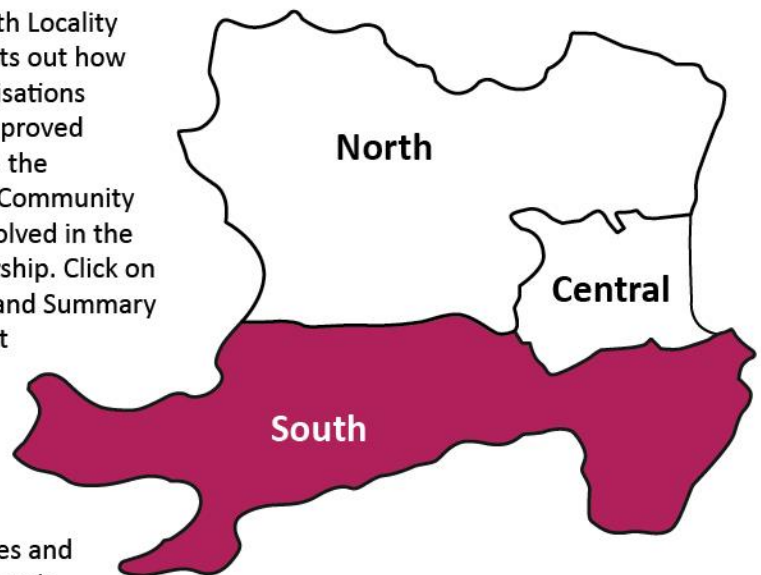
Welcome to our second annual report against the South Locality Plan first published in 2021. The South Locality Plan sets out how Community Planning Aberdeen and its member organisations will work together and with communities to deliver improved outcomes for the 9 neighbourhoods in the locality and the locality as a whole. The Locality Plan was prepared by Community Planning Aberdeen staff and community members involved in the South Locality Empowerment Group and Torry Partnership. Click on the links to view a copy of the full South Locality Plan and Summary Locality Plan. Also see the end of this report to find out more about the organisations and community groups involved in preparing the plan.

This report provides an update on progress made against the priorities that were identified in the South Locality Plan. It includes information about key activities and initiatives and also the impact that these have in the South Locality and in target neighbourhoods. The information and data within the report demonstrates success in many areas. However, we also recognise where we need to do better and have identified priorities for improvement next year.

Our focus is always on impact on outcomes for communities. Central to our approach is involving and empowering communities which we have made clear in our new Community Empowerment Strategy published in 2022. Behind the scenes, Community Planning Aberdeen has also made some changes to ensure member organisations are working better together to empower communities. Our new locality planning team has been in place since February 2023 and epitomises our renewed vigour for working together with local communities. This report provides an important baseline for how we are currently performing in the South Locality and a commitment to improving going forward.

This report is split into the following sections:

|                                       |                         |
|---------------------------------------|-------------------------|
| <a href="#">Our Economy</a>           | <a href="#">page 3</a>  |
| <a href="#">Our People</a>            | <a href="#">page 7</a>  |
| <a href="#">Our Place</a>             | <a href="#">page 15</a> |
| <a href="#">Community Empowerment</a> | <a href="#">page 18</a> |



## OUR PRIORITIES

The South Locality Plan 2021-26 sets out three priorities to improve our local economy:

**Priority 1. Reduce number of people living in poverty**

**Priority 2. Improve and create employment opportunities.**

**Priority 3. Identify and embed opportunities to mitigate digital exclusion**

## PROGRESS MADE DURING 2022/23



### *Supporting our most vulnerable families*

#### **Community food provision and community pantries**

With food prices rising at the fastest rate in 40 years we have been working with CFine to increase access to affordable food across the locality, particularly for our most vulnerable communities and low-income families. Through our community food pantry project, we have focused on increasing access to affordable food in our priority neighbourhoods which includes Torry and Kincorth in the South Locality. Recognising the challenges people can face attending one of our fixed food pantries, a mobile food pantry was launched in September 2021. CFine has 284 members of the South Locality shopping at the pantry at Poynerook Rd on a regular basis. The mobile food pantry also had 350 visits from residents of the South locality during 2022-23.

#### ***Affordable Food Providers in the South***

[CFine](#) operates a mobile food pantry on Wednesdays at:  
-Kincorth Sports Centre from 10-10.30am  
-Abbey Road, Torry from 11.30 to 12pm

[Touch of Love](#) is one of several [Food Banks](#) available to people experiencing food insecurity across the South.

#### **Benefit uptake**

Ensuring that household income is maximised through the uptake of unclaimed benefits is a key aspect to supporting households to come out of poverty and improve their financial security. There continues to be barriers which can mean people do not claim benefits they are entitled to, such as stigma of claiming, unaware of what they are entitled to, and onerous applications processes.

We have made progress with several initiatives to help remove these barriers. For example, we launched the online benefit calculator last year to help support more people to find out what benefits they are entitled to. This has been accessed 7274 times across the city during 2022/23, with 737 of those being from the Torry and Kincorth priority neighbourhoods. We have also taken action to identify households who should be entitled to Pension Credits and have contacted them directly by letter. Using this approach 410 households were identified from across the City who qualified for Pension Credits, this includes 28 people in the South Locality that have benefited from an uplift in their Pension Credits. Finally, a booklet for families was developed to increase awareness and uptake of child benefits such as, Education Maintenance Allowance and School Clothing Grants. The booklet targeted families and provided guidance on how to claim. Across the City 2749 families benefited financially by accessing additional benefits with 890 families in South Locality benefitting financially by accessing additional benefits.

## Fuel poverty/ affordable heating

As the cost of living increases it is important that we work together to do everything we can to support every household in Aberdeen. We have been working together with partner organisations across Aberdeen to provide a range of public warm spaces that will provide an opportunity for people to come together, share and use resources. Every warm space is unique however all warm spaces offer a friendly welcome and comfortable environment to meet friends or socialise. There are 14 warm spaces across the South Locality but of course people are free to visit any warm space across the City. You can find your nearest warm space by visiting [here](#).

As well as providing warm spaces we have been increasing awareness of the support available to households during the at a variety of community events and training frontline staff. As a result of the promotion of support available and increase in home visits to deliver insulation and energy efficiency measure, a total of £32,725.77 fuel bill savings was made last year across the South Locality.



## *Supporting businesses and young people into employment*

### Social Enterprises and small businesses

Local community start-ups benefit everyone. Not only do they help get people back into employment, but they also create new jobs and bring new money into the community. We are delighted to have secured local community support for people wishing to start their own business. Through Business Gateway we now have a Community Business Advisor attending the Old Torry Community Centre to provide a monthly drop-in service. Over the last 12 months the service has attracted an average of 2 attendees per drop in which has resulted in 5 people starting their own business.



### Local employability support and job opportunities

Supporting people into employment is a top priority for the locality. Over the year we have delivered a range of employability support events targeted at people who face barriers and challenges. For example, we have delivered sessions for people over 50, people with a disability and people living in our priority neighbourhood Torry.

Through our ABZ works initiative, partners Aberdeen City Council, Skills Development Scotland, DWP and Business Gateway have also delivered 'Your Route to Work' sessions aimed at young people living in priority neighbourhoods that are disengaged from school, school leavers, work returners and their wider families to find out information on how to get into employment, training, education or volunteering as well as provide money and benefit advice. There were 42 attendees at the Torry event. Exit surveys were completed with a small number of event attendees. Everyone who attended and provided feedback felt the event was useful or very useful and all would be likely to visit a future event.



Further support for people over 50 years of age was provided through dedicated 50+ work coaches; a 50+ pilot in Torry; and the launch of an employer recruitment incentive scheme. The outcomes of which, will be reported to the Older but Wiser employability support group. The pilot support group ran over an 8-week period and was well received with 7 participants consistently attending the 8 weeks. Travel vouchers were provided to support the participants attend several careers fairs which occurred over the 8-week period and one participant was able to secure a job at one of these events. As a result of the supports above, 10 people have gained employment.



The Torry Skills centre, ideally situated in the heart of the community on Victoria Road, has now been open a full year. Community partner Pathways has delivered 43 group sessions at the centre and over 350 one-to-one sessions to provide people with assistance to find the job they want. There have been 34 referrals since April 2022 to March 2023 from the Torry area alone and of these, 31 clients have been assisted into sustainable employment. The Foyer has also delivered 85 one-to one sessions at the Torry Skills Centre over the same period and 12 group sessions.






## Supporting digital access and skills




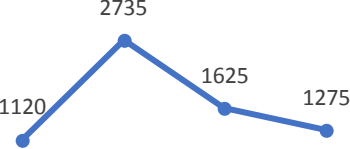
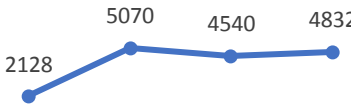

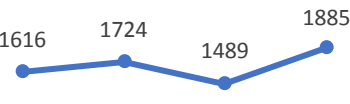


### Digital Access

Through our digital improvement project, we have seen positive outcomes for both digital access and skills. This work included the promotion of existing access and new access to digital devices, such as library computers, council digital resources, and universities. In addition to this, Silver City Surfers continue to offer face to face tuition for over 55's in the City helping them to become more comfortable using digital tools, offering support to community members at the Central Library.

**78.3%** of City Voice respondents in the South Locality reported they had at least basic digital skills.

## WHAT IMPACT HAVE WE HAD DURING 2022/23?

| Tackling Poverty  |   |   |
|---|---|---|
| Food Insecurity   | Food Poverty  | Affordable Food   |
|  <p><b>7.2%</b> of people in the South Locality worried they would not have enough to eat compared to <b>22.2%</b> of people living in Torry and Kincorth.<br/>(City Voice 46, 2022)</p> |  <p><b>1.7%</b> of households in the South Locality ran out of food compared to <b>11.1%</b> of households in Torry and Kincorth<br/>(City Voice 46, 2022)</p> |  <p><b>634</b> families in the South Locality accessing <b>affordable food</b> at their local community pantry (mobile and located in Torry)</p> |

|  |   |   |
|--|---|---|
| <p><b>Fuel Insecurity</b></p>  <p><b>28.3%</b> of people in the South Locality worried they would not be able to heat their home compared to <b>55.6%</b> of people living in Torry and Kincorth. (City Voice 46, 2022)</p> | <p><b>Fuel Poverty</b></p>  <p><b>5.6%</b> of households in the South Locality have had to seek support for paying for heating, compared to <b>11.1%</b> of households in Torry and Kincorth (City Voice 46, 2022)</p> | <p><b>Fuel Bill Savings</b></p>  <p><b>£32,725.77</b> fuel bill savings made across the South Locality through energy efficiency measures and support such as provision of warm spaces</p> |
| <p><b>Claimant Count</b></p>  <p>Has decreased after a spike in 2021. 52% of claimants live in south locality priority neighbourhoods</p>   | <p><b>People on Universal Credit</b></p>  <p>Has increased in the south locality since 2020. 50% of claimants live in priority neighbourhoods</p>  | <p><b>Benefit Maximisation</b></p>  <p>The online benefit calculator has been accessed <b>737</b> times by people from Central priority neighbourhoods</p>                                 |
| <p><b>Children in low income families</b></p>  <p>Child poverty has increased in the south locality since 2019. 55% of children in low income families live in priority neighbourhoods</p>                                  | <p><b>Business Start Ups</b></p>  <p>5 people in Torry supported to start their own business.</p>  | <p><b>Digital Access and Skills</b></p>  <p><b>78.3%</b> of City Voice respondents in the South Locality reported they had at least basic digital skills.</p>                              |

### AREAS FOR IMPROVEMENT IN 2023/24

- Strengthen relationships with local businesses as part of their Corporate Social Responsibility
- Encourage more people to start their own business and promoting local business gateway services across the wider locality
- Ensure support extends to Priority Neighbourhood Kincorth as well as Torry



## OUR PRIORITIES

South Locality Plan 2021-26 sets out two priorities to improve outcomes for our people

**Priority 4. Support children and young people to achieve their potential**

**Priority 5. Focus on early intervention, prevention and re-enablement actions**

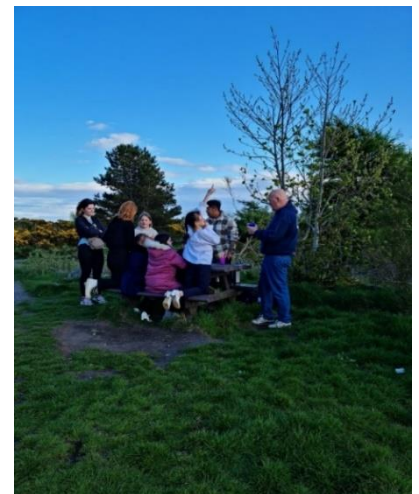
## PROGRESS MADE DURING 2022/23



### *Providing activities for Children and Young People*

#### Opportunities and activities

Through our youth community activity and reducing anti-social behaviour projects we are committed to developing a range of opportunities for children and young people to get involved in their local community and to support a reduction in crime and anti-social behaviour. There was a need identified in Kincorth to tackle anti-social behaviour with 282 calls in 2021. In response to this, young people, and local people in Kincorth co-designed a community-based activities group based in Kincorth Community Centre. This was chosen as it has a games hall, classrooms, kitchen, and a coffee bar, all of which widen the scope of what can be offered and the facility had to be attractive to the target audience. The Group meets weekly from 6.15pm to 8pm. The new group was highly successful, attracting 34 young people from Kincorth attending between March - December 2022. The group has also helped reduce the number of calls relating to antisocial behaviour in Kincorth area, which decreased from 282 calls in 2021 to 238 calls in 2022. The change idea of establishing co-designed youth groups in target areas has been successful.



*“we get to make friends; it’s very fun; you get to do art, sports, games and make food.” Kincorth Young person*

We have also been working with children and young people in Torry and Ferryhill to address deliberate fire-raising which accounts for 10% of all incidents attended by the Scottish Fire and Rescue Service (SFRS) in Aberdeen. Activities have included engagement with local young people, delivery of Fire Skills courses, media campaigns and a Virtual Community Fire Safety Programme for schools and youth groups. A leaflet for parents and carers with guidance on how to talk to young people about the dangers of playing with fire has also been produced. Changes were tested initially in Torry and Ferryhill as this was the area where most incidents had occurred between 2015-19. As a result, data for the area shows there has been approximately a 50% reduction in deliberate fires when compared to the 2015-19 average.



## Supporting vulnerable children and young people

### Young People’s Mental Wellbeing

All schools in the South Locality offer counselling, and each provides free physical activity to enhance the mental wellbeing of children, regardless of circumstances. The Safer Schools app was launched during 2022 with 100% sign up by South Locality schools. The app includes features to help parents and carers navigate challenges such as absence reporting and safeguarding concerns, as well as develop easier channels of communication. All local parents and carers can access the app, which has been promoted widely in school newsletters. Initial feedback from parents has been positive, and formal evaluation data will be available for future reporting periods. We recognise the role physical activity plays in supporting good mental health and through the Active Schools Programme, all South Locality schools now provides free physical activity opportunities for pupils.

### Training community groups on issues impacting children

The ACHSCP Public Health Team train practitioners to deliver the PEEP (Parents as Early Education Partners) programme. PEEP recognises that parents and carers are children's first and most important educators.

The Peep Learning Together programme supports parents and carers to:

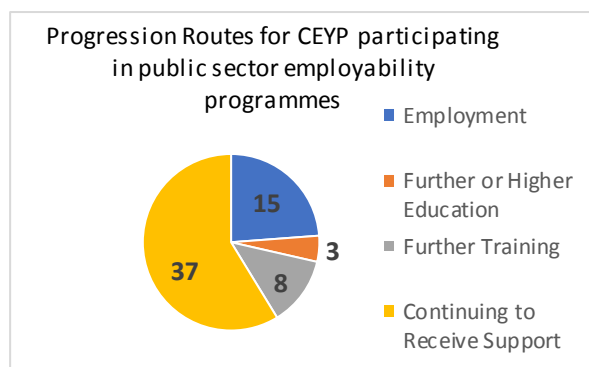
- Value and build on the home learning environment by making the most of everyday learning opportunities.
- build and strengthen attachment relationships with their child through listening, talking, playing, singing and sharing books together.
- help babies and children to make the most of their opportunities by becoming confident communicators and active learners, ready for school



There were 30 referrals to PEEP from the South Locality during 2022, in addition five people from the South Locality were referred by Health Visitors to the Family Learning Service.

### Positive Destinations for Care Experienced young people

Positive destinations means that young people go on to attend further or higher education, volunteer, begin an apprenticeship or go into paid employment. In 2021-22, 90.5% of South Locality school leavers achieved an initial positive destination which was below the 2020-21 figure (92.9%) and the Aberdeen City average (93.8%). Care experienced young people (CEYP) often face significant barriers to employment and need additional support and mentoring to help them achieve and sustain employment. We are committed to supporting CEYP achieving the same outcomes as their peers and one aspect of this is achieving positive destinations, with the ultimate goal of moving CEYP into employment. The journey and support required for each care experienced young person varies and through our



employability support for care experienced young people project, we are testing a variety of ways to support them such as a guaranteed interview scheme, tailored employability support programme, pathway planning and induction into work. A good example of volunteering is the Saltire Awards, which is the Scottish Government's way of celebrating, recognising and rewarding the commitment, contribution and achievements of volunteers aged between 12-25 in Scotland. Of the 2459 Saltire Award recipients between December 2021 to March 2023 in Aberdeen City, 763 young people were from the South Locality.

### **Supporting priority families via Fit Like hubs**

[Fit like? Family Wellbeing Hubs](#) are a group of services working together to support children and young people's mental wellbeing. The Hubs help with:

- Finance and benefits
- Family relationships and communication
- Coping with daily pressures
- Promoting positive emotional and mental wellbeing
- Talking about traumatic things that have happened

There is a Fit Like Hub based in Tullos Community Centre in the South Locality.

## **Providing additional support to existing services**

### **Volunteering in the Community**



We have continued to build our volunteering community across the City that was so crucial during the covid-19 pandemic. Between December 2021 and March 2023, we saw a 17.4% in volunteer opportunities being advertised across the City on the volunteer hub run by ACVO. Volunteering across the South Locality is invaluable in supporting stretched public services. For example, through the Fairer Aberdeen Fund 739 volunteers contributed 114,280 hours of volunteering with a value of over £2m. Over 45,000 people were involved or benefitted from the 36 funded initiatives within the programme and 21 of the Fairer Aberdeen Fund projects benefited the South Locality. Another project to

support volunteering is Station House Media Unit (SHMU's) community project to support prisoners in HMP Grampian, offering them post-release support and engaging them in opportunities at SHMU upon release. including employability, volunteering, and meaningful activity.

### **Support for unpaid carers**

In 2023, Aberdeen City Health and Social Partnership published the new Carers Strategy which acknowledges the huge contribution that Carers make and seeks to support all unpaid Carers in Aberdeen City. During the development of the new strategy there were several key inputs including; the National Carers Inquiry, publication of the National Carers Strategy from Scottish Government, the dedicated work and support of the Carers Strategy Implementation Group and most importantly the wider consultation and engagement of Carers across the City.

The new Carers Strategy identifies four key priorities to support Carers:

- Identifying as a Carer and the first steps to support
- Accessing advice and support
- Supporting future planning, decision making, and wider Carer involvement
- Community support and advice for Carers

In 2022-23, 239 carers accessed the Quarriers Adult Carer Support Service in the South Locality which is an increase of 42.3% on the 168 carers who accessed the service in 2021-22.

Since the Respite Bureau started in June 2022, 320 people have been referred for a short break as of March 2023. Three further tests promoting several types of carer breaks were also tested this year, Doorstep Breaks, Scot Spirit and Time to Live. Data from these tests will be evaluated and shared for future learning. More information on the Carers Strategy and how carers can access services and support can be found [here](#)

### **Raise awareness of substance service and provision**

Latest drug related death data shows an increase from 56 to 62 in 2021. The Partnership through our fatal drug overdose projects is focused on reducing drug related deaths through innovative developments and by increasing the distribution of naloxone. Naloxone is an emergency medication that can reverse the effects of an overdose of opioids like heroin or methadone and can save someone's life. Reviews from past drug related deaths have shown that many of those people who died were not in any drug treatment service but had come to the attention of many other services. By increasing the number of services who can distribute and administer Naloxone to those in need, we can get the lifesaving drug out to those people at risk of overdose, as well as to family members/friends of those in need. During this year, we have widened access to naloxone by increasing the number of non-drug and alcohol service able to supply and/or administer naloxone. We have seen increased supply of naloxone in each locality, with 135 kits supplied in the South Locality. As well as naloxone, increasing education and access to a variety of treatments, the Partnership are taking a targeted approach, focusing on interventions and supports required at the various touchpoints. We are seeing the impact of this approach. For example, through our improvements focused on people liberated from prison we have seen a 56% reduction in drug related deaths of people liberated within 6 months.

### **Reducing harms from alcohol use**

Alcohol is one of five lifestyle behavioural risk factors which contribute to the majority of chronic and non-communicable disease in our population. Throughout 2022/23 we have focused on increasing awareness of alcohol risks and widening access to alcohol interventions and support, including the development of a new alcohol audit screening tool to increase referrals for support both from professionals and individuals directly with a corresponding promotional campaign. As a result of the interventions and targeted campaigns we have seen the number of active clients with Alcohol and Drugs Action (ADA) Duty Drop-in service in 2022/23 increase in each of the three priority neighbourhoods against the 3-year baseline. In the South Locality, data shows a 35% increase in clients from AB11 postcodes. Other interventions ADA have taken during 2022-23 include:

- The piloting of a new referral pathway from Police to ADA
- Widening the number of settings for Alcohol Brief Interventions, including HMP Grampian
- Targeted social media campaign and subsequent levels of engagement with the 'Alcohol Aberdeen' online 'quiz'





## Supporting people to make healthy choices

### Health and Wellbeing

ACHSCP's Wellbeing Team deliver several initiatives targeting key target groups such as older people and those with disabilities who are at risk of becoming socially isolated or suffer from poor health outcomes. All the activities and initiatives outlined below support people in the South Locality to make better health and weight management choices.



**Boogie in the Bar** provides an opportunity for people at risk of social isolation to meet up at a local venue to have a blether and a dance. Monthly Boogie in the Bars are held in the Foundry Bar and Abbott Bar with an average of 65 people attending throughout the year.

Work is underway to create a resource for future Boogies so that they share the same ethos. It is important that we learn from the successes of the Boogies so that future sessions are sustainable and meaningful for those who attend.

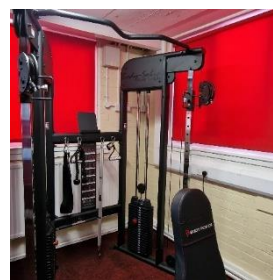


**Soup and Sarnie Sessions** are now up and running across the city. These sessions are run in partnership with CFINE, The Wellbeing Team, AFCCT and the centre in which the sessions are hosted. Torry Soup and Sarnies begun in May 2023 out of the Old Torry Community Centre and after two sessions, interest and uptake has been very positive.

**The Health Improvement Fund** supports initiatives that improve the health and wellbeing of people across Aberdeen. During 2022-23, 68 projects received funding, with initiatives ranging from community gardening and lunch clubs to birthing classes and Virtual Reality (VR) training. In a bid to streamline funding opportunities across the City, the Health Improvement Fund linked up with ACVO Community Mental Health and Wellbeing Fund and Aberdeen City COVID Recovery Fund to ensure an additional 14 applications could receive funding. Funded projects are evaluated to measure impact and achievement of the Aberdeen City Health and Social Care Partnership (ACHSCP) priorities.

Of the 68 HIF funded projects, 34 were either from bidders based in the South Locality or aimed to support health improvement activities within the South. The Health Improvement Fund received 122 applications, of which 52 were from, or would benefit the South Locality.

An example of HIF funding being used successfully in the South Locality was at Inchgarth Community Centre who recognised the importance of people being able to access physical activity opportunities without a cost barrier. Health Improvement Funding covering the cost of 100 annual gym memberships was awarded to Inchgarth providing free access to the Inchgarth fitness gym for people who are unemployed, in receipt of benefits, the elderly, on low incomes, and young people who wish to access the fitness gym under supervision. Those joining the gym are given an induction to ensure they know how to use the equipment and are encouraged to attend other activities/groups that are on offer at the Community Centre.



## Upskilling communities' knowledge of health and wellbeing services

The Stay Well Stay Connected – Granite City Gathering 2023 was a public health event held on 24 June at Kings Church Bridge of Don. The gathering helped people explore how to support themselves and retire positively. The aim and purpose of the gathering was to help people to understand and explore what a good retirement could look like in their own communities and have a real sense of purpose and opportunity to contribute.



167 attendees  
Targeted at 45+  
Aberdeen City Residents  
1 Choir  
6 crafting and art groups  
1 Yoga group  
1 gigong and taichi  
Ballroom dancing  
22 community groups and charities  
4 speakers  
20 volunteers

- The gathering focused on people who are planning to retire soon, or have already retired and live in Aberdeen
- The event had a number of taster sessions where people could try new activities such as movement with gigong, Tai chi, chair based yoga, sing in a choir, have a boogie at the gathering, try out crafting or an art session
- There was an opportunity for delegates to meet representatives of community groups and charities who told them about who they were and what services they provide
- The speakers ranged from - Jock at Horseback, UK; to Japanese wellbeing tips 'Ikigai'; to exploring what an Age Friendly Aberdeen could look like.




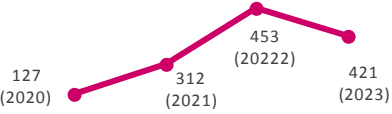










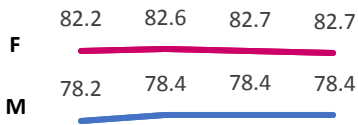
## Suicide Prevention

Suicide is more prevalent in middle-aged white males from deprived areas. However, being male, white, middle-aged, and living in a deprived area are not precursors to suicide. Trauma or events that lead up to suicide are more likely to occur in that demographic and this group is less likely to seek help in such circumstances.

To fully understand what the leading contributing factors in deaths by suicide were in the North East, Police Scotland analysed all Death Reports since the start of 2021 and tracked all contributing factors that were highlighted in the reports including medical and family history and the events leading up to the person's death. These were not geography or locality specific. The circumstances behind suicides are constantly changing and research is ongoing to keep abreast of these changes and to adapt training, information and resources accordingly in Aberdeen City and across the wider North East. The rate of death from suicide in the South Locality of 10.4 per 100,00 is below the citywide average of 11.1 per 100,000 of the population. This is the lowest amongst the city's three locality areas.



## WHAT IMPACT HAVE WE HAD IN 2022/23?

|  |  |  |
|--|--|--|
| <p><b>Youth Anti-Social Behaviour</b></p>  <p>238 anti-social behaviour calls were received in Kincorth during 2022, this is <b>down 15.6%</b> from 2021</p>  | <p><b>Positive destinations</b></p>  <p><b>90.5%</b> of South Locality school leavers achieved an initial positive destination. The citywide average was 93.8%.</p>   | <p><b>Young People Confidence</b></p>  <p><b>41%</b> of S1-S6 pupils report feeling confident compared to 35% last year.</p>  |
| <p><b>Young People Mental Health</b></p>  <p>No. of referrals each month to NHSG's children and adolescent mental health services increasing</p>  | <p><b>Counselling for Young People</b></p>  <p><b>100%</b> of schools in South Locality offer counselling and Active School activities</p>  | <p><b>Working Together with Parents</b></p>  <p><b>30 referrals</b> were made to the Parents as Early Education Partners (PEEP) programme from the South Locality in 2022</p>                                       |
| <p><b>Young People Volunteering</b></p>  <p><b>763</b> young people from the South Locality received a Saltire Award during 2022.</p>   | <p><b>Healthy Eating</b></p>  <p><b>10.1%</b> of people in the South Locality said they were unable to eat healthy and nutritious food due to poverty compared to <b>16.7%</b> people in Torry and Kincorth. 17.5% of people living in the locality said they ate only a few types of food. (City Voice 46, 2022)</p> | <p><b>Community Empowerment</b></p>  <p>167 people attended the Stay Well Stay Connected – Granite City Gathering to explore ways older people can support themselves in the community and retire positively.</p>   |
| <p><b>Alcohol Awareness</b></p>  <p><b>22.9%</b> of people in the South Locality said they didn't know how many units are in the alcoholic drinks they consume <b>32.4%</b> of people living in the South said they didn't think about units at all. Compared to 30% and 43.3% in Torry and Kincorth. (City Voice 46, 2022)</p> | <p><b>Drug Related Deaths</b></p>  <p>135 naloxone kits supplied in South Locality in 2022</p>  | <p><b>Drug Related Hospital Stays</b></p>  <p>The rate of drug related hospital stays for the South Locality was 135.7 per 100,000 of the population. This was an improvement from 147.2 per 100,000 in 2021.</p> |
| <p><b>Alcohol Related Mortality Rates</b></p>  <p>Alcohol related mortality rates in South Locality are now <b>13.91 per 100,000</b>. This has improved since 2018 when the rate was 17.31 per 100,000.</p>   | <p><b>Deaths from Suicide</b></p>  <p>The rate of death from suicide in the South Locality is <b>10.4 per 100,000</b>, this is below the citywide average of 11.1 per 100,000 of the population.</p>  | <p><b>Life Expectancy</b></p>  <p>Has stayed stable in the South Locality since 2018 for males and females. But it is lower in priority neighbourhoods at 79.6 (F) and 73.9 (M)</p>                               |

## AREAS FOR IMPROVEMENT IN 2023/24

- Explore piloting a programme with vulnerable young people at Camphill
- Increase positive destinations for vulnerable learners
- Renew our focus on community capacity and capability building
- Explore proposal for pump track in Torry with communities
- Enhance our child friendly practice
- Increase the number of priority families accessing PEEP programme
- Increase the number of people attending Health Issues in the Community sessions and increase the number of trained practitioners

## OUR PRIORITIES

The South Locality Plan 2021-26 sets out three priorities to improve our local place:

### Priority 6. Identify and maximise use of green space

#### WHAT PROGRESS HAVE WE MADE DURING 2022/23?



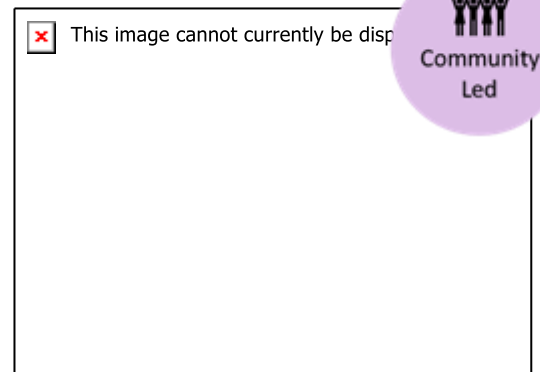
### Supporting greenspace development

#### Encourage community growing spaces

Our community-run green space and food growing projects have continued to thrive and achieve positive outcomes with 14 food growing projects in schools, communities, and workplaces across the South Locality as of March 2023. For example, the **Tullos Community Garden** has been a work in progress since early 2018, when the paths around the garden were put in place and they had 8 planters (4 of which are accessible to those in wheelchairs) installed to grow vegetables and herbs for the local community. The volunteers continue to work on the best way for their produce to be used by the local community but encourage people to help themselves to anything they would like when it is ready. Previously a box of lettuce and other fresh produce was delivered to George's shop for people to take free of charge. They have also donated to CFINE and the Zero waste cafe when that was running and hope to supply to more community free meal initiatives in the future.

The volunteer group is hosting a garden party on Saturday the 19th of August 2023. This will be the first big family event that the volunteers have put on since before lockdown so it is hoped that many people from across Torry will come along to celebrate the garden and enjoy free food, face-painting, craft activities, planting with One Seed Forward and children's fun and stories.

**St Fitticks Edible Garden** also began in 2018 in response to the Torry Older People's Network wanting to turn the disused council depot site into an orchard and edible garden. It also faced the challenges of lockdowns and, in this case, water supply but it is still growing and thriving with entries into the Keep Scotland Beautiful competition with awards as well. The garden now has a part-time coordinator/grower who organises community growing sessions, community events and business plus charity involvement. the project has just made a start on a more substantial toolshed. In addition, a wellbeing course with CFINE and Mindstore is due to start. This will be held in the garden and recently and the project has had a fairy garden activity with children from Barnardo's.



## Encouraging the use of greenspaces for healthy benefits

Community Learning and Development's (CLD) Family Learning Team have been committed to using the abundant outdoor resources the city has to offer; from the incredible beaches and scenic Torry battery to the plethora of woodland and greenspaces. Working in partnership with various agencies the Family Learning Team identifies children and families most in need of support throughout the City of Aberdeen.

With this need recognised, an array of thought provoking, imaginative, and creative outdoor learning experiences are offered. These connect children and families, assess risk, build resilience, confidence and skills through creative activities and play- all throughout the academic year.

The offer is city-wide with sessions happening in each locality. Within the South Locality there has been Geronimo, Coastal Project, Wellbeing Walks, Holidays of Play as well as families accessing a residential in Cullen looking at environmental issues and the impact humans have on the climate.

CLD's Family Learning team has supported approximately 46 families in the South Locality to access outdoor learning opportunities as well as a number attending the residential throughout the year.







### Deevale Community Garden



Work is underway to create a community garden in for residents of Deevale Gardens care home in Kincorth. Residents have shared their ideas for the garden with support from the Community Development team, which will be delivered in partnership with local organisations including CFINE.

## WHAT IMPACT HAVE WE HAD IN 2022/23?

| Satisfaction with Green Space  | Community Growing Spaces   | Community Managed Green Spaces   |
|--|--|--|
|  <p><b>71.6%</b> of South Locality respondents to the City Voice survey reported being satisfied or fairly satisfied with the overall quality of green/open spaces, compared to <b>50.1%</b> in Torry and Kincorth.</p> |  <p><b>14</b> food growing projects happening across the South Locality</p> |  <p><b>3</b> community groups being supported to look after community green space in Torry and Kincorth</p> |
| <b>Cycling</b>   |  |  |
|  <p><b>15.6%</b> of people in the South cycled in the last year compared to the citywide average of <b>14.8%</b> (City Voice 46, 2022)</p>  |  |  |

## AREAS FOR IMPROVEMENT IN 2023/24

- Ensure support extends to Priority Neighbourhood Kincorth as well as Torry
- We will support communities to collaborate food growing efforts with schools and workplaces





*Working Together*

## Community Empowerment Strategy

Community Planning Aberdeen is committed to working with communities to improve outcomes across each locality and indeed the City as a whole. In 2022 we launched a new Community Empowerment Strategy setting out our vision for all communities to be equal community planning partners. Several improvement projects are now underway to strengthen community participation in community planning. This will ensure that communities have a voice and an ability to influence what happens to them and their community.



This year we have been pleased to see the return of in-person community-based events, including two citywide events: the Community Gathering and the Granite City Gathering.



These events provided a great chance to bring our community and partners together, make connections, and share learning and opportunities. Both events were open to people across the City and were an exhibition of community information and provided a chance for attendees to wander around the stalls and learn about the different opportunities to get involved in their local community. There were 25 stall holders on the day, showcasing the work they do in local communities. Approximately 121 people attended the gathering. Of the registered attendees, 27% were from the South Locality. You can read the Community Gathering report for more information [here](#).

In addition to our citywide events, the South Locality Empowerment Group (LEG) restarted on 27 April 2023. This was its first meeting since early 2022. Meetings are now held on a two-monthly cycle and alternate between virtual meetings and in person meetings at a community venue. This provides an opportunity for LEG members to influence and shape delivery of the South Locality Plan and hold Community Planning Partners to account. LEGs also provide the Locality Planning Team and Outcome Improvement project managers an opportunity to involve community members in their projects and gain valuable feedback. The Torry Partnership has continued to meet throughout 2022-23.

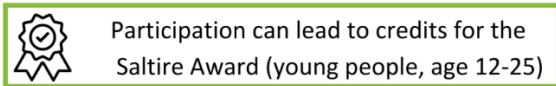
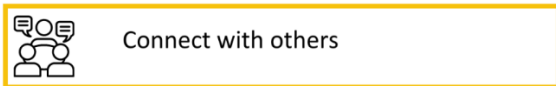
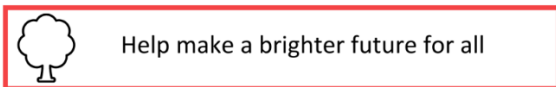
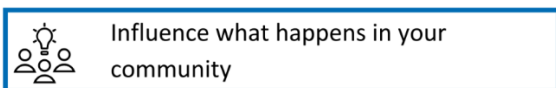


*Find out more & Get Involved!*

The [South Locality Empowerment Group](#) and the [Torry Partnership](#) are two of the main ways we connect with our local communities in the South Locality. As a member of a LEG and Torry Partnership you will be able to provide a voice on behalf of the people and communities across your neighbourhood.



## What's in it for you?



Following a recent training session provided by SCDC in partnership with ACC/AHSCP, the community had this to say about community engagement:

*"Talk to us and talk to us early. Don't make decisions and then get it approved by us. Communities have knowledge and skills to know what's best for us. We're the local experts about our places"*

*"Community Engagement is where people grow"*

If you are interested in getting involved in helping achieve these aims in your local community, follow this link to find out more: [Our Communities - Community Planning Aberdeen](#) or email [localityplanning@aberdeencity.gov.uk](mailto:localityplanning@aberdeencity.gov.uk).

## Meet your Locality Planning Team

We understand the importance of working with communities to build a thriving environment for everyone. By engaging with local communities through our dedicated locality planning team, we aim to become more receptive, supportive, and action orientated. Community input is extremely valuable to this work.

The Locality Planning Team includes staff from Aberdeen City Council and the Aberdeen City Health and Social Care Partnership working together to support improved outcome across all our localities and neighbourhoods. In the South Locality your locality planning contacts are Iain, Jade and Teresa.



Iain Robertson,  
Transformation Programme  
Manager, Aberdeen City Health  
and Social Care Partnership



Jade Leyden,  
Community Development  
Manager,  
Aberdeen City Council



Teresa Dufficy, Community  
Development Officer,  
Aberdeen City Council

Please take a moment to complete this [survey](#) and let us know how we can enhance our service delivery and collaboration with you. Together we can make a positive impact and create a place where all people can prosper.

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## INTEGRATION JOINT BOARD

|   |  |
|---|--|
| <b>Date of Meeting</b>                  | 19 <sup>th</sup> September 2023  |
| <b>Report Title</b>                     | Quarter 1 Delivery Plan Update   |
| <b>Report Number</b>                    | HSCP23.062   |
| <b>Lead Officer</b>                     | Alison MacLeod   |
| <b>Report Author Details</b>            | Michelle Grant   |
| <b>Consultation Checklist Completed</b> | Yes  |
| <b>Exempt</b>                           | No   |
| <b>Appendices</b>                       | <ul style="list-style-type: none"> <li>a. <i>Quarter 1 Overview</i></li> <li>b. <i>Delivery Plan Quarter 1 Tracker</i></li> <li>c. <i>ACHSCP Delivery Plan Dashboard</i></li> </ul>  |
| <b>Terms of Reference</b>               | <p>This paper refers to point 5 of the RAPC remit and responsibilities:<br/>           Receive and scrutinise performance reports and receive assurance that actions in respect of emerging trends are proportionate to the IJB's Risk Appetite Statement.</p> |



## INTEGRATION JOINT BOARD

### 1. Purpose of the Report

- 1.1. This report seeks to provide assurance to the Risk, Audit and Performance Committee (RAPC) and relates to the progress of the Delivery Plan as set out within the Aberdeen City Health and Social Care Partnership (ACHSCP) Strategy Plan 2022-2025.

### 2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee note the Delivery Plan Quarter 1 Summary, the Tracker and Dashboard as appended to this report.

### 3. Strategic Plan Context

- 3.1. This report and its appendices directly link to the ACHSCP Strategic Plan and our performance in achieving the associated Delivery Plan. The Strategic Plan's Reporting Framework outlines our requirement to provide assurance to RAPC on a quarterly basis that progress is being made in achieving the Delivery Plan, and this report ensures that this element of governance is achieved in a robust manner.

### 4. Summary of Key Information

- 4.1. This report represents the Quarter 1 update to the Risk, Audit and Performance Committee based upon the Year 2 Delivery Plan as approved by IJB in March 2023.
- 4.2. As outlined in the revised Performance Framework, the Delivery Plan Progress Tracker will show updates for all entries in the Delivery Plan while a supporting Dashboard will be presented showing the key measures which the progression of the Delivery Plan seeks to impact upon.
- 4.3. Appendix A aims to give some context to the progress being made over the past quarter while the Delivery Plan Progress Tracker (Appendix B) shows



## INTEGRATION JOINT BOARD

this detail for each entry within the Year 2 delivery Plan. The Delivery Plan Dashboard in Appendix C displays the key measures and updated figures (where possible) related to these.

- 4.4. The Delivery Plan Progress Tracker is a spreadsheet utilised by our programme and project teams to provide updates to the Senior Leadership Team (SLT). For the purposes of RAPC, an update which spans the full quarter has been submitted to provide an overview of what has been achieved over the period from 1<sup>st</sup> April – 30<sup>th</sup> June 2023 and any significant risks or issues encountered during that time. A BRAG (Blue, Red, Amber, Green) status is also provided giving an overarching indication of the health of the delivery plan entry. It should be noted that the status of a particular project may have progressed since the update in the report was given and therefore should be deemed to be historically accurate.
- 4.5. As per the Performance Framework, any entries in the Delivery Plan which are at risk of no longer being able to meet their end date or where significant changes to the scope are required, a flash report requires to be submitted to the Senior Leadership Team outlining the risk and the mitigations. No flash reports were submitted during Quarter 1, however in Quarter 2 one entry (SE05) has been closed due to the remit being aligned within other projects within the Digital Programme.
- 4.6. Appendix 3 shows the Delivery Plan Dashboard. This has been sorted by Programme rather than by Strategic Aim as was the case in 2022-2023. It is hoped that this will help to display a direct correlation between the programmes and their impact.
- 4.7. Presentations will be delivered by representatives of the Mental Health and Learning Disability Programme, and the Frailty Programme as requested by RAPC in May 2023. The aim of these presentations is to allow RAPC members to receive more detail about the aims of the programmes. The presentations will also look to provide assurance over progress being made and perceived challenges and how these are mitigated while also providing some context around the impact on staff and citizens that the implementation of these programmes are having.

### 5. Implications for IJB

There are no direct legal implications arising from the recommendations set out in the report.



## INTEGRATION JOINT BOARD

### 5.1. Equalities, Fairer Scotland and Health Inequality

There are no direct implications arising from this report.

### 5.2. Financial

There are no direct implications arising from this report.

### 5.3. Workforce

There are no direct implications arising from this report.

### 5.4. Legal

There are no direct implications arising from this report.





## INTEGRATION JOINT BOARD

### 5.5. Unpaid Carers

There are no direct implications arising from this report.

### 5.6. Information Governance

There are no direct implications arising from this report.

### 5.7. Environmental Impacts

There are no direct implications arising from this report.

### 5.8. Sustainability

There are no direct implications arising from this report.

### 5.9. Other



## INTEGRATION JOINT BOARD

There are no direct implications arising from this report.

### 6. Management of Risk

#### Risk Appetite Statement

Authors should look at the Risk Appetite Statement which has been approved by the IJB. The IJB recognises that achievement of its priorities will involve balancing different types of risk and that there will be a complex relationship between different risks and opportunities. The risk appetite approach is intended to be helpful to the Board in decision making and to enable members to consider the risks to organisational goals of not taking decisions as well as of taking them.

#### 6.1. Identified risks(s)

| Risk                                  | Likelihood | Impact | Controls  | Evaluation   |
|---------------------------------------|------------|--------|---|--|
| Assurance over strategic plan not met | Low        | Medium | Performance Framework outlines the required reporting to take place through the year in order to create assurance | If the paper was not presented, assurance would not be given to the RAPC and therefore part of the remit and responsibility of the Committee would not be met. |

Full Transformational Projects outlined within the Delivery Plan will have their own governance routes and risk management in place. As outlined in section 4.5, where risks are required to be escalated this is made to SLT in the first instance as outlined by the Performance Framework.

#### 6.2. Link to risks on strategic or operational risk register:

This report links to Strategic Risk 4 on the Strategic Risk Register: -



## INTEGRATION JOINT BOARD

Cause: Performance standards/outcomes are set by national and regulatory bodies and those locally determined performance standards are set by the board itself.

Event: There is a risk that the IJB, and the services that it directs and has operational oversight of, fails to meet the national, regulatory, and local standards.

Consequence: This may result in harm or risk of harm to people.

### 6.3 How might the content of this report impact or mitigate these risks:

The report and its appendices help to mitigate the risk by providing assurance that progress against the Strategic Plan 2022-2025 and the associated Delivery Plan is being achieved, that this is being monitored by the SLT on a monthly basis who consider and direct remedial action and unblock barriers where relevant.

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## Risk, Audit and Performance Committee- Quarter 1 Delivery Plan Update

### Delivery Plan Progress Report

Below is an overview of the number of projects listed within the Delivery Plan sorted by their BRAG Status. Please note that there is now a new category of 'Closed'.

Section 1.2 shows the projects sorted by Programme to give a sense of how these are progressing overall.

#### 1.1. Overall Delivery Plan Status, by BRAG.

| Status       | Description                                  | No. of Projects | % of Total Projects |
|--------------|--|-----------------|---------------------|
| Blue         | Complete *                                   | 0               | 0%                  |
| Green        | On track to deliver by deadline              | 48              | 76%                 |
| Amber        | At risk of non-delivery/not meeting deadline | 12              | 19%                 |
| Red          | Missed Deadline/Unable to Deliver            | 0               | 0%                  |
| White        | Not Started **                               | 2               | 3%                  |
| Purple       | Closed***                                    | 1               | 2%                  |
| <b>TOTAL</b> |  | <b>63</b>       | <b>100%</b>         |

\*No projects due to complete before Sep 23

\*\*On the report two projects are marked as not started. One is in relation to the roll out of Morse which will be undertaken by the dedicated pan Grampian TPM when they start at the end of August and another is the Volunteer Protocol which the SRO has confirmed has not been started. The latter has an end date of Sep 23 and a report will come to SLT proposing a new timescale for delivery.

\*\*\* The new closed status has been used to close a project where the remit is covered by that of another project(s) (within the Digital programme).

As part of the Performance Framework guidelines, a flash report is to be submitted to the Senior Leadership team where a project is unlikely to meet its aligned delivery dates as per the Year 2 Delivery Plan. No Flash Reports have been submitted within the course of Quarter 1. Through the course of the first year of the delivery plan and now entering into the second, this process has firmly embedded and this, alongside the streamlining and re-scheduling that was conducted did as part of the Year 2 refresh has significantly reduced the need for change requests.

### 1.2 Delivery Plan Status collated by Programme.

Programmes have an overall 'Green' status where the majority of their projects fall within the 'Green' rag status while those with an overall Amber colour denotes where the majority of projects fall within an 'Amber' RAG status.

| Programme (total no. projects) | Blue | Green | Amber | Red | Achievements   | Challenges/Worthy of Comment   |
|--------------------------------|------|-------|-------|-----|--|--|
| Commissioning (3)              |      | 100%  |       |     | <ul style="list-style-type: none"> <li>Independent Advocacy has been reviewed and is in the process of being retendered.</li> <li>Contract review of Bon Accord Care underway as well as a Market Position Statement for housing for Varying Needs.</li> <li>Monitoring of Rubislaw and Woodlands continues.</li> </ul>  | <ul style="list-style-type: none"> <li>Medical Cover for care settings has been paused due to Senior Responsible Owner (SRO) leaving.</li> </ul>   |
| Communities (9)                |      | 55%   | 45%   |     | <p>Gathering successfully delivered on 24<sup>th</sup> June 2023, well attended, very positive feedback and next steps planned.</p> <p>Test of change established at Northfield PIH involving Rehab, Pulmonary Rehab, Listening Service, PEEP project for healthy Weight and SWSC/AGILE.</p> <p>LEGs continue to be promoted with regular meetings and numbers increasing.</p> | <ul style="list-style-type: none"> <li>Age Friendly City project noted as end date of Jun 23 but that was only for delivery of the Gathering Event. Will need to agree revised end date for ongoing project.</li> <li>Diversity of LEGs not necessarily changing as yet but team linking with partners to promote participation with New Scots in the first instance.</li> </ul> |



| Programme (total no. projects) | Blue | Green | Amber | Red | Achievements   | Challenges/Worthy of Comment   |
|--------------------------------|------|-------|-------|-----|--|--|
|                                |      |       |       |     | Annual Report on Locality Plans is going to CPA Board on 6 <sup>th</sup> Sept and RAPC on 19 <sup>th</sup> Sept and planning for refreshed LOIP has commenced.   |  |
| Digital (7)                    |      | 100%  |       |     | <ul style="list-style-type: none"> <li>• MEOC LOIP Project End Report going to CPA Board on 6<sup>th</sup> Sept.</li> <li>• Work on EMAR is progressing well with a pilot site identified (currently scoping suitability)</li> <li>• SRS Digital Support Hub now launched and TEC plan finalised. Balnagask TEC project in Discovery phase with an application for Health Foundation funding in progress.</li> <li>• Good progress being made on the switchover from Analogue to Digital with project on track to deliver well in advance of switchover deadline.</li> </ul> | <ul style="list-style-type: none"> <li>• Suggest removal of SE05 Support the implementation of digital records where possible as already covered in the Morse and Emar project.</li> <li>• SPOC project relaunched with dedicated Project Manager. Will deliver in phases – professional first followed by public.</li> <li>• Morse TPM now appointed and work will begin on roll out pan Grampian as soon as they take up post at the end of August.</li> </ul> |
| Flexible Bed Base (1)          |      | 100%  |       |     | Increase from 37 to 55 beds by November 23 has been agreed.  | These increases will utilise all current funding for H@H and further discussion will be required regarding funding for the remaining 45.   |

| Programme (total no. projects) | Blue | Green | Amber | Red | Achievements  | Challenges/Worthy of Comment   |
|--------------------------------|------|-------|-------|-----|---|--|
| Frailty (1)                    |      | 100%  |       |     | <ul style="list-style-type: none"> <li>A new draft programme plan has been produced to reflect the pan Grampian approach</li> <li>Significant work continues to be undertaken in a challenging environment to manage flow through the Frailty pathway.</li> </ul> | <ul style="list-style-type: none"> <li>Each of the 3 Grampian HSCPs made a bid for HIS-IHUB funding. City and Shire were unsuccessful but Moray was successful and they will link their progress with this work into the wider Frailty group.</li> <li>Recent closure of beds at Rosewell House due to lack of medical cover has impacted Frailty Flow but currently working on a plan to resolve this.</li> </ul> |
| Home Pathways (1)              |      |       | 100%  |     | <ul style="list-style-type: none"> <li>Planning permission for the Stonewood development has been granted.</li> <li>Market Position Statement currently being developed.</li> </ul>   |  |
| Infrastructure (2)             |      | 100%  |       |     | <ul style="list-style-type: none"> <li>Interim solution at Countesswells progressing</li> <li>Full review of Primary Care Premises Plan underway and beginning to consider needs for Partnership wide infrastructure plan.</li> </ul>                             | <ul style="list-style-type: none"> <li>Development not yet reached trigger for moving on long-term solution</li> </ul>   |
| MHLD (6)                       |      | 67%   | 33%   |     | <ul style="list-style-type: none"> <li>Good progress being made on various transformation projects.</li> <li>Mental Health (MH) Practitioner in GP practice test of change evidencing a</li> </ul>  | <ul style="list-style-type: none"> <li>Scaling up of the MH Practitioner in GP practices project is dependent on SG funding and there is a doubt over this being forthcoming.</li> </ul>   |

| Programme (total no. projects) | Blue | Green | Amber | Red | Achievements   | Challenges/Worthy of Comment  |
|--------------------------------|------|-------|-------|-----|--|---|
|                                |      |       |       |     | <p>reduction in GP referral and time as well as improved patient experience with a low rate of onward referral.</p> <ul style="list-style-type: none"> <li>• Work on pan Grampian Autism Strategy has begun.</li> <li>• New Suicide Prevention Service commenced May 2023.</li> </ul>  | <ul style="list-style-type: none"> <li>• Progress on neurodevelopment pathway will be constrained as previously promised funding from SG will not now be provided.</li> <li>• SRO taking stock of the number and variety of projects with a view to streamlining to make more achievable.</li> </ul>  |
| Prevention (7)                 |      | 86%   | 14%   |     | <ul style="list-style-type: none"> <li>• We continue to promote active lifestyles through links with Sport Aberdeen and RGU.</li> <li>• LOIP project on Smoking Cessation End Report will go the CPA Board on 6<sup>th</sup> September.</li> <li>• Stay Well, Stay Connected project continues – there are now two Soup and Sarnies in Seaton and Torry has held a new one for the first time and the AGILE brochure continues to be heavily promoted.</li> <li>• Public Health and Wellbeing Teams are linking closely with Vaccination Centre making use of the</li> </ul> | <ul style="list-style-type: none"> <li>• There is no update re alcohol and drugs as the SRO does not get back to us when we request these.</li> <li>• Sexual Health Services are under extreme pressures in terms of staffing to deliver day to day services which does not allow capacity to deliver improvements at this time.</li> </ul> |

| Programme (total no. projects)    | Blue | Green | Amber | Red | Achievements  | Challenges/Worthy of Comment   |
|-----------------------------------|------|-------|-------|-----|---|--|
|                                   |      |       |       |     | <p>interaction opportunities there.</p> <ul style="list-style-type: none"> <li>Community Led Health Approaches are being progressed as is the use of the Health improvement Fund.</li> </ul>                  |  |
| Primary Care (3)                  |      | 33%   | 67%   |     | <ul style="list-style-type: none"> <li>Practice based CTAC service now fully delivered, operating from 5 sites across the City.</li> <li>Vaccinations now fully transferred from GPs to community.</li> </ul> | <ul style="list-style-type: none"> <li>Pharmacotherapy roll out is almost at full capacity.</li> <li>The 3 HSCP Chief Officers have identified a joint objective for the delivery of a vision and key Delivery plan for Primary Care. This is currently being scoped but it is thought it could impact on planned improvement activity in the immediate term.</li> </ul> |
| Redesigning Adult Social Work (1) |      | 100%  |       |     | <ul style="list-style-type: none"> <li>The review of hospital Social Work is complete and a report was presented to SLT in June.</li> </ul>   | <ul style="list-style-type: none"> <li>All ASW Teams have continued to receive an increased number of referrals which has led to some areas of redesign being slowed down or paused. As a result, SLT agreed to an extension to the timescale for completion to Dec 2024.</li> </ul>   |
| Review of Rehab (2)               |      | 50%   | 50%   |     | <ul style="list-style-type: none"> <li>There is a strategic planning framework in place which gives a timeline for undertaking the</li> </ul>   | <ul style="list-style-type: none"> <li>Currently reconsidering options for Neuro-Rehab with a further discussion anticipated at SLT on</li> </ul>  |

| Programme (total no. projects) | Blue | Green | Amber | Red | Achievements  | Challenges/Worthy of Comment  |
|--------------------------------|------|-------|-------|-----|---|---|
|                                |      |       |       |     | review across full adult rehab pathway. Learning developed during review of neuro rehab pathway will create a beneficial platform to commence this  | 9 <sup>th</sup> August. Paper to IJB delayed to Dec 2023.   |
| Resilience (6)                 |      | 100%  |       |     | <ul style="list-style-type: none"> <li>Plans for managing budget, communications, emergency planning and preparing for the introduction of the NCS are well underway.</li> </ul>  | <ul style="list-style-type: none"> <li>Review of SMOC arrangements are dependent on review of DSC and other meetings (now underway).</li> </ul>   |
| Social Care Pathways (4)       |      | 75%   | 25%   |     | <ul style="list-style-type: none"> <li>Review of Hospital Social Work and Interim and Respite Care now complete.</li> <li>Short life working group on preventative and proactive care convened.</li> <li>Two of the five recommendations from the ASP Inspection are complete and progress on the other three is underway.</li> </ul> | <ul style="list-style-type: none"> <li>Delivery of the action plan in relation to the JSW Inspection is Amber. The continued withdrawal of the LS/CMI Risk/Needs Assessment Tool by SG continues to impact the service But the team are contributing to the testing phase and hope it will be returned by the end of the summer.</li> </ul> |
| Strategy (5)                   |      | 100%  |       |     | <ul style="list-style-type: none"> <li>Revised EOMF and process agreed at IJB in April with two areas of good practice picked up by EHRC.</li> <li>Climate Change work progressing with a report due to go to IJB in October.</li> </ul>  | <ul style="list-style-type: none"> <li>Work of DAG likely to transfer to Strategic Home Pathways Lead in near future.</li> </ul>  |

| Programme (total no. projects) | Blue | Green | Amber | Red | Achievements   | Challenges/Worthy of Comment  |
|--------------------------------|------|-------|-------|-----|--|---|
|                                |      |       |       |     | <ul style="list-style-type: none"> <li>• Delivery of Carers Strategy progressing – annual report due to go to IJB in February 2024. Carers LOIP Project delivered on aim and End Report scheduled.</li> <li>• Progressing self-assessment against new guidance on equipment and adaptations and developing action plan to achieve compliance.</li> </ul> |   |
| Workforce (5)                  |      | 60%   | 20%   | 20% | <ul style="list-style-type: none"> <li>• Delivery of Workforce Plan is progressing.</li> <li>• Delivery of initiatives to support staff health and wellbeing continues.</li> <li>• Work on an SLT Development Plan is progressing well and delivery is ongoing.</li> </ul>   | <ul style="list-style-type: none"> <li>• Work on a Volunteer Protocol has not yet commenced and a revised deadline will need to be negotiated.</li> <li>• Trauma Informed Training is scheduled for the SLT on 6<sup>th</sup> September but has yet to be rolled out to the wider partnership.</li> </ul> |





### 1.3 Delivery plan Dashboard

The following provides comment on the Delivery Plan Dashboard.

| Measure   | Comment   |
|---|---|
| H@H Admissions  | 37% increase on the previous period.  |
| H@H Capacity  | Figures indicate the fluctuating position of the service provision but definitely reflect an upward trend.  |
| Ward 102 Admissions   | Reducing trend.   |
| Ward 102 Boarders   | Q1 on par with same period last year but Q2 well down on same period last year.   |
| Rosewell House  | Admissions show overall trend of increase with reduced trend in step up indicating step down from W102 is predominant.  |
| Rehab   | Overall occupancy is reduced but admissions to Orthopaedic Rehab and Stroke Rehab remain high. Orthopaedic has increased by 12.1% and Stroke by 28.8%.  |
| Specialist Older Adults Rehab Services-Length of Stay (LOS) | LOS has increased significantly across all disciplines with Morningfield House and the Neuro Rehab Unit having the highest increases. Conversely, whilst Stroke admissions have increased by 28.8%, LOS has decreased by almost 20% indicating that activity in these areas has delivered results.                |
| Delayed Discharges Specialist Older Adults-Rehab Services   | Distinct counts of delay and monthly bed days have both fallen this year although overall there has been an increase on the previous year. No harm falls having peaked are now on the downward trend but Near miss and Harm Falls are static.   |
| Unmet Need  | This is on a significant downward trend.  |
| Home Pathways   | Delayed Discharge graph indicates decrease between Quarters (the table is used to display the baseline figure).   |
| MHLD  | Code 9 delays increase, code 100 decrease. Querying with Health Intelligence. Significant increase in overnight occupancy at RCH (22.8%).   |
| Prevention  | Alcohol and Drugs related admissions both showing a significant decrease. Sexual health attendances showing a significant increase on last year. Smoking cessation – both 4 and 12 week quit rates showing a downward trend although number of quit attempts also reduced on previous years (other than 2020/21). |
| Strategy  | Only measure here is in relation to Adaptations and use of Telecare and the data is historical. We will look to add data around delivery of the Carers Strategy and also in relation to the Workforce Plan. Adaptations and Telecare Data is  |



|              |   |
|--------------|---|
|              | currently being updated via the Disabled Adaptations Group (DAG) and should be included for future reports.   |
| Primary Care | <p>CTAC calls responded to increased significantly. Booked appointments increasing sharply and attendance rate plateauing.</p> <p>The majority of practices are remaining at a 'level 1' status. This means that due to ongoing unscheduled care demands since covid-19 many practices are continually proactively managing their service accordingly to meet patient need. These activities might include non-clinical activities for instance, such as referral coding and reporting and does not impact direct patient care.</p> |

Delivery Plan Y2 Q1 2022-23

Blue = complete  
 Red = missed deadline/unable to deliver  
 Amber = at risk of non-delivery/not meeting deadline  
 Green = on track to delivery by deadline

| Programme     | Ref   | Project Description  | Project Name                             | Category | Start Date | End Date | BRAG Status | Tier                | Latest Update   |
|---------------|-------|--|--|----------|------------|----------|-------------|---------------------|---|
| Commissioning | KPS23 | Deliver robust arrangements for medical cover for care settings  | Medical Cover for Care Settings          | FTP      |            | Sep-23   | Green       | Tier 1 (Prevention) | Surveys have been sent to GP Practices and Care Homes to gather opinions on medical cover in our care homes. Responses have been received and are to be reviewed with data to be shared across the project group. It was recommended that the scope of this work to be revised and awaiting a new Senior Responsible Officer with previous SRO moving to a new position<br>Timeline for completion of project extended to May 2024.   |
| Commissioning | SE14  | Review availability of the range of independent advocacy and implement any recommendations from the review   | Review range of independent advocacy     | FTP      |            | Jun-24   | Green       | Tier 1 (Prevention) | Service Manager has advised that the contract tender for advocacy has been published on public contracts Scotland website. This piece of work is progressing as predicted with the tender process being undertaken. The Service Specification Document has now been completed and shared by the service manager.  |
| Commissioning | SE17  | Develop and deliver the Procurement Workplan incorporating our commissioning principles so that our commissioning is ethical, creative and co-designed and co-produced with partners and communities.  | Transformation of Commissioning Approach | BAU      |            | Mar-25   | Green       | Tier 1 (Prevention) | The contract review and pathways review for Bon Accord Care is in progress and working to a strict timeline. Workshops have been carried out with the various services from Bon Accord Care, along with partnership colleagues with further co-production sessions to take place later in the year. The reviews have utilised both the GIRFE principles as well as the Ethical Commissioning principles to help shape the future contract. The response has been positive from those that have attended the workshops and have highlighted the importance of services being involved in shaping the way forward. These sessions have been led by the Commissioning Lead for the Partnership along with the Head of Delivery & Development from Bon Accord Care with support from the Strategy and Transformation Team Programme and Project Managers as well as the Contracts and Procurement team from Aberdeen City Council.<br>Rubislaw Park Nursing Home End of Life Beds Test of Change has continued to progress, with the pathway opening to additional areas within Aberdeen Royal Infirmary for referrals. Feedback continues to be very positive around the pathway and the care provided from the staff involved. Quarterly Review meetings are in place and attended by the Manager of Rubislaw Park Nursing Home, the Commissioning Lead for the Partnership and Programme Manager.<br>Work continues with Woodlands Care Home in respect to Interim Beds. Regular weekly and monthly meetings are held including staff from Woodlands Care Home, the Partnership, Aberdeen City Council and also NHS Grampian. A review of process documentation has been completed with the manager at Woodlands and also the programme Manager and Project Manager from the Strategy and Transformation Team. This has been discussed and shared with the wider project group for comment and now in the final steps of being approved and confirmed.<br>A short life working group has been set up to look at the Market Position Statement for the Housing of Varying need. The information collated will feed into both the Housing strategy and also provide an outlook of the requirements for the city going forward. Initial meetings have taken place and will continue with delivery of the Market Position Statement around March 2024.<br>Progressing as planned |
| Communities   | CT03  | Confirm the accuracy and accessibility of the map of existing universal and social support and work with partners and the community to develop services to meet any identified gaps  | Support Mapping                          | BAU      |            | Sep-23   | Green       | Tier 1 (Prevention) | Mapping ongoing with community and statutory partners.<br>AGILE guide maps out where individuals, carers, families, and community groups can access support staying independent i.e. Care and Repair service, Bon Accord Care, Community Transport Team, Aberdeen Carers Support Service, and Housing Options.<br>Guidance on avoiding social isolation includes information on lifelong learning, physical fitness, digital skills, and volunteering opportunities.<br>Guidance on staying informed includes information on NHS services, cost of living support to maximise food, energy, and benefit support, advocacy services, social care and bereavement services, and Power of Attorney.<br>Our community planning partners GREC have prepared a service directory and we will continue to work closely with them.  |
| Communities   | CT07  | Continue to develop and evaluate the Northfield Hub as a test of change for cross-sector, easily accessible, community hubs where a range of services coalesce, all responding to local need, to feed into a wider initiative on Priority Intervention Hubs. | Priority Intervention Hubs               | FTP      |            | Mar-25   | Green       | Tier 1 (Prevention) | Test of Change established for Get Active@ Northfield - working with Sport Aberdeen co-located services, supporting Rehab, Prevention and Education in the Community, and linking with Community First objectives. Services include Listening Service, a Pulmonary Rehab Project SO11 with LOIP linking in with site and have scoped venue for establishing new classes to help increase uptake. Project Team established starting meeting 2.12.22. PEEP project for Health Weights for Families and children to commence February-April. Project team includes links with Stay Well Stay Connected to meet needs in the area. Health Visitor Group Session test of Change starting w/c 24th April group sessions on shared topics.<br>Stakeholder Event taken place with community initiative colleagues for Northfield and services serving Northfield area. Good connections made so support programme including pop up vaccination clinics and link practitioner service.<br>SBAR/ PDSA to come to SLT from Project Managers to support wider input from other areas to evidence work again Priority Intervention Hubs.   |
| Communities   | CT08  | Develop the membership and diversity of our Locality Empowerment Groups  | Develop LEGs                             | BAU      | Apr-22     | Mar-25   | Amber       | Tier 1 (Prevention) | Integrated Locality Planning Team set up with a remit to grow and diversify LEG membership.<br>LEGs and integrated locality planning are standing agenda items on Community Empowerment Group and Strategic Planning Group.<br>Community Empowerment Strategy launched in December 2022. Stretch Outcome 16 added, with seven dedicated projects to promote community empowerment. A LOIP Project Group has been set up to increase the level of participation and diversity at Locality Planning meetings, the Communities TPM is Project Manager of this project group.<br>Integrated Locality Planning Team had a stall to promote locality planning at CPA Community Gathering Event held in Cowdry Hall on 13 May. 14 community members registered their interest at the Gathering to join a LEG.<br>Locality Planning was promoted at the Granite City Gathering on 24 June.<br>Communities Team engaging with Mental Health Foundation and GREC to increase participation of New Scots (asylum seekers and refugees) in Aberdeen through accredited training and workshops with the aim of participation at LEG meetings. Engagement with various community groups and venues is ongoing.<br>The Integrated Locality Planning Team are visiting community members in their localities during May, June, and July to raise awareness of locality planning and increase LEG and PNP membership.  |
| Communities   | CT09  | Increase community involvement through existing networks and channels  | Increase community involvement           | BAU      |            | Mar-25   | Amber       | Tier 1 (Prevention) | Communities Team successfully delivered the Granite City Gathering on 24 June 2023 at Kings Church. The primary aim of this event was to start a social movement to enable individuals and community groups to make better plans to age and retire well by focusing on health, wellbeing, finance, employment, community networks and volunteering. It is hoped that the launch event will inspire people to get involved with community groups and organisations and we will provide opportunities to link up people with these groups at the event and afterwards. A project close report is being prepared and will be circulated for consultation to SLT in July.<br>Locality Planning Team supported CPA's Community Gathering on 13 May and set up a stall to meet community members and sign people up to Locality Planning groups.<br>The Locality Planning Team are facilitating the delivery of Locality Empowerment Group and Priority Neighbourhood Partnerships<br>The Community Team continues to engage with communities across Aberdeen. This includes locality planning, community planning, wellbeing, and public health outreach. A presentation was delivered to Danestone Community Council on 4 July on ACHSCP, the role of the Public Health Team, and to promote locality planning. Further engagement with community councils is planned for the next quarter.<br>The Public Health team continues to deliver training and capacity building for professional colleagues and communities such as Health Issues in the Community and PEEP training.   |
| Communities   | CT10  | Deliver Integrated Locality Plans and report on progress   | Deliver Integrated Locality Plans        | BAU      | Apr-22     | Mar-25   | Amber       | Tier 1 (Prevention) | South Locality Empowerment Group met on Thursday 27 April and next meets on 16 August.<br>North Locality Empowerment Group met on 31 May and next meets on 26 July.<br>Central Locality Empowerment Group met on 13 June and next meets on 2 August.<br>Easy Read Locality Plans have been prepared by Integrated Locality Planning Team and circulated to LEG members for consultation.<br>Community ideas prepared by LEG and community members over the past 2 years have been rationalised and consolidated and linked to LOIP priorities and improvement projects. progress will be reported to LEG meetings.<br>Annual Report on Locality Plans to be reported to CPA Board on 6 September and RAPC on 19 September. Full consultation will be undertaken through LEGs and PNPs during July and August.<br>Planning for refreshing the LOIP and Locality Plans in 2024 has begun.   |

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| Communities       | CT11   | Ensure the use of Our Guidance for Public Engagement is embedded   | Public Engagement                  | BAU |            | Mar-25 | Green       | Tier 1 (Prevention)         | <p>Scottish Community Development Centre (SCDC) have delivered 2 sessions of training to community members and delivered for NHSG and AHSCP colleagues in March 2023. This training, in part, has informed the development of our own internal training which is being progressed. SCDC will deliver additional training to the Public Health Team on 22 August and 13 September.</p> <p>The Community Empowerment Strategy for Aberdeen City was published by Community Planning Aberdeen in December 2022. The Community Empowerment Group will be responsible for delivering the Strategy and the seven improvement projects focused on strengthening community engagement and our links with community organisations.</p> <p>LOIP Stretch Outcome 16.4 project group will review how we engage with communities to ensure the number and diversity of community members is increasing, and that community members are participating at a higher level i.e. co-design and co-development of plans rather than being informed or consulted. Progress is reported on a monthly basis to the Community Planning Board.</p>   |
| Communities       | CT12   | Promote the use of Care Opinion to encourage patients, clients, carers and service users to share experiences of services, further informing choice.   | Care Opinion Promotion             | BAU |            | Mar-25 | Amber       | Tier 1 (Prevention)         | <p>Care Opinion for internal services in place. Expansion to commissioned services included within project plan.</p> <p>Officers attended a training session on Wednesday, 7 June delivered by the Executive Director &amp; Head of Care Opinion Scotland. Promotion of Care Opinion will be stepped up to ensure ACHSCP services have a good understanding of Care Opinion and to increase low response rates.</p> <p>The Strategy and Transformation Team are working on how to better promote Care Opinion as the response rate to ACHSCP sites is very low. The agreed upon action is to target three ACHSCP services to promote Care Opinion to revitalise the subscription. One of those services will be the sexual health clinic as the service has previously had many positive stories, but those numbers have dropped over the past 9-12 months.</p>  |
| Communities       | PIH08  | Co-design Aberdeen as an Age Friendly City which supports and nurtures people to get ready for their best retirement and promotes the development of a social movement to encourage citizens to stay well and stay connected within their communities. | Community Intervention             | BAU |            | Jun-23 | Amber       | Tier 1 (Prevention)         | <p>The event aims to align with WHO Age Friendly Cities principles and promote community participation and empowerment. The event's target audience is people aged 45 years and above and will challenge people to plan effectively for their retirement and make the most of their later years to ensure they are better able to live in better physical, mental, and financial health for longer, to live with purpose, and to build and sustain community relationships. Key governance documents in place and finance in place. Multi-Agency Project Team planned the launch in Kings Church on 24 June 2023. We had capacity for 400 people to attend the event 210 tickets distributed and 167 people turned up on the day. Lessons learned will be published in the close report and recommendation for next steps.</p> <p>Feedback was mostly positive, having an event focused on retiring well hit home for attendee especially having a relatable speaker living in the North East, retiring well and staying connected. Attendees keen to have the event next year possibly around September / October time</p> <p>The event was interactive with breakout, participatory sessions on digital technology, arts and crafts, qigong, yoga, tai-chi and choir. The gave the attendees and opportunity to learn what is available in the local community or what is missing and how they can be supported to start. Communication and engagement was a challenge and post pandemic this was a great way to learn how to reach this cohort in future planning. The locales group gave us feedback on including them in the steering group which will happen. SHMU was a major part of the next steps for the gathering where they will have follow up programming post event as engagement with older people. The gathering has set an outcome of exploring having an "older people council" or "the peoples forum" and this will be discussed with project sponsor and public health on the next steps on this.</p> <p>Work continues on track. Potential external funding opportunities being explored. Meeting with Community Planning colleagues set up to discuss delivery of Age Friendly City across the Community Planning Partnership.</p> |
| Communities       | SE11   | Explore ways we can help people access and use digital systems   | Access to Digital                  | BAU |            | Mar-25 | Green       | Tier 1 (Prevention)         | <p>The major project under bridging the digital divide is AGILE (Aberdeen Guide to Independent Living and Enablement. AGILE is now at the printers to have a hard copy. Focus has moved to the webpage in making it more accessible. The site will have word document that can be used with word translation tool for those that need it. The digital team are in talk with NHSG so that the partnership can fund a site that is more user friendly &amp; current. The digital team are working to modernise the site and users will be able to have the content read to them should they need that feature The team is exploring changes to colours that are more accessible but keeping the SVSC branding. Care Management TEC@QUAY is encouraging teams to visit, and Wellbeing coordinators are planning on holding a meeting there and have a tour the premises. The wellbeing coordinators are supporting the ACC wide digital group in the community.</p> <p>Digital workshops and activities were delivered at the Granite City Gathering on 24 June which had a target cohort of those approaching or currently retired. Initial feedback from people attending the event has been very positive.</p>   |
| Digital           | AFHL03 | Make Every Opportunity Count by ensuring patients, clients and their carers are signposted to relevant   | MEOC                               | BAU | 01/04/2022 | Mar-25 | Green       | Tier 1 (Prevention)         | <p>Operationally the current status is that Pilot training was delivered to Library staff. There is to be a report and evaluation before scaling up to wider audience.</p> <p>Met with operational lead for MEOC Grampian they have created a tool set and are keen for joined up approach and sharing of resources and materials.</p>   |
| Digital           | SE05   | Support the implementation of digital records where possible   | Digital Records                    | BAU |            | Mar-25 | Green       | Tier 1 (Prevention)         | <p>2 DPIAs have been submitted to ehealth for enhancements to morse O365 Calendar sync so staff can view busy times when scheduling Patients .Also integration with Trak care so demographic can be updated along with patient pathways a notes and appointments.</p> <p>The Morse TPM has now been appointed and will commence in post on 28th August 2023</p>  |
| Digital           | SE06   | Support the implementation of Electronic Medication Administration Recording (EMAR) in our care homes.   | EMAR Implementation                | FTP |            | Dec-23 | Green       | Tier 1 (Prevention)         | <p>Working with Scottish Care to gather information on use of eMAR nationally and identifying potentially suitable care homes for a pilot. Survey undertaken of Aberdeen care homes gathering info on current use of digital care planning use and software and use of eMAR (confirmed no local care homes currently use eMAR). One potential pilot site identified, scoping suitability. Governance for project agreed to come through the Care Home Oversight Group.</p>   |
| Digital           | SE07   | Seek to expand the use of Technology Enabled Care (TEC) throughout Aberdeen.   | Expanded Use TEC                   | BAU |            | Mar-25 | Green       | Tier 1 (Prevention)         | <p>Use of TEC a focus of the Social Care Sustainability work being reported through Whole System Decision Making Group. SRS Digital Support Hub Launched in June. Currently agreeing process and initial referrals. Test of change with new device across the pathway.</p> <p>Balnagask Court TEC project in discovery phase with review of current systems complete and requirements ongoing. Application for Health Foundation 'Tech for Better Care' programme submitted end June. Business case and options appraisal being prepared. Project initiated for the replacement of meal ordering system in very sheltered housing. Staff engagement, and tenant/family engagement has started. collating feedback to help inform what the solution could look like</p> <p>TEC Plan 2023-2025 finalised and discussed with SRO. Governance through the Social Care Pathways Board with a TEC Short Life Working Group being set up. Exploring the setting up of monitoring/reporting TEC usage statistics through D365.</p>   |
| Digital           | SE09   | Deliver a Single Point of Contact for individuals and professionals including a repository of information  | SPOC for Individuals/Professionals | BAU | 01/04/2023 | Mar-24 | Green       | Tier 1 (Prevention)         | <p>Met with SRO and confirmed the scope of the objective for next year and the longer term plan . Have initiated a options appraisal along research for a business if a new or upgrade to an existing digital solution is recommended.</p>   |
| Digital           | SE10   | Review the future use of Morse in Community Nursing and Allied Health Professionals  | MORSE Review in CN/AHPs            | BAU |            | Mar-24 | Not Started | Tier 1 (Prevention)         | <p>Evaluation on the implementation of Morse was presented to LJB April 2023.</p> <p>Pan Grampian approach likely to be taken and Aberdeenshire are funding a TPM to compile a business case for Grampian. This project will be undertaken by the TPM resource once appointed.</p>   |
| Digital           | SE12   | Deliver Analogue to Digital Implementation Plan  | Analogue 2 Digital                 | FTP |            | Mar-25 | Green       | Tier 1 (Prevention)         | <p>The project team continues to liaise with the Digital Office as an early adopter in the Shared Alarm Receiving Centre (ARC) Framework. The tender was closed on 10/05. Commercial and Qualification evaluations underway and anticipated to be completed by 1st of August. Framework is expected to go live beginning of September. The plan is to rollout the new ARC between January and April 2024.</p> <p>The order for the digital community alarms was placed on 5th of July 2023. The rollout of around 1800 digital alarms will commence next week.</p> <p>Sheltered and very sheltered housing sites had been surveyed to scope out the infrastructure required for the digital transition. These requirements will be confirmed with Digital &amp; Technology before exploring the best procurement route.</p>  |
| Flexible Bed Base | KPS11  | Build on our intermediate bed-based services to create 20 step-up beds available for our primary care multi-disciplinary teams (MDTs) to access  | 20 Step-Up Beds                    | FTP | 01.03.2022 | Sep-23 | Closed      | Tier 2 (Early Intervention) | <p>Due to progress on the workstreams identified (Rosewell Step-up and Woodlands GP Admission Beds) not moving forward as anticipated an SBAR was produced and taken to SLT on the 7th June and a discussion was had. Agreement was made to stop the continuation of this as a separate project on the delivery plan due to the close links with the frailty and rehab programmes of work. Step up beds must be clearly identified and planned for within these programmes.</p>  |
| Flexible Bed Base | KPS12  | Increase our hospital at home base with an ultimate ambition of 100 beds. These will be for Medical and Respiratory pathways, as well as the current Frailty, End of Life Care and OPAT pathways.  | H@H Beds 100                       | FTP |            | Sep-25 | Green       | Tier 3 (Response)           | <p>A new project plan was put in place in April 23 to increase the 37 H@H beds to 55 beds by November 23. Key milestones include an increase in 5 OPAT beds, 5 Respiratory Medicine beds (by the end of July), with a further 3-5 Respiratory beds and 3 Frailty beds by November 23. These increases will take the total capacity to the funding currently in place for H@H. This increase has been agreed by the Unscheduled Care Programme Board and has been shared with the Scottish Government as part of the improvement measures identified by NHS Grampian.</p> <p>Successful trials of the first Respiratory H@H took place in June 23 and gradual opening of the 5 beds is taking place in July.</p> <p>Further increases in beds will require additional funding / transfer of resource to be identified, aim to have plans in place by autumn 2023. The Target for 100 beds for 2025 remains.</p>   |

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| Frailty        | KPS13  | Deliver the second phase of the Frailty pathway and undertake a review of implementation to date to identify further improvements to be incorporated into the programme plan.   | Frailty Pathway 2nd Phase and Review          | FTP |            | Mar-25 | Green | Tier 3 (Response)           | <p>The review of the Frailty Programme plan was produced and approved by the Frailty Oversight Group in April 23. An updated plan was developed but this has been paused as the remit of the group has been updated to reflect a Pan-Grampian approach. This will ensure the three Health &amp; Social Care Partnerships work collaboratively on their approach to frailty.</p> <p>The HIS-IHUB bid was unsuccessful for Aberdeen City and Aberdeenshire, however Moray was successful and it is anticipated they will link in their progress with this work into the wider frailty group.</p> <p>A new draft programme plan has been produced to reflect the Pan-Grampian approach and will be further developed at a Frailty engagement event with representatives from the three areas coming together in September 23.</p> <p>Significant work in a challenging environment remains to ensure successful delivery of the frailty programme but this this is supported by the updated approach and programme plan once fully developed.</p>   |
| Home Pathways  | AFHL05 | Develop and deliver local and sustainable system flow and return to home pathways with partners, supporting reduced hospital  | Home Pathways                                 | FTP | 01/06/2022 | Mar-25 | Amber | Tier 1 (Prevention)         | <p>Planning Permission for the Stoneywood development has been granted. Market Position Statements are currently being developed to inform the Local Housing Strategy with a target date for completion of 1/11/23.</p>  |
| Infrastructure | SE20   | Develop an interim solution for the provision of health and social care services within the Countesswells housing development and work on the long-term solution  | Health and Care in Countesswells              | BAU | Apr-20     | Mar-25 | Green | Tier 1 (Prevention)         | <p>A unit at the new retail site at Countesswells has been purchased by NHS Grampian. Initial work has been done to identify suitable services to operate from the unit. The design team have provided a proposed plan and costs. Initial plans for 2 consultancy rooms with supporting space have been approved by the leadership team. Our consultant architects are now producing a full design and costing for the work. A project team is being established to finalise the configuration of services that will operate from the facility. An HAI-Scribe infection control assessment has been carried out. A paper on the works required to fit out Countesswells was approved by NHSG Asset Management Group in June 2023. Developer obligations have been identified as applicable to be used for this interim health solution, it is anticipated that the build/fit out works will take approx. 4 months to complete. With this in mind, an entry date for services is estimated at Autumn 2023.</p>  |
| Infrastructure | SE21   | Assess future infrastructure needs and engage with partners to ensure these needs are met.  | Infrastructure Plan                           | BAU | Mar-22     | Mar-25 | Green | Tier 1 (Prevention)         | <p>A wide range of colleagues from across Grampian were involved in contributing to the 2022 Primary Care Premises Plan update. This was submitted to the July NHSG Asset Management Group and approved. They have instructed the Primary Care Premises Group to carry out a major overhaul of the plan for the 2023 update. This has been reported to the PCPG and remitted to its plan sub-group for action. We are scoping the extent of work that is required to provide the level of detail that AMG expect for the 2023 update. Gathering information from premises across Grampian is required and a questionnaire for all premises is being explored as a feasible way to deliver what is required for the 2023 update. It is expected that the gathering of information shall take part during the latter part of June 2023 and in July 2023. With the first version for the overhauled plan due to be put to AMG in August 2023.</p>   |
| MHLd           | AFHL07 | Work with Children's Social Work and health services, to predict and plan for future Complex Care demand including developing and implementing a Transition Plan using the GIRFE multi-agency approach for those transitioning between children and adult social care services, initially for Learning Disabilities | Complex Care Future need and Transition       | FTP | 01/06/2022 | Mar-24 | Green | Tier 2 (Early Intervention) | <p>Learning Disabilities Transitions</p> <p>Transitions project for year 2 has been combined from year 1 priorities of LD transitions pathway development and implementation and Transitions for those with complex needs. This project covers both early intervention and response Tiers. Transitions Pathway is being explored via a project group and development of a professional guide, parent/carer information and information sessions. This project is also aligned to the GIRFE design process being undertaken at present which should assist with journey mapping and improving user experience. An oversight group has come together to ensure strategic alignment and links to the Complex Care Programme Board which has within its remit a review of children transitioning from Campbell which will widen out over time to other service models which pose challenge. Consideration is also being given to the ability of providers to support younger age ranges in more traditional adult service models. Gain approval for DPIA, collated and reviewed survey replies from Journey mapping event. Attended GIRFE day session on 14/06. Presented to LIB on transitions project and GIRFE. Held networking transitions event at Len Ironside Building which was well attended and well received by all in attendance. Gathered and processed survey data following on from the event. Continued to work with service colleagues to input and review transitions guide. Meetings in place to collate feedback. Contact made with graphic and website so we are ready to go when then the final draft is ready.</p> <p>Complex care</p> <p>Children's transitions remain a key topic on the Complex Care Programme Board and LD Operational Group agendas. A meeting has been rescheduled with the relevant Service Manager, Senior Care Manager and Consultant Social Worker for the 24/07/23 to discuss how we can progress identifying children who meet the definition of complex care i.e. who's transitioning now, whose journey will begin soon i.e. 14years+, and understand how we can begin identifying children with learning disabilities and complex care needs at early stages, to monitor how their needs are evolving up to, and throughout, their transitioning journey.</p>  |
| MHLd           | AFHL08 | Deliver a capability framework for a workforce to support complex behaviour.  | Complex Care Workforce and Skills Development | FTP | 06/04/2023 | Sep-23 | Green | Tier 3 (Response)           | <p>Meetings with the following care providers have been set up across July/August 2023 to build on the draft capability framework:</p> <ul style="list-style-type: none"> <li>• Enable</li> <li>• Voyage Care</li> <li>• Inspire</li> <li>• Community Integrated Care</li> <li>• The Richmond Fellowship</li> <li>• Affinity Trust</li> <li>• Scottish Autism</li> <li>• Thera</li> <li>• Principal Clinical Psychologist undertaking a review of PBS.</li> </ul>  |
| MHLd           | AFHL09 | Progress the Grampian wide MHLd Transformation Programme monitored by the Portfolio Board   | MHLd Programme                                | FTP | 01/06/2022 | Mar-25 | Amber | Tier 3 (Response)           | <p>A Strategic Huddle Workshop was held on 06/07/2023 to review the Huddle's purpose, set-up and aims. A MHLd Portfolio Board workshop, alongside the Public Empowerment Group has been set up for the 04/09/2023, to review vision, aims, priorities linked to increased projects/priorities being identified. Project overview as follows:</p> <p>Forensic Services: Limited updates provided and lack of project lead. Agreed SRO now in place to provide direction to the group.</p> <p>LD Health Checks: To date, a pan-Grampian approach for this delivery model has not been achievable. A small pilot in Shire at a Vaccination Centre, using a GP patient list, is being pursued. Chief Nurses in City and Moray have been approached to ascertain their preferred delivery model.</p> <p>PT Improvement Board: Collated whole system PT trajectory submitted to Scottish Government (8th June) as per request linked to ADP, further completion of PT &amp; CAMHS Trajectories were completed as requested and submitted (02 Aug 23). Job plan template agreed at PTIB on 7th June. Implementation of job plans on agreed template across teams progressing, aim for mid-July completion.</p> <p>OA &amp; LD Service Model: Communication planning is underway for OA &amp; LD projects and comms should be issued end of June/early July. Matt Colyer and Angus Lorimer have been identified as the pathway leads with work ongoing to identify members necessary to carry out a review of these service models to conclude organisational process work associated with temp closure of two OA day hospitals, and relocation of LD wards from Elmwood to RCH.</p> <p>Adult Mental Health Mapping Exercise: Communication planning has begun for Adult Mental Health Pathway mapping with an initial meeting of an Expert Group taking place on 7 July 2023 to provide information:</p> <ul style="list-style-type: none"> <li>•The Pathway Mapping Programme</li> <li>•The pathway mapping process</li> <li>•The timeline and dates for your diary</li> <li>•The governance and reporting arrangements</li> </ul> <p>This project is aligned to the Pathway Mapping Programme (including Older Adult and Learning Disability) with the outputs of this project will likely result in further project(s) to be delivered in 2024-25.</p> <p>Review &amp; Modernisation of MHLd Workforce: First initial meeting of the R&amp;M MHLd Workforce project board was on 27/06/2023 and focused on presentations from NHS Lothian and Tayside on their introduction of band 4 posts, recruitment process and framework for training and development. Meeting organised to discuss project timeline and activities taking place on 07/07/2023.</p> <p>Public Empowerment Group: Public Empower Group Officer SBAR approved for extension by 11 months at 7.5 hours per week Strategic Huddle. Funding is still being sought for this role. PEG adopting a new approach to attracting lived-experience involvement in PEG meeting by focusing each meeting on a specific service e.g. autism. The next PEG meeting will focus on Autism Strategy and invitations to those with lived-experience of autism.</p> |

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| MHLD         | AFHL09f | Develop a Mental Health triage approach in Primary Care to improve patient experience and promote self-management                        | Mental Health Triage in Primary Care settings | FTP | 01/06/2022 | Mar-25 | Green | Tier 2 (Early Intervention) | A Test of change is in operation - Mental Health practitioner within a selected GP practice to deliver MH assessment and support without the need for GP referral, in a timely manner and with onward referral (as needed) to other MH supports. The test of change commenced in November 2022 in Kinloch and Cove Medical Practice. Data gathering and analysis is in place to understand the impact of the service and how it interacts with other areas of provision. A reduction in GP referral and time is being evidenced as well as improved patient experience with a low rate of onward referral required due to the early access to MH Triage, Assessment and Support (all as required). Funding has been sought from the community MHLD budget to continue the test of change within 2023 whilst awaiting a confirmation of SG funding. There were a number of GP practices interested in participating in the test of change and scaling up to alternative demographics would be helpful in further evaluating the model. Continue to raise awareness and look into possible funding opportunities. Continue to monitor and evaluate the pilot, gathering information on referrals etc from the MH practitioner. Update infographic and ensure the information is known to the wider team. Investigating other pathways and options that can tie into the MH practitioner service. Linked in with primary care team to explore other options for funding and professional networking. Linked in with the GP leads and have been invited to present at their next meeting. Completed SBAR and sent out to professional networks. Team recorded presentation on pilot and sent round to all GPs with sessions offered to ask questions. Start of a professional network.   |
| MHLD         | AFHL09g | Review strategy and arrangements for Autism/Neurodevelopmental including further development of the Autism Assessment service and        | Autism and Neurodevelopmental Assessment      | FTP | 1/04/23    | Mar-25 | Amber | Tier 3 (Response)           | An Autism Strategy workshop for City was held on the 18/04/2023 with actions taken forward. Plan to meet quarterly. An AAAT focus group has been set up with City, Shire and Moray will take place monthly. It will also discuss national guidance from NAIT and the requirement to develop a pathway approach for neurodevelopmental, where possible this is to be done on a pan Grampian basis in the first instance and ongoing if possible. No funding is to be provided by SG on this area of work although this was previously indicated. As such this escalates the project BRAG status.  |
| MHLD         | AFHL09h | Develop and implement approaches to support Suicide Prevention and alignment to national Suicide Prevention Strategy                     | Suicide Prevention                            | FTP | 01/04/2023 | Mar-25 | Green | Tier 1 (Prevention)         | Final service specification was circulated and approved which included feedback from SAMH. The contract started 1st May 2023. Quarterly monitoring meetings have been agreed. Sub-groups were identified by the NESPLG meeting and there will be City representatives relating to Building Community Capacity, Children and Young People, Lived experience, Bereavement and Data analysis and risk This has started. Aberdeen City staff to link in with public health and police Scotland for City working group.   |
| Prevention   | PIH01   | Reduce the use and harm from alcohol and other drugs including through the Drugs Related Deaths Rapid Response Plan                      | Alcohol & Drugs Reduction                     | BAU |            | Mar-25 | Green | Tier 1 (Prevention)         | We have established a sub-group of the ADP to take forward learning and best practice in preventing drug deaths. The group is chaired by Fraser Bell, COO and is partnership with Public Health Scotland. The group will seek to make service improvements across the whole system. There is ongoing work with schools and care-experienced young people in relation to primary prevention. There is ongoing work to establish Medication Assisted Treatment Standards (MAT). There are significant staffing / capacity issues with our specialist services  |
| Prevention   | PIH02   | Deliver actions to meet the HIS Sexual Health Standards  | HIS Sexual Health Standards                   | BAU |            | Mar-25 | Amber | Tier 1 (Prevention)         | Sexual health Services are under extreme pressure in terms of staffing to deliver day to day services which does not allow capacity to deliver improvements at this time. Project will continue into Y2. Public Health Team attending Sexual Health and BBV MCN meetings.  |
| Prevention   | PIH04   | Continue the promotion of active lives initiatives with our partners, for example the Physical Activity Academy, Active Travel etc.      | Promote Active Lives                          | BAU | Apr-22     | Mar-25 | Green | Tier 1 (Prevention)         | 1) Facilitating connections between sport providers, Sport Aberdeen, RGU, OT and other health and social care staff for Specialist Referrals for long term conditions. 2) Community Physical Activity Plan are a kickstart/entry level opportunity to re-join or re-start any physical activity ambitions for older adults. 3) Physical Activity Academy - plans to pilot upskilling of BAC staff in Sheltered Housing in Strength & Balance exercises & delivery. 4) Link with 'Ashgrove Connects' to discuss opportunities for active travel health behaviour change opportunities within project. 5) Working in partnership with Sport Aberdeen delivering classes using PA packs with older people 6) Working in partnership to increase active travel to Foresterhill Campus 7) discussing use of the National Physical Activity Pathway with NHSG.<br><br>Active Travel was promoted at the Granite City Gathering on 24 June, as a key prevention message and a way for people to live in better health for longer.<br><br>Active Travel funding opportunity supported by Paths for All was promoted at LEG meetings. Three funds with a combined value of £7m, aim to support community initiatives and groups who aim to increase uptake of walking, cycling, and public transport use to improve individual and community health, and protect our environment through cleaner air.<br><br>Data on active travel will be available in the upcoming Locality Planning Annual Reports due to be presented to RAPC on 19 September.  |
| Prevention   | PIH05   | Reduce smoking prevalence across population and prevent e-cigarette and emerging tobacco produce use among young people.                 | Smoking Prevalence                            | BAU | Apr-22     | Mar-25 | Green | Tier 1 (Prevention)         | Ongoing work has included:<br>Supported Aberdeen Tobacco Alliance to prepare end of project report with key finding that the number of smokers has reduced to 15% in the Scottish Household Survey.<br>Charleston Primary School Pilot on Vaping Prevention being delivered by Youth work and Health Improvement Officers.<br>Grampian tobacco Strategy Group developed logic model and plan for reducing vaping amongst young people. Strategy has been refreshed with an updated action plan. SLT being consulted on the Strategic Plan.<br><br>The Scottish Government has an ambitious target to reduce the smoking prevalence in Scotland to 5% by 2034, and the Tobacco Strategic Plan is Grampian's approach to working towards this target. Smoking is strongly linked to health inequalities and harm from smoking disproportionately impacts on vulnerable and disadvantaged people such as those with mental health issues; children and young people; those in the criminal justice system; and those who live in areas of multiple deprivation.<br><br>ACHSCP's Public Health Team have worked with colleagues from NHSG Public Health Directorate; Aberdeenshire and Moray HSCPs; NHS Grampian Community Pharmacy; and ASH Scotland to develop the new Tobacco Strategic Plan.<br><br>A LOIP project on Smoking Cessation is drawing to a close and a project close report will be reported to the CPA Management Group in August.   |
| Prevention   | PIH06   | Continue to deliver our Stay Well Stay Connected programme of holistic community health interventions focusing on the prevention agenda. | Deliver SWSC Prevention                       | BAU | Apr-22     | Mar-25 | Green | Tier 1 (Prevention)         | Grampian wide PH partnership developing strategic framework to improve mapping of mental health & wellbeing services (non-Clinical) in Aberdeen city, with focus on gaps in perinatal mental health provision. The Public Health Team have conducted an evaluation of peri-natal mental health provision in Aberdeen City and reported findings to the Maternity Voices Partnership on 4 July.<br><br>Health Improvement fund: Public Health Team facilitated decision making groups and the last of the HIF money has been allocated for financial year (22/23). We have received applications from various projects including support for asylum seekers, menopause, young people and gardening at sheltered housing complexes. The evaluation of HIF is ongoing and planning for the next round of HIF applications is going well, the next round of funding will open in September.<br><br>The Public Health Team have visited the vaccination centre in the Bon Accord Centre and will make best use of this hub to promote preventative health and social care measures and facilitate community engagement.<br><br>The Public Health team are supporting a working group to develop Community Led Health Approaches. This is a whole system approach to empower communities to take the lead on improving community health and improve outcomes. The Public Health team is working closely with colleagues from other HSCPs in Grampian and the NHSG Public Health Directorate.<br>Health issues in the Community tutor training continues to be delivered.<br>Motivation Action Prompt (MAP) training to be delivered by HIOs.<br>PEEP training to support disadvantaged parents and families continues to be delivered by HIOs<br>Child Healthy Weight tier 1 delivery plan agreed and Peep plans in place.<br>Food in Focus initiatives ongoing to improve vulnerable people's cooking skills and to support better food choices, this includes food growing and confidence to cook initiatives.<br>Supporting NHSG PH Directorate Healthy Futures Programme.<br>Supporting NHSG PH Directorate Breastfeeding pilot. |
| Prevention   | PIH06a  | Continue to deliver our Stay Well Stay Connected programme of holistic community health interventions focusing on social isolation.      | Deliver SWSC Social Isolation                 | BAU |            | Mar-25 | Green | Tier 1 (Prevention)         | *Care home initiatives continues in care homes across the city to promote meaningful activities via quarterly newsletter.<br>*Increased city membership of GMAAN and uptake of the CAPA care inspectorate opportunity.<br>*Projects currently being rolled out to combat social isolation, support carers & increase B.O.D. Men's Shed, Mastrick bus transport, Dementia Café, RCH dementia gardens and the Wee Blether pilot, Walking Football Wellbeing, TG sessions at Horizons, Sporting Memories, ALZ Scotland Dementia walk.<br>*Falls prevention awareness.<br>*Seaton now has 2 Soup and Sannies monthly and a community kitchen, Torry held a new Soup and Sannies.<br>*A brand new Recovery Conversation Café is going ahead at the Bridge Centre.<br>*Mighty Oaks on tour with expected new funding. Yoga for menopause with classes at Powis and Aberdeen Sports Village.<br>*Dee club boogie in the bar was a success with record attendance, Kinloch boogies is going from strength to strength.<br>*There is work being done to support Quarriers for sign posting carers. Technogym contract renewal completed and repairs are underway.<br>*Aberdeen Guide to Independent Living and Enablement (AGILE) updated and available online and in hard copies. AGILE guides being circulated around the city's community and health and social care facilities.<br>*Wellbeing Team leading on Granite City Gathering due to be held on Saturday 24 June with new initiatives post event with King's church on the North and Central localities .<br>*Setup of a stay well stay connected space at the new vaccination centre in Bon Accord in July with SWSC branding and Wellbeing coordinators activities.<br>Strong Wellbeing Team Presence at the Granite City Gathering on 24 June to promote staying well, staying connected as we get older.   |
| Prevention   | PIH07   | Continue to contribute to the Health Transport Action Plan (HTAP) and the Aberdeen Local Transport                                       | Contribute to Transport                       | BAU | Apr-22     | Mar-25 | Green | Tier 1 (Prevention)         | Scoping workshop on how to ensure health is more fully embedded into Aberdeen City's Local Transport Strategy was held on 23 June. The workshop brought together colleagues from Public Health, Transport, Planning, Environment, and Equalities to discuss the development of a Health Impact Assessment for the Local Transport Strategy.  |
| Primary Care | CT14    | Improve primary care stability by creating capacity for general practice   | Primary Care Stability                        | BAU |            | Mar-24 | Amber | Tier 1 (Prevention)         | The primary care team continue to work with GP practices to collaborate and discuss current challenges facing general practice. The situation in relation to practices closing their patient lists is ongoing and key discussions with senior leadership in the HSCP and NHSG, as well as Primary Care Contracts team, the Local Medical Council, and GP sub, the Scottish Government and the Central Legal office have continued. Following this the majority of practices have been instructed to open their lists from the 28th of July, however practices may choose to apply to close their list following a formal process.<br><br>In light of these current challenges and given the critical role that General Practice plays in the wider health and care system, the three chief officers across Grampian's three Health and Social Care Partnerships intend to develop a local vision for primary care with associated strategic objectives and implementation plan. The aim is to work with the general practitioners to create a more resilient and sustainable sector.   |



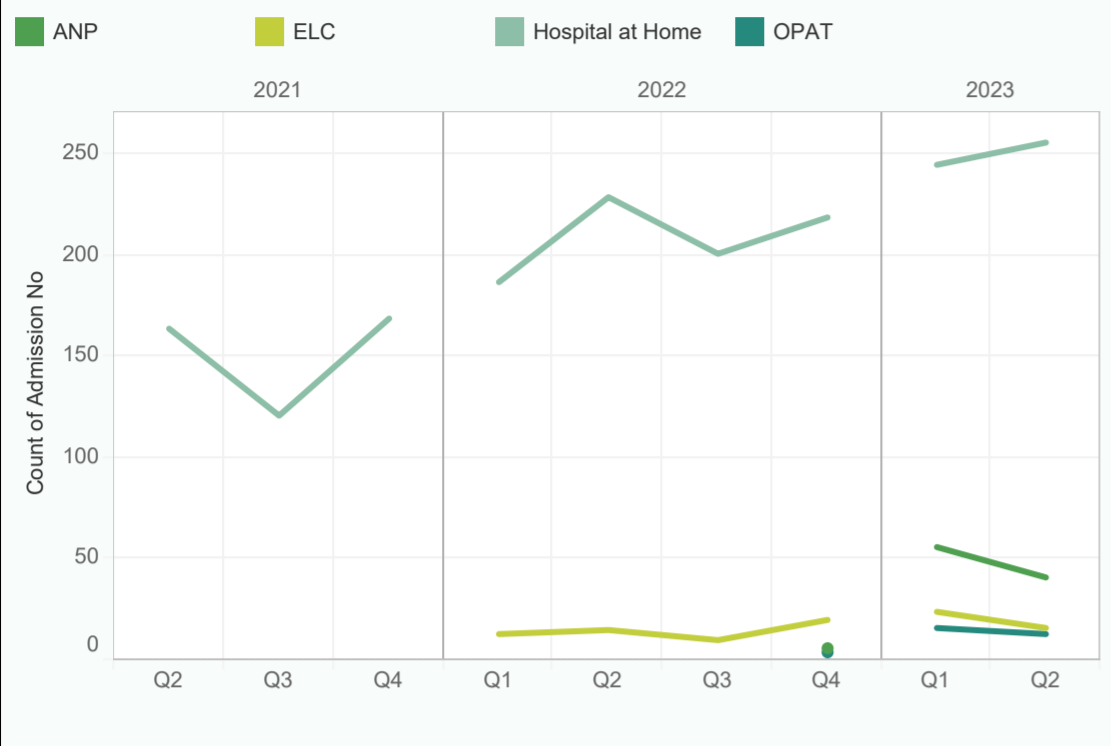
|                               |        |   |   |     |            |        |       |                             |  |
|-------------------------------|--------|---|---|-----|------------|--------|-------|-----------------------------|--|
| Primary Care                  | CT15   | Deliver the strategic intent for the Primary Care Improvement Plan (PCIP)   | Deliver PCIP                                  | FTP |            | Mar-25 | Green | Tier 1 (Prevention)         | <p>The PCIP programme continues to make progress towards the MOU2 and is at green status overall and are awaiting Scottish Government's allocation for 23/24 to confirm funding</p> <p>Version 6 of the Scottish Government PCIP tracker has been returned on 12th May and confirmation of funding is awaited. The Scottish Government are now in the process of preparing the analysis of these for the next National Oversight Group meeting on 17th July. (confirmed by e-mail 13/06/23)</p> <p>CTAC - practice-based service fully delivered; clinic-based service now operating from 5 sites (BOD, Bucksburn, City Centre, Healthy Hoose, Carden House) across the city, and 2 clinic-based sites now started in Airyhall and Kincorth as of May, 2023.</p> <p>This workstream has been delivered 98% against the 2018 PCIP plan.</p> <p>Vaccinations - fully delivered</p> <p>Pharmacotherapy - roll out of the service is almost at full capacity, as outlined in our agreed service model of 1 WTE to 10,000 patients. It is recognised this model is insufficient to deliver the full commitments of the Pharmacotherapy service outlined in the MOU2, and the service model required to deliver this is closer to 2.5 WTE per 5,000.</p> <p>The workstream has been delivered 99% against the 2018 PCIP plan.</p> <p>Recruitment continues for the remaining Technician posts and 2 x Pharmacist posts to cover forthcoming maternity leave.</p> |
| Primary Care                  | CT18   | Develop a vision for Primary Care   | Deliver PCIP                                  | BAU |            | Mar-24 | Amber | Tier 1 (Prevention)         | <p>The 3 HSCP Chief Officers have been set a joint objective for development of a vision and delivery plan for primary care in Grampian by November 2023. Currently this is being scoped into a programme of work with timelines and milestones as well as the identification of project resource and key stakeholders.</p>  |
| Redesigning Adult Social Work | CT01   | Redesigning Adult Social Work enhancing the role of Social Work in playing a guiding role in the promotion of personalised options for care and support.  | Redesigning Adult Social Work                 | BAU |            | Dec-24 | Green | Tier 3 (Response)           | <p>All adult social work teams have continued to receive an increased number of referrals. Some areas of redesign have been slowed down or paused due to operational, strategic and national priorities. The redesign of teams aims to create a different way of working to meet the increased demand and also to have in place a system of early identification and prevention to reduce demand into the system in the long term.</p> <p>A Flash report was presented to SLT on 25th January 23 to extend the timeline from Sep 22 to Dec 24 to enable the above to be completed. This was agreed.</p> <p>06/04/23 - Project listed as Tier 3 due to the statutory nature of Social Work provision as a response service. Where possible they would also be intervening in a manner in line with Tiers 1 &amp; 2. Review of hospital social work complete and report presented to SLT June 23</p>   |
| Rehabilitation Review         | KPS01  | Develop a strategic planning framework for reviewing of rehabilitation services across  | Strategic Planning Framework for Review Rehab | FTP | 01.08.2022 | Mar-25 | Amber | Tier 1 (Prevention)         | <p>There is a strategic planning framework in place which gives timeline for undertaking review across full adult rehab pathway. Learning developed during review of neuro rehab pathway will create a beneficial platform to commence this</p>  |
| Rehabilitation Review         | KPS07  | Undertake and implement a strategic review of the Neuro Rehabilitation Pathway  | Strategic Review Neuro-Rehab                  | FTP | 01.07.2022 | Oct-24 | Green | Tier 1 (Prevention)         | <p>An interim report was produced to provide an overview of progress to date and development of improvement ideas, as well as detailed improvement proposals, rationales and costings at the current stage. This provided a structure for a workshop on 26th June with the aim of PDG to find consensus and agree a draft implementation plan. However at this stage the estimated costs of refurbishing in house provision was unknown. At this stage an inhouse model to deliver Transitional Living was preferred option by PDG as an interim measure. The group favoured the 3 + 3 modelling to offer the flexibility of three actual beds and three at home beds for HomeLink team to support on discharge from NRU. This model of taking a blended approach on an interim basis with evaluation built in appeared to give measured step to redesign of pathway. Based on decision made at this workshop it was felt that additional workshop on 3rd July not required. NHSG Property Development Manager provided estimate on 7th July re proposal for in house remodelling at Woodend, the costing given was beyond overall budget. This was highlighted to PDG and highlighted lack of viability of this original proposal.</p>  |
| Resilience                    | SE13   | Develop a critical path for future budget setting and ongoing monitoring  | Financial Monitoring                          | BAU |            | Mar-25 | Green | Tier 1 (Prevention)         | <p>Regular reporting of the forecasted budget position to Senior Leadership Team, Risk, Audit and Performance Committee and the IJB Committee continues. The Delivery Plan Review will form part of the updated MTFP. This will be scrutinised by the Senior Leadership Team prior to being formally presented to the IJB in February 2023.</p>  |
| Resilience                    | SE15   | Develop proactive, repeated and consistent communications to keep communities informed  | Community Communications                      | BAU |            | Mar-25 | Green | Tier 1 (Prevention)         | <p>In terms of social media, Officers are looking at enhancing the amount of releases by increasing the number of staff who will be able to release official social media content.</p>   |
| Resilience                    | SE23   | Review Care for People arrangements   | Care for People                               | BAU |            | Mar-24 | Green | Tier 1 (Prevention)         | <p>The Grampian Local Resilience Partnership's Care For People Group meets on the 17th of August, 2023. Part of the agenda will be the consideration of revised Terms of Reference for the Group, including when the Group would be stood up in response to events.</p>  |
| Resilience                    | SE24   | Review SMOC arrangements  | SMOC Review                                   | BAU |            | Mar-24 | Green | Tier 1 (Prevention)         | <p>There is currently a review of NHSG's Daily System Connect (DSC) meeting arrangements which supports the draft options appraisal on Senior Manager On Call (SMOC's) duties. Eg allows SMOC's to be more strategic in their thinking and respond, on behalf of the IJB, as a Cat 1 responder under the CCA 2004.</p> <p>Once the review of the DSC meetings report has been approved, the SMOC's options appraisal document will be brought back to the Senior Leadership Team for consideration.</p>  |
| Resilience                    | SE25   | Create and adopt a Generic Emergency Plan to reflect Aberdeen city IJB's Cat 1 Responder responsibilities   | Cat 1 Responder                               | BAU |            | Mar-24 | Green | Tier 1 (Prevention)         | <p>Plans to get the Senior Manager On Call (SMOC) arrangements approved through the Senior Leadership Team first and then work on a generic emergency plan for the Partnership. This will include considering whether the Aberdeen City Council's Generic Emergency Plan can be used as a template for the Partnership plan.</p>   |
| Resilience                    | SE26   | Preparing for and managing the transition to a National Care Service (NCS) through the Aberdeen City NCS Programme Board  | NCS   | BAU |            | Mar-25 | Green | Tier 1 (Prevention)         | <p>National Care Service has been established since December 2022. It continues to meet on a monthly basis and is working to a Workplan covering the period 2022 – 2026. The National Care Service (Scotland) Bill is currently paused with the Scottish Parliament's scrutiny of the Bill likely to resume following the summer of 2023.</p>  |
| Social Care Pathways          | AFHL10 | Explore opportunities for working with those on Social Work unmet need lists to help support them while they wait, or divert them from the list   | Unmet need list support                       | BAU |            | Mar-25 | Green | Tier 1 (Prevention)         | <p>Focus has been on unmet need and waiting list. Increased capacity has been procured for care at home and recruitment of social workers to get through the backlog. Three new providers now in place and picking up packages from unmet need. Focus on waiting list to clear this. Work as part of social care pathway to look at support whilst waiting for assessment. July-23. unmet need list had reduced significantly and then increased due to target of waiting list. we have seen this has started to reduce again</p>  |
| Social Care Pathways          | CT02   | Undertake a strategic review of specific social care pathways utilising the GIRFE multi-agency approach where relevant and develop an implementation plan for improving accessibility and coordination. | Strategic Review Social Care                  | FTP | Jul-22     | Dec-25 | Green | Tier 2 (Early Intervention) | <p>A Programme Implementation Plan is in place to monitor overall progress of this work. Main updates at this point are:</p> <p>Project SCP3 - Hospital Social Work Review - now completed with report presented to SLT in June 23. All recommendations for the programme will be taken forward to improve the operation of the HSW Team. 1 recommendation for wider SLT consideration on 7 day working. This will close this project and further updates will be aligned to SCP4 on the programme plan.</p> <p>SCP 5 - Interim and Respite Care Update report completed and project item to be closed.</p> <p>SCP6 - Preventative &amp; Proactive Care - Initial point of Contact Working short life working Group established to map referral pathways and plan for tests of change.</p> <p>06/04/23 - Tier 2 listed as main transformation projects are focussed on intervening earlier to reduce requirement for tier 3 response. Due to the statutory nature of social work however there will be tier 3 services within scope.</p>   |
| Social Care Pathways          | CT04   | Implement the recommendations from the June 22 Adult Support and Protection inspection  | ASP Recommendations Implementation            | BAU | Jan-21     | Mar-25 | Green | Tier 3 (Response)           | <ul style="list-style-type: none"> <li>Improvement to recording by NHS Grampian staff of ASP activity – Complete: training curriculum has been amended and a specific Practice Note issued to patient-facing staff.</li> <li>Investigations taking too long, and case conferences taking place when needed – COMPLETE Marked improvement seen – investigations being held more timeously, increase in proportion of case conferences and reviews taking place – audit work is being progressed to provide assurance about this.</li> <li>Chronologies &amp; Protection Planning – Working Practice Guidance on most effective use of D365 and Chronologies is being developed</li> <li>Access to Advocacy – Significant improvement in relation to offer of and take up of advocacy. Being embedded into D365 throughout the process. Data collection around this being reviewed.</li> <li>Multi Agency Evaluation &amp; Involvement of staff in improvement work – Council Officer Support Groups are taking place and effective – including consideration of improvement work.</li> </ul>  |

|                      |        |  |                                      |     |            |        |             |                     |   |
|----------------------|--------|--|--------------------------------------|-----|------------|--------|-------------|---------------------|---|
| Social Care Pathways | CT05   | Deliver the Justice Social Work Delivery Plan  | Deliver JSW Plan                     | BAU |            | Mar-25 | Amber       | Tier 1 (Prevention) | <p>The continued withdrawal of the Level of Service Case Management Inventory (LS/CM) risk/needs assessment tool since 03 March 2022 continues to impact on the service, Aberdeen Justice Social Work are contributing to the testing phase currently being undertaken by the Scottish Government and it is envisaged that this risk assessment tool will be returned to use in its entirety by the end of this summer. We continue to use the paper based forms which impacts on time and resources.</p> <p>The Unpaid Work team continue to be displaced and occupying other council buildings on a temporary basis since January 2023 which require to be vacated in the coming months due to upcoming plans for these sites and identifying alternate permanent premises is proving difficult. Discussion and negotiations with the relevant departments are ongoing and alternate premises are being pursued with some urgency.</p> <p>There is little to update in terms of the requirement for JSW to use the Police Visor information database/system which will be replaced by the Home Office MAPPS database/system in 2024. Aberdeen JSW have secured an area for the installation of the necessary computer equipment, there continue to be issues with vetting of staff in terms of obtaining their agreement and we continue to attend the Visor/Mapps user groups as this is a national issue with differing arrangements currently across the country and Chief Social Work Officers across Scotland are in liaison with government departments to progress this.</p> <p>The replacement of the Carefirst recording system to D365 resulting in the lack of access to accurate up to date statistical information and data continues to be problematic and although some progress is being made concern remains that Aberdeen JSW may not be in a position to provide this to the Government as required within the expected timescale. We continue to work closely and meet with the Analytics and Insight team on a weekly basis regarding data capture and there are noted improvements with the development of this.</p> <p>The JSW service is managing the demands of the service appropriately and within the Delivery Plan objectives. The current Delivery Plan is regularly reviewed with a steering group taking forward actions from the plan and regular Best Practice and Performance Management Board meetings are ongoing.</p> |
| Strategy             | AFHL01 | Deliver on our Equality Outcomes and Mainstreaming Framework, report on our progress to both the IJB and the Risk, Audit and Performance Committee and plan to revise the EOMF in advance of the | Deliver EOM Framework                | BAU | 01/04/2021 | Mar-25 | Green       | Tier 1 (Prevention) | EOM Framework is a standing item of EHR group agenda, a number of areas being progressed including; DiversCity Officers Network, delivery of the Staff Equality and Human Rights awareness programme, review of the partnership's Equality and Human Rights Internal and external webpages. Bi-annual update report on EOMF presented to IJB on 25 April 2023 where the new EOMF and IA process was approved, website updated. Following review of our updated process and paperwork the Equality and Human Rights Commission, Scotland has cited Aberdeen City twice in a Good Practice document that has been circulated to all HSCPs.  |
| Strategy             | AFHL02 | Undertake and publish Health Inequality Impact Assessments, where relevant, for major service change, in conjunction with people and communities with the relevant                               | Publish HIAs                         | BAU | 01/04/2021 | Mar-25 | Green       | Tier 1 (Prevention) | New IIA process, including UNCR, is now in place following approval of this and the new EOMF by the IJB on 25 April 2023. Previous HIAs now published on our website as required and the new IIA process is now being used. This will be supported, initially, by the DiversCity Officer Network to help build support and capacity across teams as this develops. Capacity has limited our ability to implement this at a wider scale thus far.  |
| Strategy             | AFHL04 | Embed consideration of the impact of climate change in health and social care planning and in business continuity arrangements aiming to reduce our carbon footprint and                         | Climate Change and NetZero           | BAU | Aug-22     | Mar-25 | Green       | Tier 1 (Prevention) | Project update and future planning considerations submitted to IJB for awareness on 29 November 2022. Scoping continues to fully assess the work required. Climate Change Oversight Group (CCOG) established to provide oversight over all projects including those relating to culture change/training aspects that will be required. Climate Change and Sustainability Sections have been added to IJB template. Scoping/PID for review of business continuity arrangements and commissioning under development. Regular meetings of the oversight group have been scheduled. Initial discussions regarding the SG requirement of integrating financial considerations within budgets have taken place. An IJB seminar is scheduled for October 2023.   |
| Strategy             | CT17   | Monitor and evaluate the impact of the Carers Strategy on an ongoing basis factoring in early preparations for the next revision   | Monitor and Evaluate Carers Strategy | BAU |            | Mar-25 | Green       | Tier 1 (Prevention) | CSIG meets bi monthly and has circulated launch materials across the partnership for the recently approved Carers Strategy 2023 - 2026. Several engagement and support events were held for Carers across the City during Carers week 5 - 11 June. Our Consultation and Engagement Officer also had a Carers stall for raising awareness and sharing information to support Carers at the Granite City Gathering on Saturday 24 June. CSIG have also completed two development sessions focussing on actions in year one of the Carers Strategy action plan.  |
| Strategy             | KPS19  | Help people to ensure their current homes meet their needs including enabling adaptations  | Suitable Homes                       | BAU |            | Mar-25 | Green       | Tier 1 (Prevention) | DAG continues to meet quarterly and sub group established to look at the recently published Adaptations guidance, baseline assessment tool being used to ensure we are aligned with the new guidance. BAC delivered Telecare Learning and Development sessions April - June 2023 which targeted at a wide range of staff groups (NHS, ACC, Third Sector). Sessions booked at Woodend Hospital, Ward 102 ARI and Learning Hub. Sessions promoted through ACVO including awareness raising sessions to voluntary and community groups. Approach being undertaken as a PDSA cycle. Training on Telecare and TEC delivered collaboratively with BAC and SRS. Session booked to deliver Telecare awareness at RCH in April. BAC visiting all GP surgeries and community Centres to leave leaflets and put up posters promoting Telecare.   |
| Workforce            | SE01   | Deliver the Workforce Plan   | Develop Workforce Plan               | BAU |            | Mar-25 | Green       | Tier 1 (Prevention) | The workforce plan is aligned with the ACHSCP strategic plan 2022 – 2025 and focusses on three essential core elements; recruitment & retention, mental health & wellbeing, and growth & opportunities. A wider workforce consultation has been completed and feedback obtained which was considered alongside feedback from the Scottish Government Programme Office and SLT. The final version of the ACHSCP workforce plan 2022 - 2025 was approved by IJB on 29 Nov 2022. Delivery Group established and ToR developed, wider engagement event being planned for the summer 2023 and leads for actions being identified.  |
| Workforce            | SE02   | Develop and implement a volunteer protocol and pathway with a view to growing and valuing volunteering within the health and social care system  | Volunteer Protocol Pathways          | BAU |            | Sep-23 | Not Started | Tier 1 (Prevention) |   |
| Workforce            | SE03   | Continue to support initiatives supporting staff health and wellbeing  | Staff Health & Wellbeing             | BAU |            | Mar-25 | Green       | Tier 1 (Prevention) | Continuous work ongoing to deliver health and wellbeing initiatives. Initiatives and opportunities shared daily via OLT updates. Funding being sought from 23/24 budget process to continue initiatives.  |
| Workforce            | SE04   | Ensure our workforce are Trauma Informed   | Trauma Informed Workforce            | BAU |            | Mar-25 | Amber       | Tier 1 (Prevention) | ACC have £50k non-recurring funding to support this work and are trying to appoint a Coordinator<br>TIA workshop has now been convened, with shire/moray hscpc colleagues   |
| Workforce            | SE22   | Create and implement an SLT Team Development Plan  | SLT Development Plan                 | BAU |            | Mar-24 | Green       | Tier 1 (Prevention) | Workshop with Turning Tides was held on 26th May and a discussion on the Themes emerging from that took place at SLT meeting of 14th June. Two further sessions are planned for this year with a focus on developing the themes further.  |

FLEXIBLE BED BASE

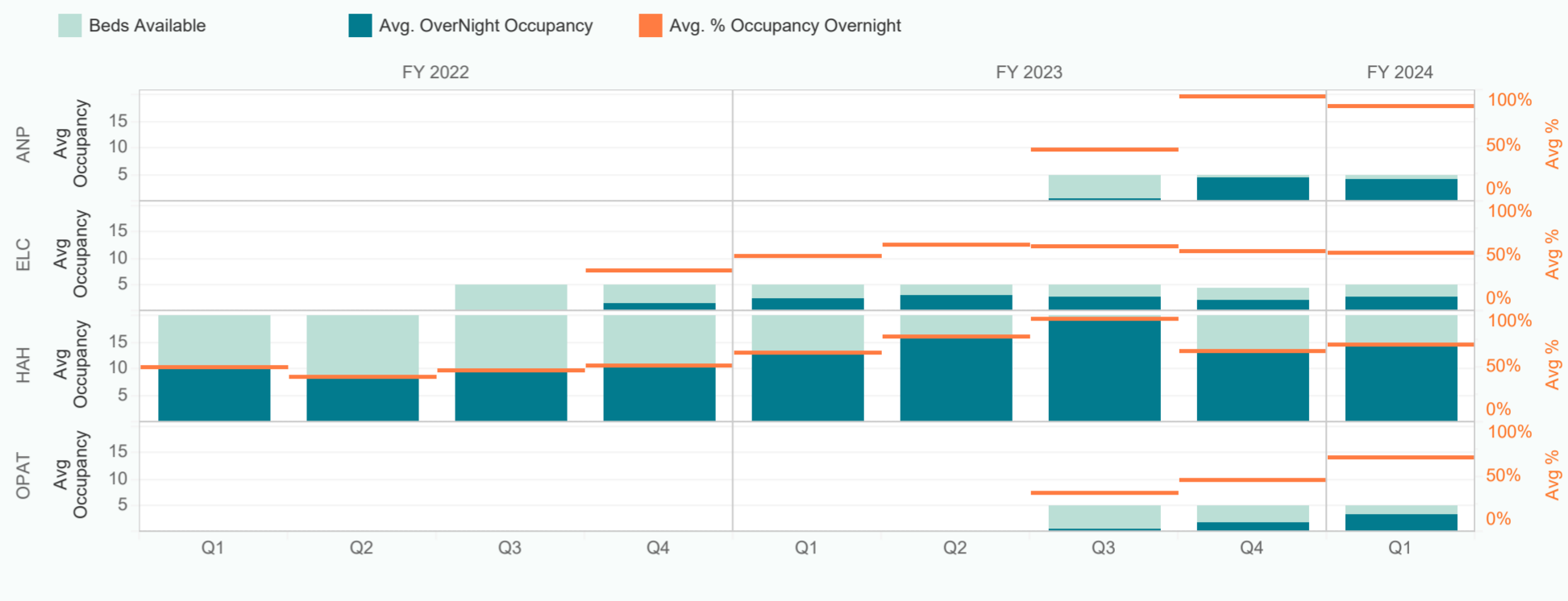
Hospital at Home Admissions (Ward Starts)

|                         | FY 2022 Q4 | FY 2024 Q1 |
|-------------------------|------------|------------|
| Hospital at Home        | 187        | 256        |
|                         |            | ▲ 69       |
| Hospital at Home - ANP  |            | 41         |
|                         |            | ▲ 41       |
| Hospital at Home - ELC  | 13         | 16         |
|                         |            | ▲ 3        |
| Hospital at Home - OPAT |            | 13         |
|                         |            | ▲ 13       |



Hospital At Home Capacity and Occupancy - Latest Quarter vs Baseline

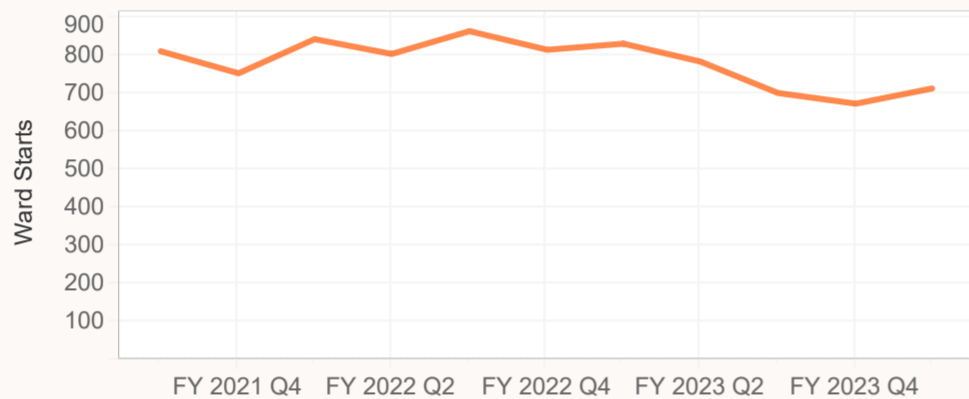
|      | Average Allocated Beds Available |            | Average Overnight Occupancy |            | Average % Occupancy |            |
|------|----------------------------------|------------|-----------------------------|------------|---------------------|------------|
|      | FY 2022 Q4                       | FY 2024 Q1 | FY 2022 Q4                  | FY 2024 Q1 | FY 2022 Q4          | FY 2024 Q1 |
| ANP  |                                  | 5.00       | 0.00                        | 4.34       |                     | 87.8%      |
|      |                                  | ▲ 5.00     |                             | ▲ 4.34     |                     | ▲ 87.8%    |
| ELC  | 5.00                             | 5.00       | 1.63                        | 2.65       | 38.2%               | 54.8%      |
|      |                                  | ● 0        |                             | ▲ 1.02     |                     | ▲ 16.6%    |
| HAH  | 20.00                            | 19.98      | 10.51                       | 14.36      | 52.6%               | 71.9%      |
|      |                                  | ▼ -0.02    |                             | ▲ 3.85     |                     | ▲ 19.4%    |
| OPAT |                                  | 5.00       | 0.00                        | 3.42       |                     | 69.1%      |
|      |                                  | ▲ 5.00     |                             | ▲ 3.42     |                     | ▲ 69.1%    |



FRAILITY

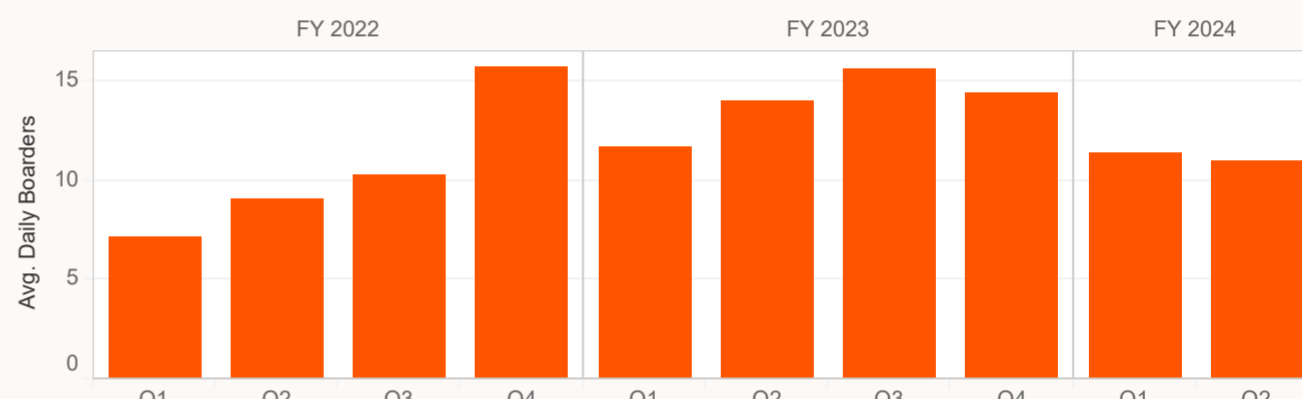
Ward 102 Ward Starts (Admissions)

|               | FY 2022 Q4 | FY 2024 Q1 |
|---------------|------------|------------|
| Ward 102, ARI | 816        | 714        |
|               |            | ▼ -102     |



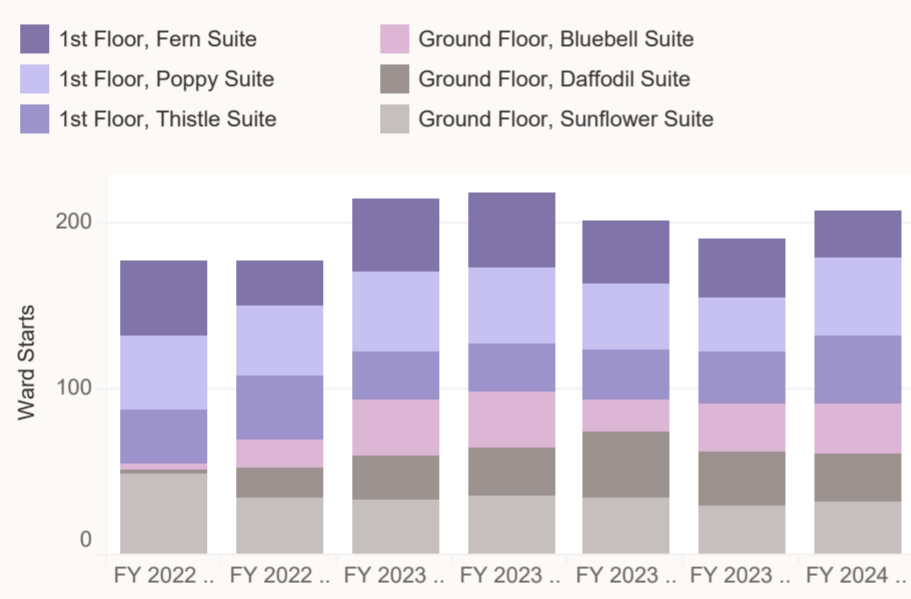
Ward 102 Average Daily Boarders

|                                 | FY 2022 Q4 | FY 2024 Q1 |
|---------------------------------|------------|------------|
| Ward 102 Average Daily Boarders | 15.7       | 11.3       |
|                                 |            | ▼ -4.4     |



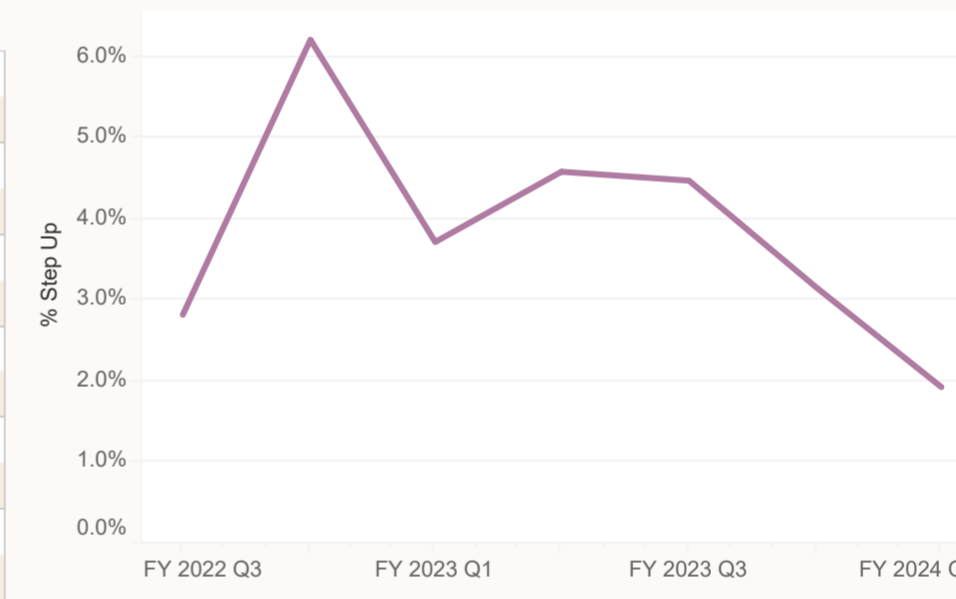
Rosewell House Ward Starts

|                               | FY 2022 Q4 | FY 2024 Q1 |
|-------------------------------|------------|------------|
| 1st Floor, Fern Suite         | 26         | 27         |
|                               |            | ▲ 1        |
| 1st Floor, Poppy Suite        | 42         | 47         |
|                               |            | ▲ 5        |
| 1st Floor, Thistle Suite      | 39         | 41         |
|                               |            | ▲ 2        |
| Ground Floor, Bluebell Suite  | 17         | 30         |
|                               |            | ▲ 13       |
| Ground Floor, Daffodil Suite  | 18         | 29         |
|                               |            | ▲ 11       |
| Ground Floor, Sunflower Suite | 35         | 33         |
|                               |            | ▼ -2       |



Rosewell House % Step Up (Based on IsFirstWard=1 or Previous Ward Desc='Hospital at Home' derived from Trakcare for each Admission)

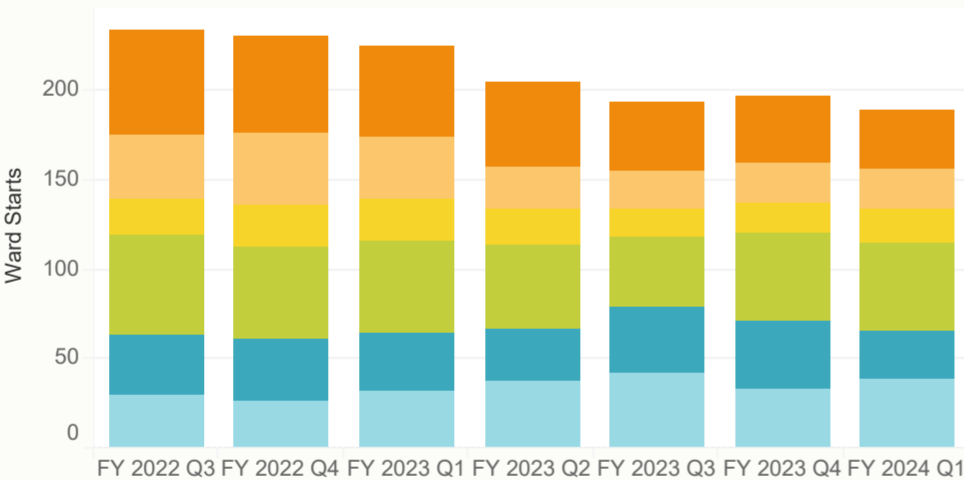
|                               | FY 2022 Q4 | FY 2024 Q1 |
|-------------------------------|------------|------------|
| 1st Floor, Fern Suite         | 7.69%      | 0.00%      |
|                               |            | ▼ -7.69%   |
| 1st Floor, Poppy Suite        | 7.14%      | 6.38%      |
|                               |            | ▼ -0.76%   |
| 1st Floor, Thistle Suite      | 5.13%      | 0.00%      |
|                               |            | ▼ -5.13%   |
| Ground Floor, Bluebell Suite  | 5.88%      | 3.33%      |
|                               |            | ▼ -2.55%   |
| Ground Floor, Daffodil Suite  | 16.67%     | 0.00%      |
|                               |            | ▼ -16.67%  |
| Ground Floor, Sunflower Suite | 0.00%      | 0.00%      |
|                               |            | ● 0%       |



REHABILITATION REVIEW

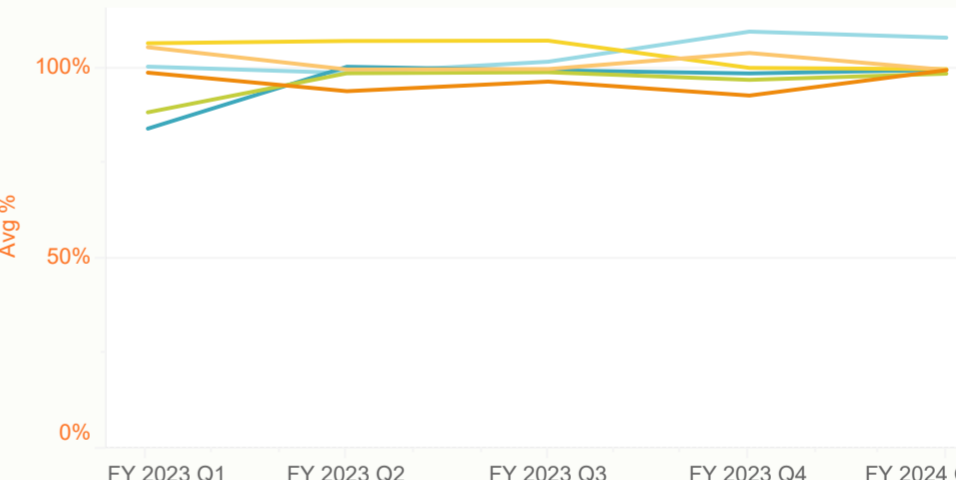
SOARS Ward Starts (Admissions)

|                        | FY 2022 Q4 | FY 2024 Q1 |
|------------------------|------------|------------|
| Links Unit             | 53         | 33         |
|                        |            | ▼ -20      |
| Morningfield House     | 41         | 22         |
|                        |            | ▼ -19      |
| Neuro Rehab Unit       | 23         | 19         |
|                        |            | ▼ -4       |
| Orthopaedic Rehab Unit | 52         | 49         |
|                        |            | ▼ -3       |
| Stroke Unit East       | 34         | 27         |
|                        |            | ▼ -7       |
| Stroke Unit West       | 27         | 39         |
|                        |            | ▲ 12       |



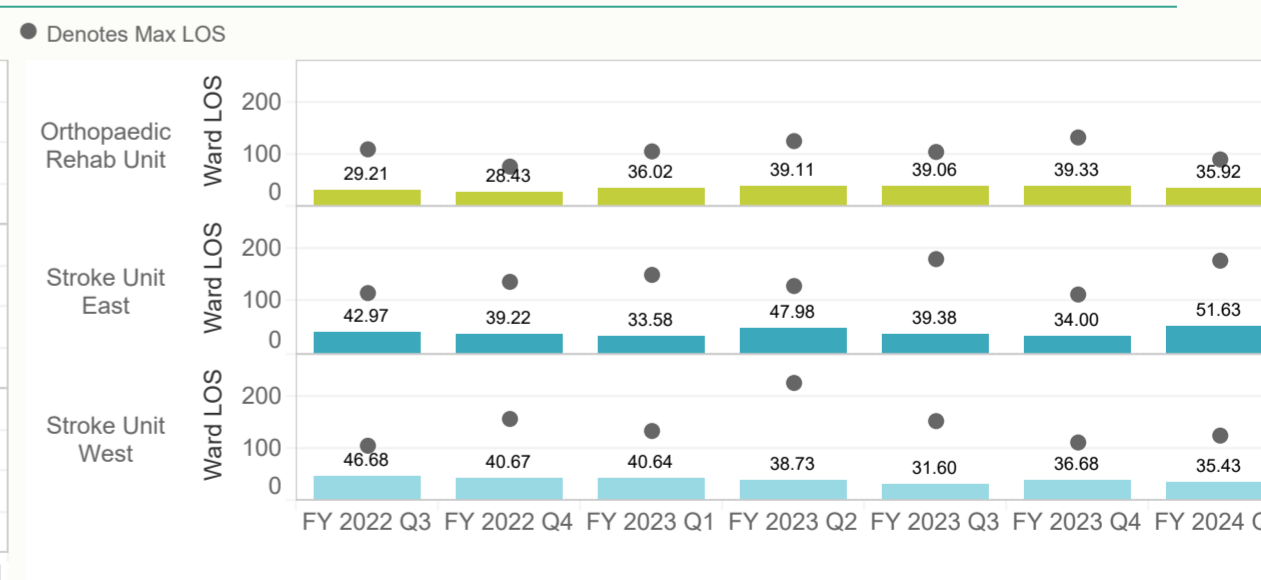
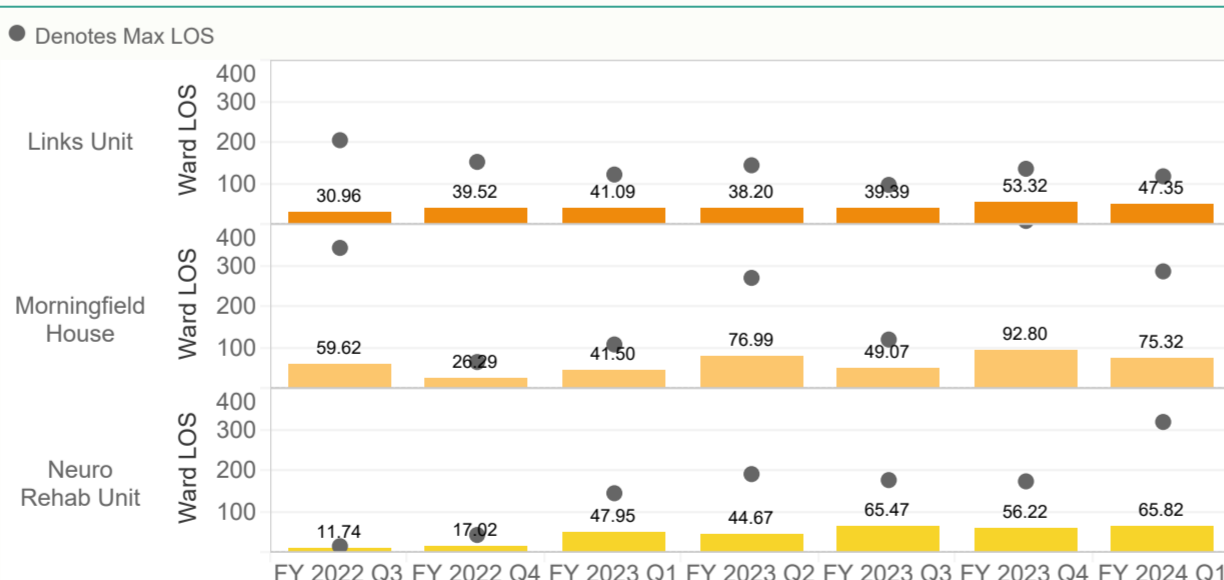
SOARS Average Occupancy

|                        | FY 2022 Q4 | FY 2024 Q1 |
|------------------------|------------|------------|
| Links Unit             | 101.3%     | 99.6%      |
|                        |            | ▼ -1.7%    |
| Morningfield House     | 98.3%      | 99.6%      |
|                        |            | ▲ 1.3%     |
| Neuro Rehab Unit       | 107.6%     | 99.8%      |
|                        |            | ▼ -7.8%    |
| Orthopaedic Rehab Unit | 86.5%      | 98.6%      |
|                        |            | ▲ 12.1%    |
| Stroke Unit East       | 79.1%      | 99.6%      |
|                        |            | ▲ 20.5%    |
| Stroke Unit West       | 99.8%      | 108.1%     |
|                        |            | ▲ 8.3%     |

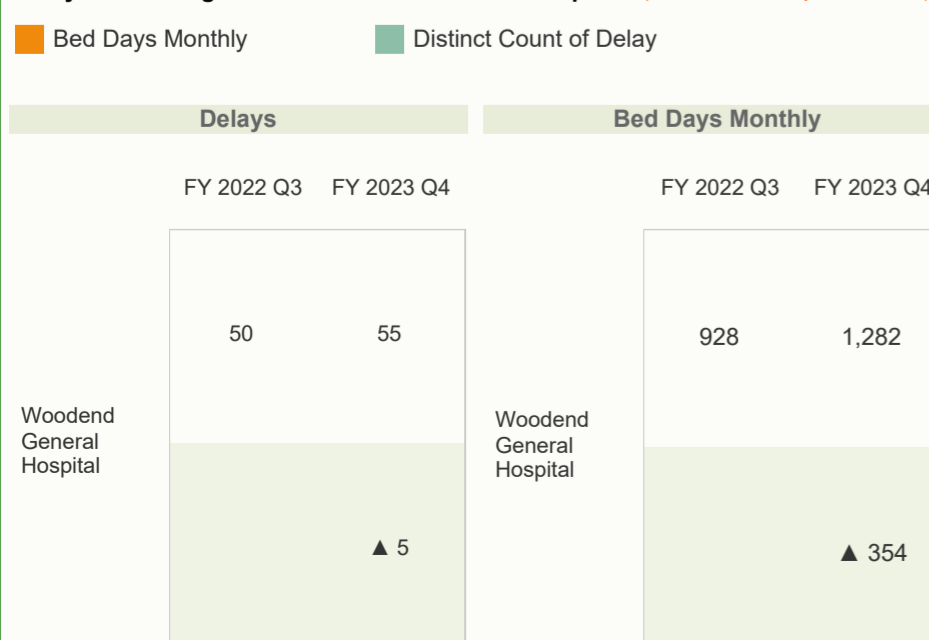


SOARS Average LOS

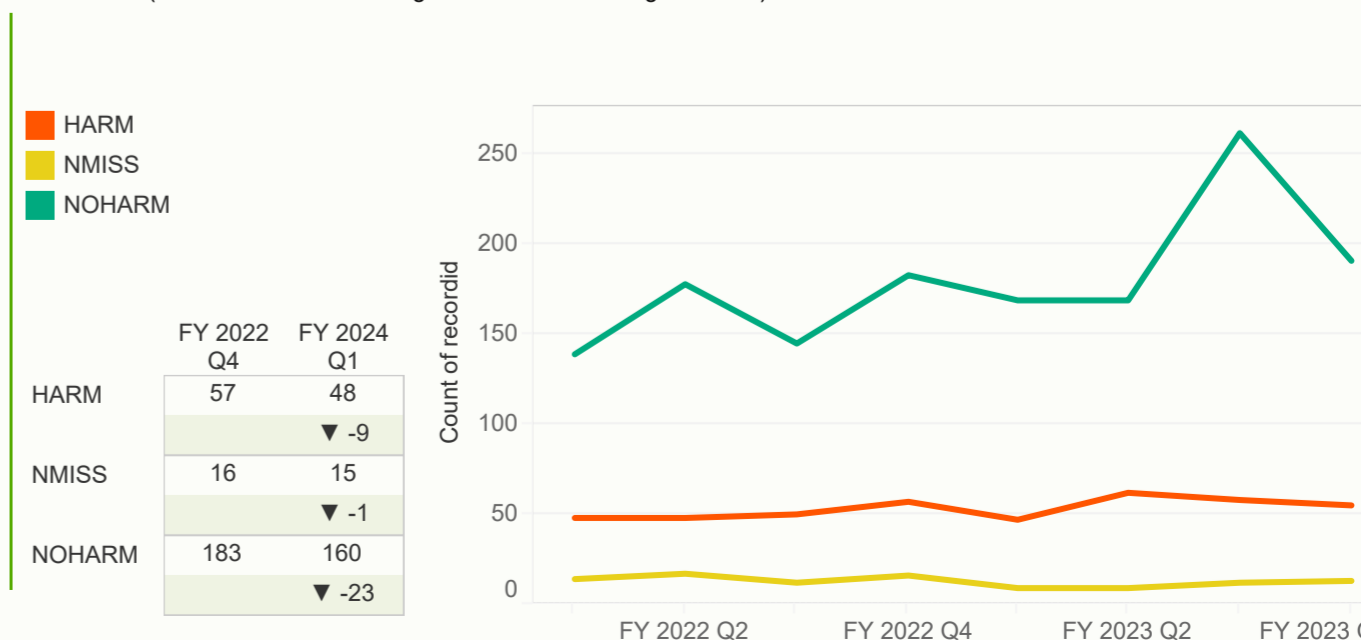
|                        | FY 2022 Q4 | FY 2024 Q1 |
|------------------------|------------|------------|
| Links Unit             | 39.52      | 47.35      |
|                        |            | ▲ 7.8      |
| Morningfield House     | 26.29      | 75.32      |
|                        |            | ▲ 49.0     |
| Neuro Rehab Unit       | 17.02      | 65.82      |
|                        |            | ▲ 48.8     |
| Orthopaedic Rehab Unit | 28.43      | 35.92      |
|                        |            | ▲ 7.5      |
| Stroke Unit East       | 39.22      | 51.63      |
|                        |            | ▲ 12.4     |
| Stroke Unit West       | 40.67      | 35.43      |
|                        |            | ▼ -5.2     |



Delayed Discharges - SOARS Ward Codes at Snapshot (Note Ward102 delays not included)



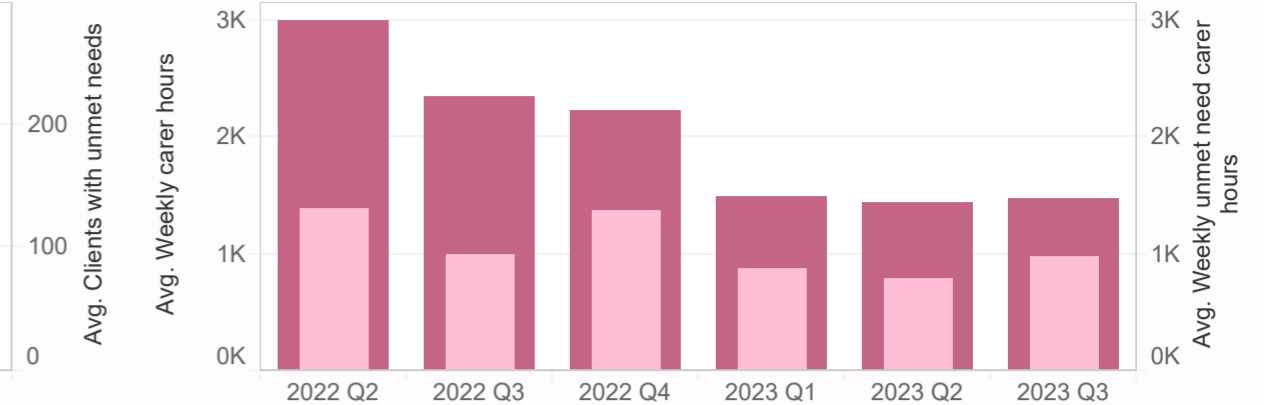
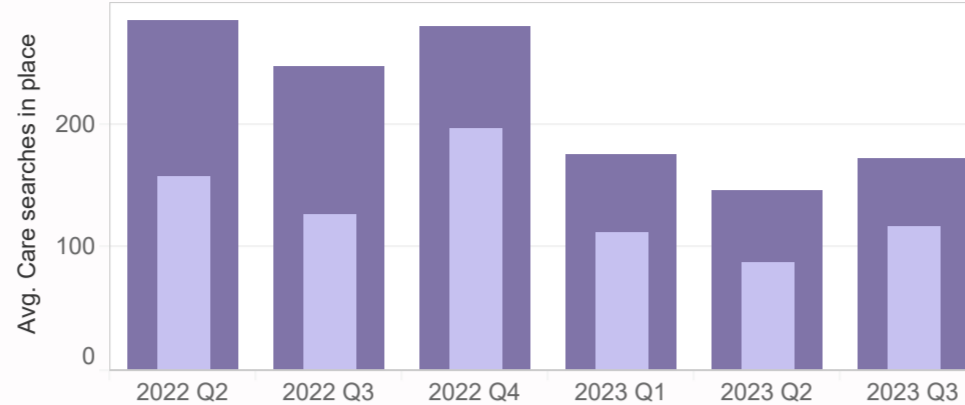
Datix Falls (All Falls Incidents Categorised to ABCITY Organisation)



**SOCIAL CARE PATHWAYS**

**OPEN CASES AND UNMET NEED (14+ DAYS OPEN)**

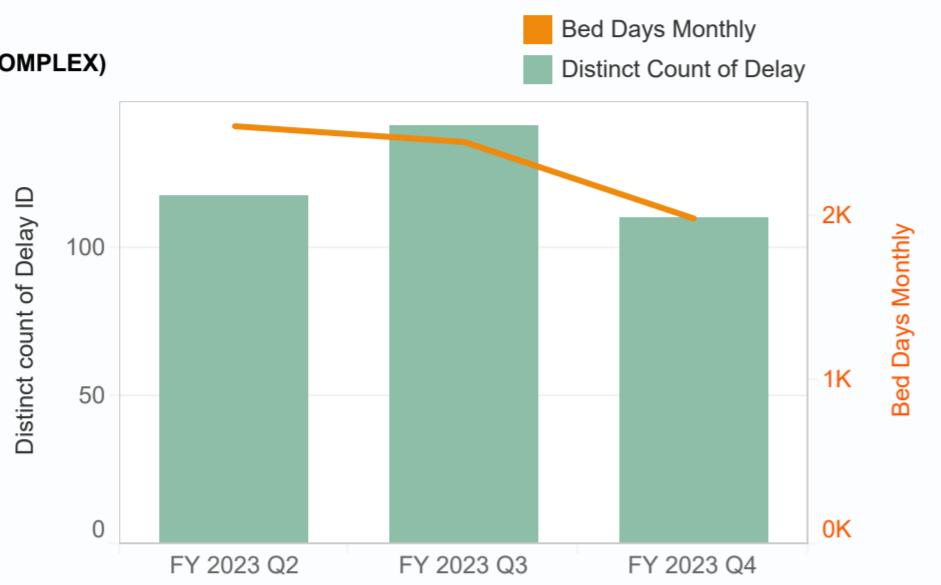
|                                    |         |                     |
|------------------------------------|---------|---------------------|
|                                    | 2022 Q1 | 2023 Q2             |
| Avg. Care searches in place        | 283.3   | 145.8<br>▼ -137     |
| Avg. Clients with unmet needs      | 152.5   | 87.4<br>▼ -65.2     |
|                                    |         |                     |
|                                    | 2022 Q1 | 2023 Q2             |
| Avg. Weekly carer hours            | 2,756   | 1,444<br>▼ -1,311.7 |
| Avg. Weekly unmet need carer hours | 1,225   | 794<br>▼ -431.4     |



**HOME PATHWAYS**

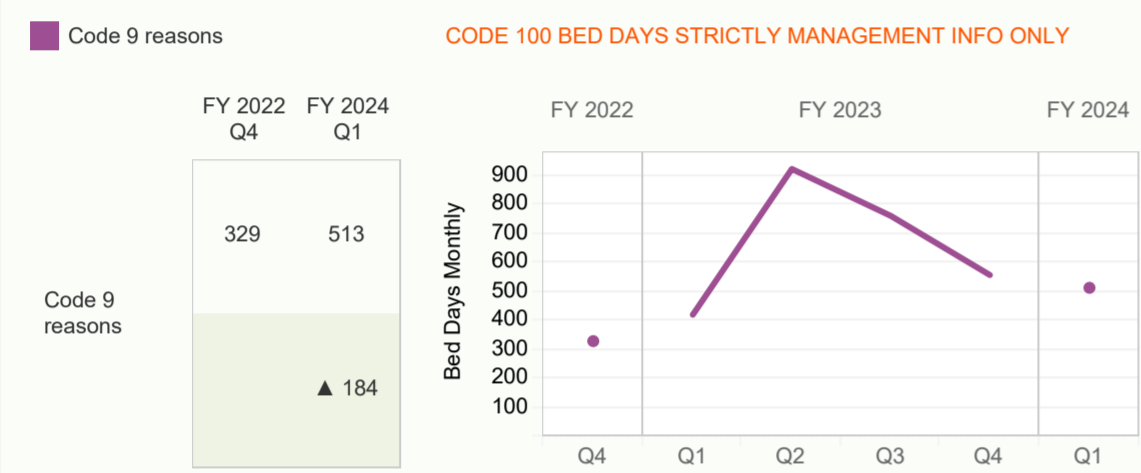
**DELAYED DISCHARGES (STANDARD AND COMPLEX)**

|                |            |                |
|----------------|------------|----------------|
|                | FY 2022 Q3 | FY 2023 Q4     |
| Standard       | 91         | 95<br>▲ 4      |
| Complex-Code 9 | 11         | 17<br>▲ 6      |
|                |            |                |
|                | FY 2022 Q3 | FY 2023 Q4     |
| Standard       | 1,258      | 1,424<br>▲ 166 |
| Complex-Code 9 | 367        | 557<br>▲ 190   |

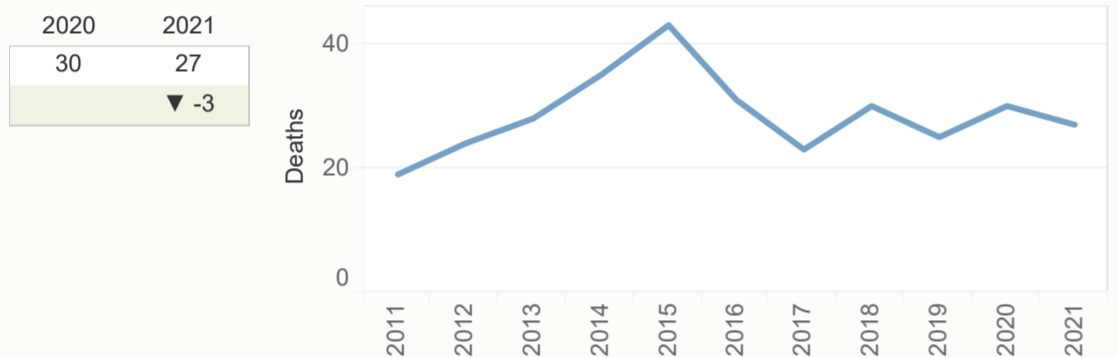


**MHLD TRANSFORMATION**

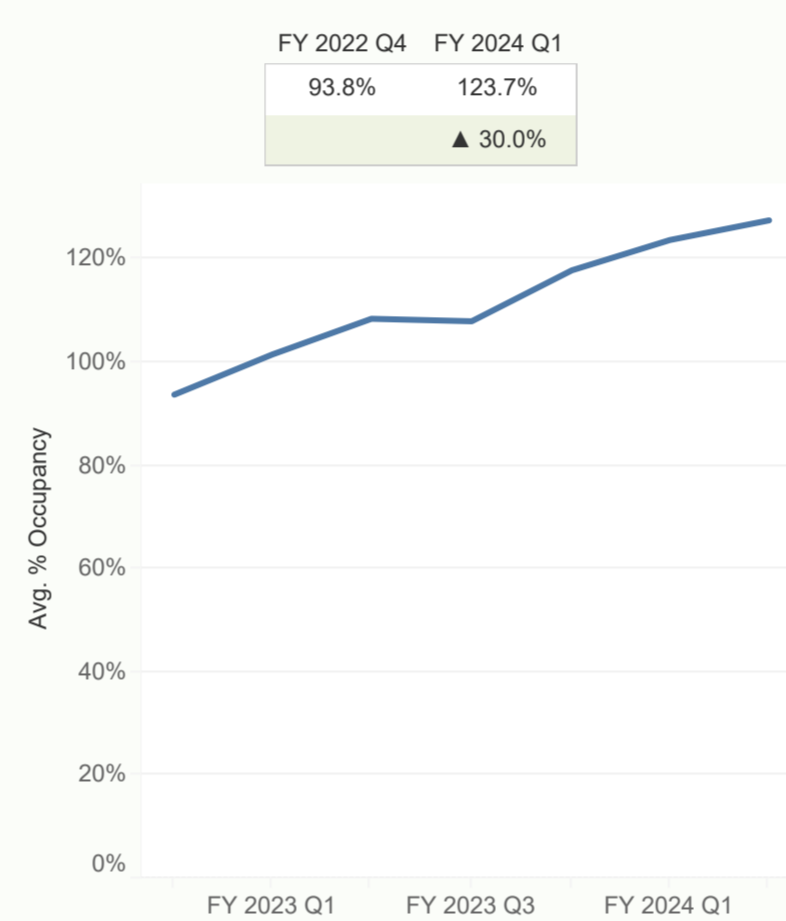
**COMPLEX DELAYED DISCHARGE BED DAYS (EXCL WARD AND CARE HOME CLOSURES - ANY LOCATION)**



**PROBABLE SUICIDES**



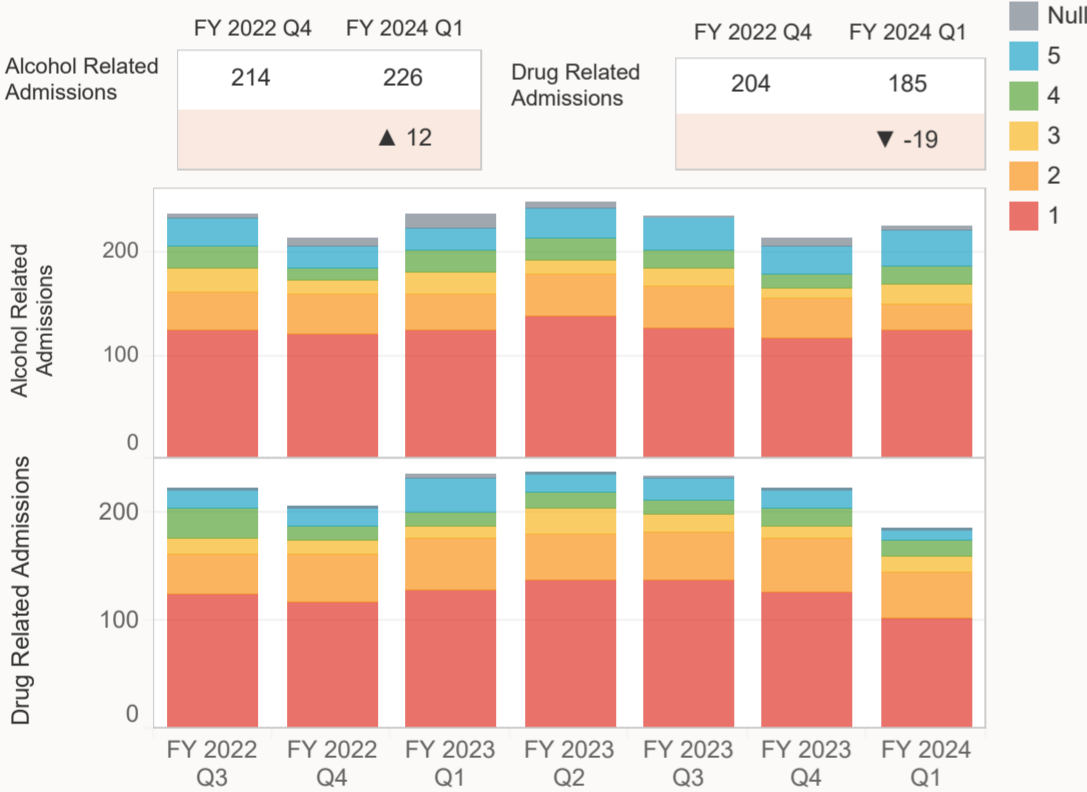
**RCH AVERAGE OVERNIGHT OCCUPANCY (EXCL FORENSIC WARDS)**



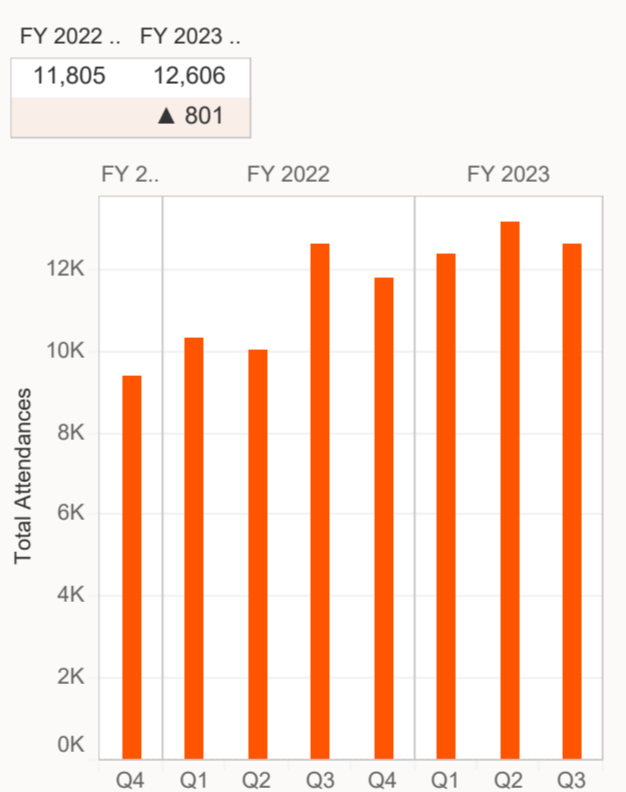
|                          |            |            |          |                     |            |        |          |
|--------------------------|------------|------------|----------|---------------------|------------|--------|----------|
|                          | FY 2022 Q4 | FY 2024 Q1 |          | FY 2022 Q4          | FY 2024 Q1 |        |          |
| Brodie Ward, RCH         | 87.9%      | 106.0%     | ▲ 18.0%  | Fraser Ward, RCH    | 100.9%     | 106.2% | ▲ 5.3%   |
| Corgarriff Ward, RCH     | 78.8%      | 103.3%     | ▲ 24.5%  | Fyvie Ward, RCH     | 93.7%      | 107.5% | ▲ 13.8%  |
| Davan Ward, RCH          | 106.7%     | 106.7%     | ▲ 0%     | Huntly Ward, RCH    | 90.1%      | 107.2% | ▲ 17.2%  |
| Drum Ward, RCH           | 103.2%     | 102.2%     | ▼ -0.9%  | IPCU, RCH           | 74.3%      | 98.7%  | ▲ 24.4%  |
| Dunnottar Ward, RCH      | 99.1%      | 104.8%     | ▲ 5.7%   | Loirston Ward, RCH  | 99.3%      | 224.8% | ▲ 125.5% |
| Eden Ward, RCH           | 94.6%      | 116.0%     | ▲ 21.4%  | Muick Ward, RCH     | 107.5%     | 107.5% | ▲ 0%     |
| Forensic Acute, RCH      | 111.7%     | 98.6%      | ▼ -13.0% | Skene Ward, RCH     | 96.5%      | 109.8% | ▲ 13.2%  |
| Forensic Rehab Ward, RCH | 99.6%      | 264.2%     | ▲ 164.7% | Strathbeg Ward, RCH | 83.2%      | 81.9%  | ▼ -1.3%  |

**PREVENTION**

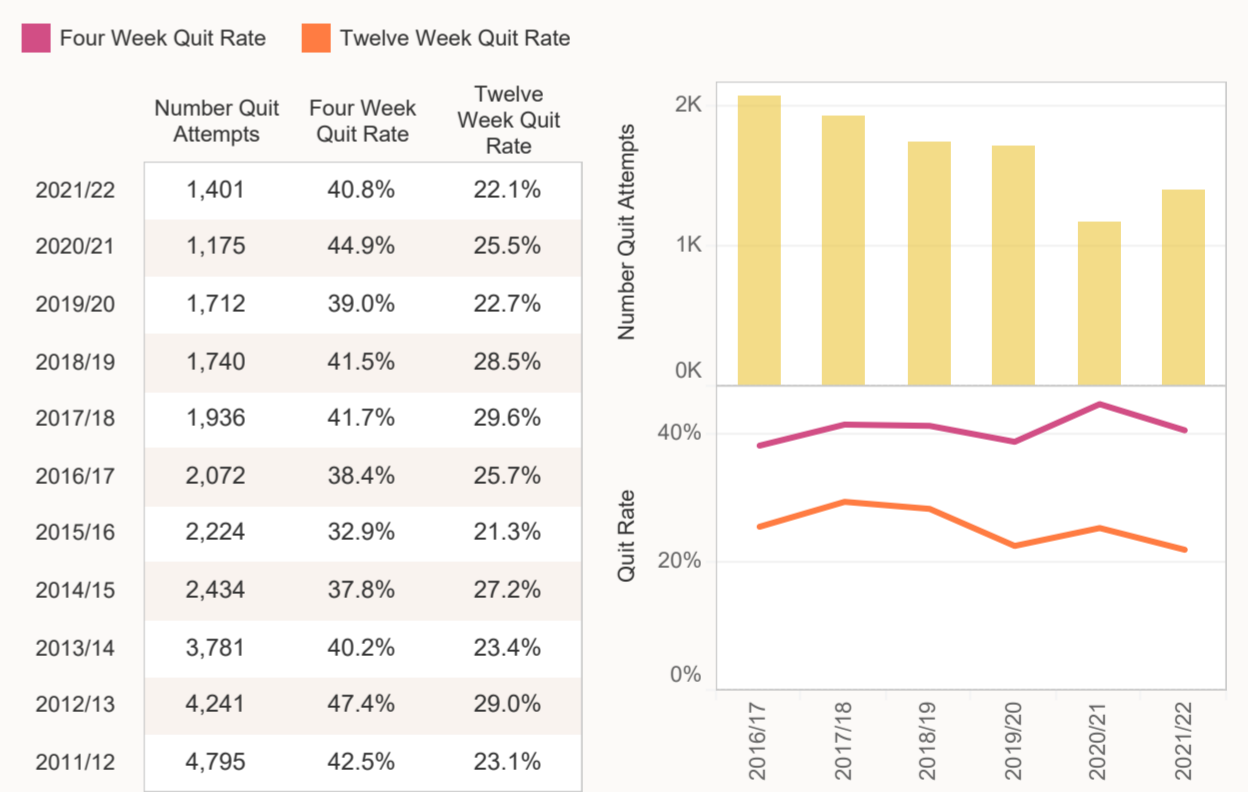
**ALCOHOL AND DRUG RELATED ADMISSIONS**



**SEXUAL HEALTH - TOTAL CLINIC ATTENDANCES (inc Phone, Virtual & F2F)**



**SMOKING CESSATION**



**STRATEGY**

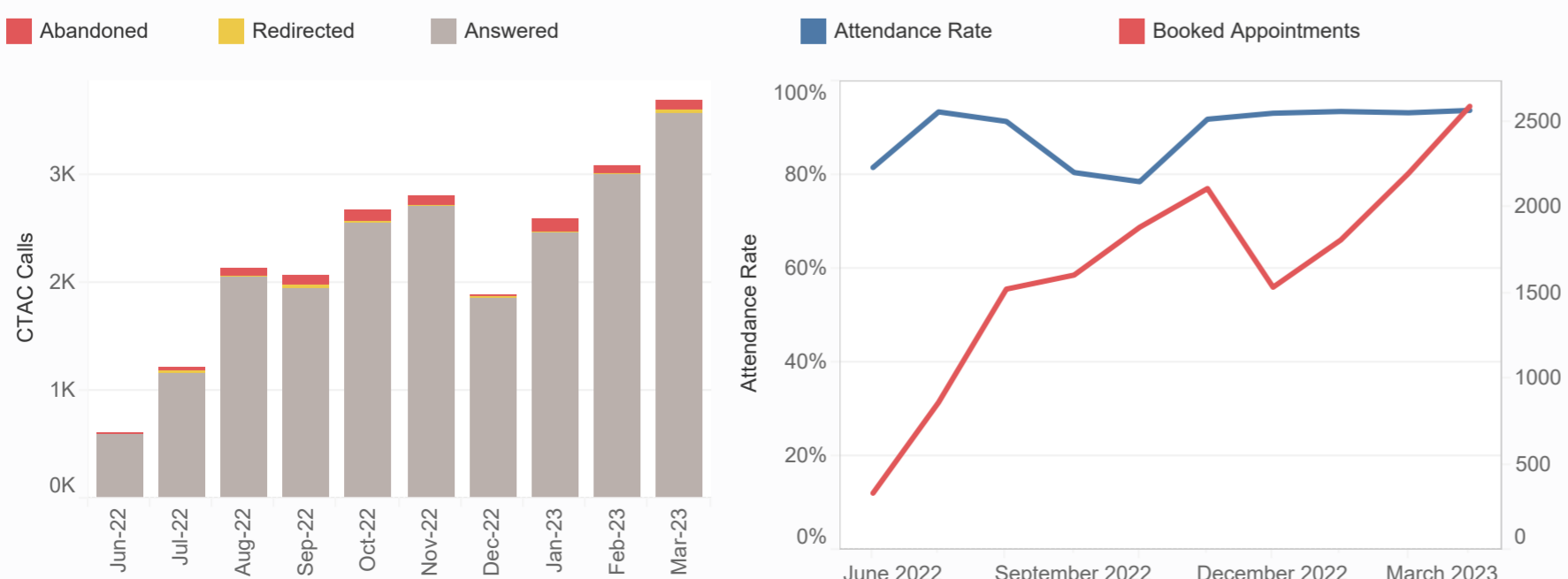
**SUITABLE HOMES**

|         |                   |                   |                 |                  |
|---------|-------------------|-------------------|-----------------|------------------|
|         | Major Adaptations | Minor Adaptations | Community Alarm | Telecare package |
| 2019/20 | 410               | 654               | 1,569           | 1,234            |
| 2020/21 | 63                | 295               | 3,105           | 1,230            |
| 2021/22 | 156               | 610               | 1,365           | 1,242            |

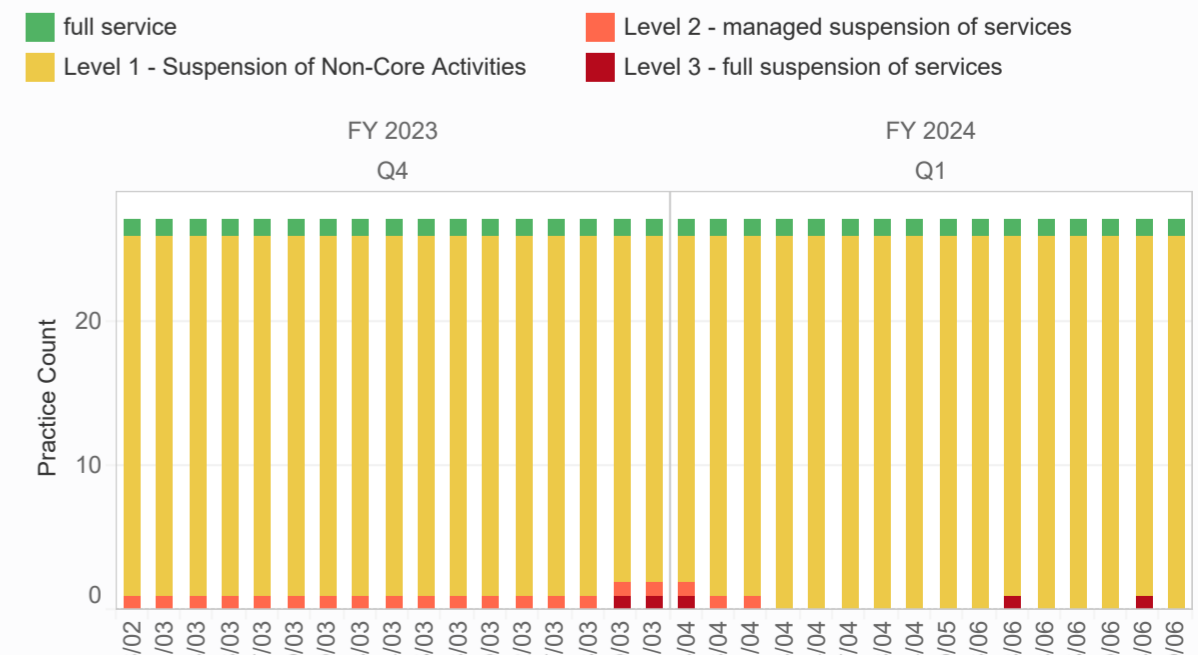
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**PRIMARY CARE**

**COMMUNITY TREATMENT AND CARE- (CTAC)**



**PRIMARY CARE STABILITY LEVELS (Non-standard update frequency)**





## DEFINITIONS

### METRICS USED

|                           |  |   |                       |                                       |  |
|---------------------------|--|---|-----------------------|---------------------------------------|--|
| <b>Datix</b>              | <b>Falls</b>                               | This is taken from DATIX as all falls listed under the ABCITY organisation where the incident result is provided as HARM/NO HARM/NEAR MISS.   | <b>Primary Care</b>   | <b>CTAC calls and attendance</b>      | Provided by ACHSCP. Community Treatment and Care services appointments booked and attended. Call numbers and results also included.  |
| <b>Delayed Discharges</b> | <b>Complex and Code 100 Bed Days</b>       | As above however only for complex and Code 100 delays. Code 100 cases are for extremely complex cases and are typically ongoing discharge cases with bespoke requirements. Code 100 cases are not considered delayed discharges in the usual sense and are not published. Complex codes for ward and care home closures have been excluded.   | <b>Rosewell House</b> | <b>Primary Care Stability Levels</b>  | Supplied by the Primary Care Contracts Team. Practices contact the team with their current 'Level' which can range from full services to full suspension of services.  |
|                           | <b>Complex Delays</b>                      | A delay meeting the definition for delayed discharge for which the reason for delay is considered a 'Complex' reason (full delay reason codes available via PHS). These are typically delays where the HSCP has less control (i.e. Adults with Incapacity, Guardianship, Specialist Facility requirements).   |                       | <b>% Step Up (RWH) -</b>              | There are beds which are allocated for people who are presenting as unwell but not requiring an admission to an acute hospital setting. These beds may prevent the person from an avoidable admission to hospital or a crisis driven avoidable admission to a mainstream care home. For the dashboard these are identified using the IsFirstWard flag. |
|                           | <b>Delayed Discharges</b>                  | A delayed discharge is a hospital inpatient who has been judged clinically ready for discharge by the responsible clinician in consultation with all agencies involved in planning that patient's discharge, and who continues to occupy the bed beyond the ready for discharge date and 48 hours after social work has been contacted. It is very important that, while the clinician in charge has ultimate responsibility for the decision to discharge, the decision must be made as part of a multi-disciplinary process and focuses on the needs of the individual patient. | <b>SOARS</b>          | <b>Ward Starts (RWH) -</b>            | Admission to Rosewell House wards from anywhere in the system at any point during a patients stay, including transfers from any other ward/locations as well as first ward admissions for the given date range. Individuals who have multiple movements into the ward in a date range are counted for both movements.                                  |
|                           | <b>Monthly Bed Days</b>                    | The total number of bed days in a month occupied by a delayed discharge. Note this is not the total length of delay.  |                       | <b>Average LOS</b>                    | Calculated as the number of hours between the ward start and the end date divided by 24 to give a decimal day value. This value is expressed as an average for all ward end dates (discharges and transfers) during the given date range.  |
| <b>Hospital at Home</b>   | <b>Standard Delays</b>                     | A delay meeting the definition for delayed discharge for which the reason for delay is considered a 'Standard' reason (full delay reason codes available via PHS).  |                       | <b>Average Occupancy % -</b>          | Calculated using the overnight occupancy for a given ward or group of wards divided by the allocated beds available for the applicable ward(s), given as a percentage.   |
|                           | <b>Allocated Beds Available</b>            | Allocated beds is pulled directly from the applicable field in Trakcare for that ward.  |                       | <b>Max LOS</b>                        | As above however, only the maximum LOS value for a discharge that has occurred in the given date range.  |
|                           | <b>Average % Occupancy</b>                 | Calculated using the overnight occupancy for a given ward or group of wards divided by the allocated beds available for the applicable ward(s), given as a percentage.  | <b>Social Care</b>    | <b>Ward Starts -</b>                  | Admission to SOARS wards from anywhere in the system at any point during a patients stay, including transfers from any other ward/locations as well as first ward admissions for the given date range. Individuals who have multiple movements into the ward in a date range are counted for both movements.   |
|                           | <b>Hospital at Home Admissions</b>         | Admission to Hospital at Home wards from anywhere in the system at any point during a patients stay, including transfers from any other ward/locations as well as first ward admissions for the given date range. Individuals who have multiple movements into the ward in a date range are counted for both movements.   |                       | <b>Care Searches in Place</b>         | Provided by ACHSCP. The total number of cases which remain open and awaiting care (a single client can have multiple cases).   |
| <b>Mental Health</b>      | <b>Overnight Occupancy</b>                 | The total number of occupied beds at midnight for The given date.   |                       | <b>Clients with Unmet Needs</b>       | Provided by ACHSCP. The number of clients who have been waiting over 14 days for one or more open cases for social care.   |
|                           | <b>Probable Suicides</b>                   | 'Probable suicides' refers to deaths from intentional self-harm and events of undetermined intent. The latter category includes cases where it is not clear whether the death is a suicide. Data used for this chart is from published data.  | <b>Strategy</b>       | <b>Weekly Carer Hours</b>             | Provided by ACHSCP. The total number of hours required to satisfy the care requirements for all open cases.  |
|                           | <b>RCH Average Overnight Occupancy</b>     | Calculated using the overnight occupancy for a given ward or group of wards divided by the allocated beds available for the applicable ward(s), given as a percentage.  |                       | <b>Weekly Unmet Needs Carer Hours</b> | Provided by ACHSCP. The total number of hours required to satisfy the care requirements for all open cases that have been open for 14+ days.   |
| <b>Prevention</b>         | <b>Alcohol and Drug Related Admissions</b> | These are admissions which have ICD10 codes given below. Note that this figure can vary and lag as diagnosis is determined and amended on Trakcare - this can take a few months to appear within the data. Recent data should be considered as changable. Alcohol Related- F10 codes. Drug Related - F11 - F19 codes.   | <b>Ward 102</b>       | <b>Adaptations</b>                    | Provided by ACHSCP. Adaptations completed split by major/minor.  |
|                           | <b>Sexual Health Clinic Activity</b>       | Provided by ACHSCP for the dashboard and include face to face and phone/virtual visits.   |                       | <b>Telecare</b>                       | Provided by ACHSCP. Telecare and community alarm clients.  |
|                           |  |   |                       | <b>Daily Boarders -</b>               | A patient who is physically located on a different ward but should have been admitted to the given ward, however no bed was available to admit them. For example a patient who is under the care of Ward 102 may use a bed in another ward.  |
|                           |  |   |                       | <b>Ward 102 Ward Starts</b>           | Admission to Ward 102 from anywhere in the system at any point during a patients stay, including transfers from any other ward/locations as well as first ward admissions for a given date range. Individuals who have multiple movements into the ward in a date range are counted for both movements.  |

### GLOSSARY OF ADDITIONAL TERMS

|                                 |   |
|---------------------------------|---|
| <b>Creative breaks</b>          | Creative Breaks is a funding programme of the Short Breaks Fund, operated by Shared Care Scotland on behalf of the Scottish Government. The purpose of the Short Breaks Fund is to increase the range, availability, and choice of short breaks for carers and those they care for across Scotland. The Short Breaks Fund aims to make a lasting positive impact to carers and the people that they care for, to funded organisations, and to wider short breaks policy and practice. The Creative Breaks programme provides grant funding to third sector organisations to develop and deliver short breaks projects and services for carers of adults (aged 21 years), and young carers (caring for children or adults), and the people that they care for.   |
| <b>Criteria led discharge</b>   | This term is used to describe a discharge process which is led by certain criteria that will enable the person to be discharged safely. During the persons stay the doctors, nurses and other staff will work with them to observe and record their progress with certain "goals". The term 'goal' refers to what the healthcare team want they person to achieve for their individual health needs. Discharge from hospital happens when they are medically ready to go and their healthcare team have confirmed they have met their goals as an inpatient. Criteria Led Discharge goals may include: <ul style="list-style-type: none"> <li>• Ability to transfer safely – this doesn't necessarily mean walking, but means they can safely transfer from bed to a chair etc. with any equipment assessed necessary for their needs.</li> <li>• that their blood pressure and temperature are within the required range.</li> <li>• their discharge destination is ready, safe for them to return to and they have any required care packages/equipment in place.</li> </ul>              |
| <b>Delayed Discharge</b>        | A delayed discharge is a hospital inpatient who has been judged clinically ready for discharge by the responsible clinician in consultation with all agencies involved in planning that patient's discharge, and who continues to occupy the bed beyond the ready for discharge date. It is very important that, while the clinician in charge has ultimate responsibility for the decision to discharge, the decision must be made as part of a multi-disciplinary process and focuses on the needs of the individual patient  |
| <b>Delayed Transfer of Care</b> | A 'delayed transfer of care' occurs when a patient is ready to leave their current bed but requires some further care in another facility or community hospital but is still occupying an acute bed. Delayed transfers – also referred to as 'DTCs' or sometimes, often in the media, described as 'bed-blocking' – can cause considerable distress and unnecessarily long stays in hospital for patients. They also affect waiting times for NHS care, as delayed transfers reduce the number of beds available for other patients   |
| <b>Discharge to Assess,</b>     | Where people who are clinically optimised and do not require an acute hospital bed, but may still require care services are provided with short term, funded support to be discharged to their own home (where appropriate) or another community setting. Assessment for longer-term care and support needs is then undertaken in the most appropriate setting and at the right time for the person   |
| <b>Emergency discharge beds</b> | This is provision of care in a care home setting for the care of people who are medically fit for discharge however, there is no placement in the current system able to support them with their preferred placement. They may also need a bit more nursing or support to recover completely before moving onto their selected placement. The placement may be required due to a lack of care at home care availability or a place in their preferred care home or Very Sheltered housing scheme not being available. Emergency discharge beds tend to be purchased as a result of increased pressure and demand on the system to support people to move on from the hospital and release bed capacity.   |
| <b>Hospital at home</b>         | Is a short-term, targeted intervention that aims to provide a level of acute hospital care in a person's own home or normal place of care that is equivalent to that provided within a hospital.  |
| <b>Hospital Homecoming</b>      | A two year volunteer project with nine test sites, at the time of writing, to support people up to 12 weeks after they have been discharged from hospital. Services the volunteers offer include shopping, prescription collections, transport to appointments, befriending and dog walking.  |
| <b>Interim placement</b>        | There will be times when a patient in hospital, or the community cannot access the service they require, be that a Care Home, alternative housing with care, or a Care at Home service and therefore a variety of interim options are required. This avoids risk or harm to patients by reducing unnecessary delays for individuals being discharged from hospital but also to avoid where possible unnecessary admissions to hospital.   |
| <b>Reablement</b>               | The reablement approach supports people to do things for themselves and helps people to retain or regain their skills and confidence so they can learn to manage again after a period of illness. It is usually provided in the person's own home and aims to assist people to continue to live as they wish and to enable the individual to do ordinary activities like cooking meals, washing, dressing, moving about the home and going out. Reablement may be used to support discharge from hospital, prevent readmission or enable an individual to remain living at home. (from SCIE)  |
| <b>Rehabilitation</b>           | Person-centred interventions designed to optimise functioning and reduce disability in individuals with health conditions in interaction with their environment. Rehabilitation may be required following an injury, surgery, disease or illness or because their functioning has declined with age. Rehabilitation can help to reduce, manage or prevent complications associated with many health conditions, such as spinal cord injury, stroke, or a fracture. Rehabilitation is provided by a multidisciplinary workforce including physiotherapists, occupational therapists, speech and language therapists, audiologists, orthotists and prosthetists, clinical psychologists, physical medicine and rehabilitation doctors, and rehabilitation nurses. It addresses underlying conditions such as pain and supports people to overcome difficulties with movement, communication, eating, thinking, seeing, hearing. It helps the person be as independent as possible in everyday activities and enables participation in education, work, recreation and meaningful roles. (WHO) |
| <b>Respite</b>                  | An opportunity for carers and those that they care for to have a break from their current circumstances in a residential setting such as a care home or very sheltered housing complex. Respite may be planned in advance, or unplanned where there is a sudden change in someone's situation or as a place of safety, in response to an Adult Protection situation and/or emergency response to risk allowing time to forward plan and make arrangements.  |
| <b>Step down beds</b>           | These are rehabilitation beds when people need a bit more time to recover after a period of time when they have been unwell or after surgery. The person is generally well but require a time of support to help them rehabilitate with input from Allied health Professions such as Occupational Therapists and Physiotherapists.  |
| <b>Step up beds</b>             | There are beds which are allocated for people who are presenting as unwell but not requiring an admission to an acute hospital setting. This may be in a care home for example which provide 24 hour care and support to a person who may be requiring additional care and support and in some cases nursing input. These beds may prevent the person from an avoidable admission to hospital or a crisis driven avoidable admission to a mainstream care home.   |

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**Risk Audit and Performance Committee**

|   |  |
|---|--|
| <b>Date of Meeting</b>                  | 19-09-2023   |
| <b>Report Title</b>                     | Justice Social Work Delivery Plan Update 2022-23   |
| <b>Report Number</b>                    | HSCP.23.064  |
| <b>Lead Officer</b>                     | Claire Wilson  |
| <b>Report Author Details</b>            | Name: Liz Cameron/Lesley Simpson<br>Job Title: Service Manager<br>Email Address:<br><a href="mailto:elcameron@aberdeencity.gov.uk">elcameron@aberdeencity.gov.uk</a><br><a href="mailto:lsimpson@aberdeencity.gov.uk">lsimpson@aberdeencity.gov.uk</a> |
| <b>Consultation Checklist Completed</b> | No   |
| <b>Directions Required</b>              | No   |
| <b>Exempt</b>                           | No   |
| <b>Appendices</b>                       | Appendix A - Delivery Plan Update August 2023  |
| <b>Terms of Reference</b>               | N/A  |

**1. Purpose of the Report**

The purpose of this report is to present the Risk, Audit and Performance Committee with the updated Justice Social Work Delivery Plan August 2023.

**2. Recommendations**

2.1. It is recommended that the Risk, Audit and Performance Committee:

- a) Note the update provided in respect of the Delivery Plan 2022-23

**3. Strategic Plan Context**



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- 3.1. The Justice Delivery Plan 2021-2024 aligns with the ambitions set out in the HSCP Strategic plan, contributes to the Local Outcome Improvement Plan (LOIP) and incorporates the indicators for the national Community Justice Outcome Improvement Plan (CJOIP). Work will soon commence on a refreshed Justice Delivery Plan based on the new Strategic Plan, the LOIP refresh and the Community Justice Framework coming into effect in April 2024 that will replace the CJOIP.

### 4. Summary of Key information

- 4.1. Following the conclusion of the Inspection of Community Payback Orders by the Care Inspectorate in 2020 the recommendations were taken forward by the service, incorporating the RAPC approved Revised Performance Management Framework, continued progression of the approved Delivery Plan with regular updates provided to the RAPC by the Chief Officer as instructed.

This Delivery Plan updates on the progress and effectiveness of the Justice Service in 2022-23 and operational activity around covid recovery and resuming normal service.

In addition to the above, there has been the implementation of legislation for Bail Supervision and Electronic Monitoring on Bail resulting in the need for increased resources and action around the implementation of this.

- 4.2. In 2021 the IJB approved the revised Delivery Plan with an instruction that an annual update was presented to the Risk Audit and Performance Committee on the progress being made with the implementation of this delivery plan.
- 4.3. Whilst recovering from the pandemic there have been various issues affecting the service such as the withdrawal of the LS/CMI risk/needs assessment tool due to glitches in the system. This was a national issue affecting all areas of JSW and service users in communities as well as in custody. Remediation of this took over 18 months during which time paper based assessments were utilised which impacted on the time taken to complete these as well as issues transferring to other local authorities and prison settings. However, the LS/CMI system was reinstated in its entirety in August 2023 and JSW are now working through inputting the backlog of assessments into the system whilst returning to full use of the system for new assessments.



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The transition from the social work recording system, Carefirst to the newly created D365 system had some impact of the system in terms of workers confidence with a new system but a lot of work has been undertaken with in house training and support from the Analytic and Insights team. The ability to obtain specific accurate statistics continues to present issues due to specific fields not being completed or in place to be able to pull the data. It is hoped that any issues will be overcome in the coming months. Justice social work have a D365 working group with Social Workers, Support Workers and Admin Workers who will be meet on a regular basis to ensure shared knowledge, skills and identify best practice for the use of the system. Service Managers, justice social work D365 Product Owner and the Analytics and Insight Team meet weekly at present to ensure appropriate information is being captured and identifying any irregularities.

The transition of systems has been fully supported by Aberdeen City Council's Data Protection Officer and a very robust impact assessment was undertaken in relation to this.

- 4.4. National changes made as a result of covid have continued beyond the pandemic and will impact on justice social work such as the Court's stated intention to increase the use of virtual courts for individuals in custody due to prisoner transport issues. As the Pre-Disposal Team are based in the Court building and are able to meet with those who have Community Disposals imposed immediately after sentence, the outcome of this is likely to affect aspects of our Delivery Plan and Performance Reporting as this will affect the timescale for contact with service users.
- 4.5 We have seen a welcomed increase in Diversions from Prosecution, Structured Deferred Sentence and Bail Supervision over the past year with Bail Supervisions being recorded as 26 in 2021-22 compared to 107 in 2022-23. Structured Deferred sentences increased from 30 in 2021-22 to 40 in 2022-23 and Diversions continue to increase also and have exceeded 30 referrals per month in 2022-23.

This continues to reduce the number of statutory orders that are imposed and meets our ambition for early intervention and prevention. This places an emphasis on providing support to individuals at a time when this is most needed and an opportunity for them to address issues affecting them without the requirement of statutory supervision.



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The Court continue to address the high level of backlog as a result of the pandemic. Remand figures remain significantly high and Justice Social Work are working with partners to address this issue at a national and local level by increasing Bail Supervisions. The impact of this is JSW are providing appropriate support in the community to those on Bail Supervision whilst minimising the impact on the Scottish Prison Service by reducing numbers of those held on Remand.

- 4.6 We are aware that improvement is required in terms of collating feedback from our service users. Much of this information is collated by the use of Exit Questionnaires and whilst there has been some indication of an increase in the return of these in the past year we consider the feedback from these essential and intend to progress this further. This is discussed in our practice issues meetings and we are looking at ways to improve this, we are currently considering IT options, the current paper based options and any other method which might result in increasing the feedback received. Feedback provides us with useful information regarding what we are doing well and where we need to improve to support service users not only in completing their Community Payback Orders but also in making meaningful positive changes in their lives and their lifestyle.

### **5. Implications for IJB**

There are no direct legal implications arising from the recommendations set out in the report.

#### **5.1. Equalities, Fairer Scotland and Health Inequality**

There are no Equalities, Fairer Scotland Duty or Health Inequality issues arising from this report.

#### **5.2. Financial**

There are no direct financial implications arising from the recommendations of this report.

#### **5.3. Workforce**



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There are no direct workforce implications arising from the recommendations of this report.

### **5.4. Legal**

There are no direct legal implications arising from the recommendations of this report.

### **5.5. Unpaid Carers**

N/A

### **5.6. Information Governance**

There are no direct information governance implications arising from the recommendations in this report.

### **5.7. Environmental Impacts**

There are no direct environmental implications arising from the recommendations of this report.

### **5.8. Sustainability**

N/A

## **6. Management of Risk**

### **6.1. Identified risks(s)**

Failing to continue implementation and delivery of the Justice Delivery Plan following the inspection of justice services would have a detrimental impact on the overall ambition and improvement work for justice in Aberdeen. There is a risk that the implementation of D365 until fully developed will impact on the significant data required for national reporting.

### **6.2. Link to risks on strategic or operational risk register:**

There is a risk that the IJB and the services that it directs and has operational oversight of, fail to meet both performance standards/outcomes as set by regulatory bodies and those locally determined performance



## **Risk Audit and Performance Committee**

standards as set by the Board itself. This may result in harm or risk of harm to people.

There is a risk of reputational damage to the IJB and its partner organisations resulting from complexity of function, delegation and delivery of services across Health and Social Care.



## Delivery Plan Update August 2023

| Objectives  | Themes  | Quality Indicators                       | Actions  | Date    | Comments   |
|---|---|--|--|---------|--|
| To contribute to the creation of safer and fairer communities | Collaboration with other Community Justice partners | 2.2 Impact on victims                    | <ul style="list-style-type: none"> <li>The JSW service will continue to play a full and active part in appropriate Community Justice discussions and activities in relation to the LOIP.</li> </ul>                      | 2021-24 | <p>The JSW is actively contributing to the following charters:</p> <ul style="list-style-type: none"> <li>Ensuring people on community sentences and liberated from prison have better access to services</li> <li>Changing attitudes about domestic abuse in all its forms and ensuring victims receive access to the right support</li> <li>Tackling Domestic Abuse</li> <li>Access to mental health support</li> <li>Increase [proportion of reported] Hate Crime</li> <li>Reduce drug related deaths from custody</li> </ul> |
|   | Community Empowerment                               | 2.3 Impact on families                   | <ul style="list-style-type: none"> <li>The JSW service will support the implementation of the partnership's new three-locality model so that it best meets the needs of JSW clients, victims and communities.</li> </ul> | 2021-24 | <p>Developments so far include:</p> <ul style="list-style-type: none"> <li>JSW representatives attend locality meetings</li> <li>Senior Social Workers from 3 CPO Teams aligned with localities</li> <li>Unpaid Work Team undertaking work across all localities in response to need</li> <li>Clients/ victims seen in their own localities as appropriate</li> </ul>  |
|   | Victim/Family/Community Experiences and Opinions    | 4.1 Impact on the Community              |  |         |  |
| Contribute to prevention and early intervention               |   | 9.4 Leadership of improvement and change | <ul style="list-style-type: none"> <li>We continue to seek the <u>appropriate</u> involvement of victims and families of the individuals with whom we work.</li> </ul>   | 2021-24 | <p>The Covid backlog is now being dealt with, Caledonian Women's Support Workers currently support an average of 200 women in City and Shire. The number of Caledonian Programme Requirements increased by 35% last year and continues to remain consistent with all associated victims (partners and ex-partners) offered support.</p> <p>A Children's worker has been appointed to support children</p>  |

| Objectives | Themes | Quality Indicators | Actions  | Date    | Comments   |
|------------|--------|--------------------|--|---------|--|
|            |        |                    |  |         | <p>exposed to domestic abuse.</p> <p>Parole Board Scotland, Safe Space Project - Aberdeen JSW have joined the national network of Local Authorities providing a safe space for victims to enable them to attend Parole Hearings remotely within JSW premises and with support.</p>   |
|            |        |                    | <ul style="list-style-type: none"> <li>We will seek to increase staff confidence in the use of accredited assessment tools including the assessment and analysis of serious harm.</li> </ul> | 2021-24 | <p>Post Covid the Risk Management Authority have reinstated the rolling programme to provide Risk of Serious Harm (ROSH) Training which is offered to all relevant qualified SW staff and will be ongoing as part of a national agenda.</p> <p>Aberdeen JSW have a dedicated Throughcare Team who work directly with individuals who have been convicted of Serious Harm offending. This staff group have been prioritised for the ROSH training, they hold the majority of such cases and will work with those convicted from Justice Social Work Report stage, through the individual's custodial sentence where they will hold the case jointly with Prison based Social Work and then when released on licence to the community.</p> <p>Many of these cases, dependent on the individual's assessed risk of causing serious harm, will result in their case being managed under Multi Agency Public Protection Arrangements (MAPPA). This forum includes representatives from Police, Health, Community based and Prison based Justice Social Work, Children and Families Social Work, Housing and the Scottish Prison Service. All cases within Mappa include registered sex offenders, high risk violent offenders in the community or in custodial settings with potential release hearings or restricted patients (where</p> |

| Objectives  | Themes   | Quality Indicators   | Actions  | Date    | Comments  |
|---|--|--|--|---------|---|
|   |  |  |  |         | appropriate), have risk management plans proposed by the lead agency to be taken forward by multi agency partners, these are agreed and reviewed at appropriate intervals (dependent on agreed risk/needs levels). This promotes safer communities on an agreed multi agency basis.   |
|   |  |  | <ul style="list-style-type: none"> <li>Undertake a whole service needs analysis including a review of currently commissioned services to determine future third sector provision.</li> </ul> | 2021-24 | <p>Currently commissioned services are reviewed as part of the monitoring process. The contract of one of the JSW commissioned services is under review, the contract has been extended whilst the tendering process is progressed. This process will include identifying areas for change, development and improvement.</p> <p>The issue of commissioned services is part of the national agenda with consideration being given to national commissioning should JSW be included in the National Care Service.</p>   |
| To fairly, effectively and proportionately implement court orders and release | <p>Timely, person-centred and effective interventions</p> <p>Managing risk and maintaining</p> | <p>5.1 Providing help and support when it is needed</p> <p>5.2 Assessing and responding to risk and need</p> <p>5.3 Planning and providing</p> | <ul style="list-style-type: none"> <li>We will strengthen our compliance in meeting expected timescales for assessments and case management plans.</li> </ul>                                | 2021-24 | <p>The LSCMI risk/needs assessment was moved from locally based to a national database system in 2021, on 02 March 2022 the entire system had to be withdrawn due to glitches in the system which affected the risk/needs outcome of the assessment and which was highlighted in national media. A lengthy remediation process began immediately, the system was overhauled with the Scottish Government taking the lead with a national group of JSW Service Managers and the service provider on board.</p> <p>This meant JSW reverting to paper based risk/needs assessments which had resource issues for completion of these and complications in terms of the transfer of cases between Local Authorities and prisons. The system was</p> |

| Objectives | Themes   | Quality Indicators  | Actions  | Date    | Comments  |
|------------|--|---|--|---------|---|
| licences   | close working relationships with partners in relation to individuals who pose high risk of harm and issues of public protection  | <p>effective intervention</p> <p>5.4 Involving people who have committed offences and their families</p> <p>6.1 Policies, procedures and legal measures</p> <p>6.4 Performance management and quality assurance</p> |  |         | <p>reinstated in it's entirety in August 2023 and work is now being undertaken to input the backlog of assessments as well as using the tool ongoing.</p> <p>Quality assurance and monitoring of our compliance with expected timescales had relied upon regular reviews of case supervision ensuring compliance, however, the reintroduction of the LS/CMI system will support ongoing evidence and recording ongoing.</p>   |
|            |  |   | <ul style="list-style-type: none"> <li>We will improve our consistency in undertaking 1<sup>st</sup> reviews within expected timescales.</li> </ul>  | 2021-24 | <p>The introduction of new Review and QA Light processes are intended to improve the Review process and indications are this is improving. This is ongoing, we continue to undertake regular staff supervision and undertake Quality Assurance Light assessments at reviews.</p> <p>The newly introduced D365 information system implemented throughout Aberdeen Social Work is being utilised to provide reminders which will be actioned by the social worker at relevant points.</p> |
|            | <ul style="list-style-type: none"> <li>We will improve our consistency in undertaking home visits in response to risk/ needs / disengagement</li> </ul>                      | 2021-24   | <p>As above with reminders highlighted on the new D365 information system, the QA Light and Review process is intended to pick up any issues around the appropriate use of home visits as early as possible.</p>   |         |   |
|            | <ul style="list-style-type: none"> <li>We will improve the numbers of first induction/case management meeting taking place with 5 days of an Order being imposed.</li> </ul> | 2021-24   | <p>Improvement in this area had not been possible for Covid related reasons. Changes post Covid are under review as due to the back log and issues with GeoAmey in transporting prisoners to Court, Virtual Courts are being used more frequently meaning achieving these targets can be difficult.</p> <p>More specifically this is because first contacts usually take</p> |         |   |

| Objectives | Themes | Quality Indicators | Actions  | Date    | Comments  |
|------------|--------|--------------------|--|---------|---|
|            |        |                    |  |         | <p>place in the JSW office adjacent to the court.</p> <p>Whilst we had managed to achieve 80% of inductions within the timescale in 19/20, this was reduced to 60% in 21/22. This has improved with the relaxation of restrictions, however, it is difficult to provide exact information of the past year at present as we are still in the transition between information systems i.e. the withdrawal of Carefirst to D365. We are confident this has improved and hope to be able to provide accurate data in the coming months.</p>   |
|            |        |                    | <ul style="list-style-type: none"> <li>Service effectiveness will be reported regularly to the JSW Best Practice group and Performance Management Board and appropriate improvements agreed in respect of this.</li> </ul> | 2021-24 | <p>These groups were impacted upon by Covid but are now re-established on a quarterly basis.</p> <p>The JSW Best Practice Group continue to work on improvements identified in the Delivery Plan which the Performance Framework is aligned to.</p> <p>There have been some changes in the Justice system with the introduction of new legislation such as Supervised Bail and Electronic Monitoring on Bail which requires intense supervision and assessment respectively. Increased staffing has been approved to support this.</p> <p>This is being managed by ongoing review of services, issues and improvements discussed at Senior Social Worker and Practice Issues meetings and taken to the Performance Management Board meetings.</p> |
|            |        |                    | <ul style="list-style-type: none"> <li>To improve their individual effectiveness, JSW teams will develop, where</li> </ul>   | 2021-24 | <p>Improvement Plans for Women's Services and Unpaid Work have been approved and implemented.</p> <p>These will continue to be reviewed to ensure that their</p>  |

| Objectives                                  | Themes   | Quality Indicators                               | Actions   | Date    | Comments  |
|---|--|--|---|---------|---|
|   |  |  | desirable/necessary, their own team-specific Improvement Plan. These will be monitored by the Performance Management Board.   |         | <p>respective ambitions remain appropriate and achievable.</p> <p>The Unpaid Work team has been impacted due to vacating their premises at the end of January 2023, this has caused upheaval and displacement of many staff to other Council buildings, whilst outdoor and individual placements are continuing, there is currently limited indoor craft workshops being offered to clients to do their unpaid work hours. The search for appropriate premises is being treated as a high priority and involves liaison with property services and other agencies. Nonetheless, the service has continued and indications are that due to the commitment of staff and the council the impact on service users and the Court has been limited.</p> |
|   |  |  | <ul style="list-style-type: none"> <li>We will be more consistent with our Quality Assurance and will strengthen our reporting of service matters to the Clinical and Care Governance group and committee and also the IJB as appropriate.</li> </ul> | 2021-24 | Quarterly Audits are ongoing and any issues brought to the Practice Issues and Best Practice meetings. There is an enhanced SW report, including the justice service provided regularly to the CCG group for its consideration and scrutiny.  |
| To reduce offending by promoting desistance | Involvement of clients in service development/improvement activities | 2.1 Impact on people who have committed offences | <ul style="list-style-type: none"> <li>We will improve the capture, analysis and use of qualitative data.</li> </ul>  | 2021-24 | Whilst the withdrawal of the Carefirst information system and implementation of D365 has caused some anxiety in terms of the capture, analysis and use of qualitative data, indications are that the D365 system will provide high quality Business Intelligence reports. JSW are now aligned with the Analytics and Insight Team, Service Managers and Product owners meet with them weekly at present ensuring the required information is accurate and available. This is ongoing and it is envisaged this will enable the production of more qualitative information.   |



| Objectives | Themes                      | Quality Indicators | Actions  | Date    | Comments  |
|------------|-----------------------------|--------------------|--|---------|---|
|            | Building towards desistance |                    | <ul style="list-style-type: none"> <li>We will improve our completion rates for Exit Questionnaires. We will also seek to capture better the views of those individuals who do not complete their Orders. We will evidence the improvements we are making from EQ and other feedback discussions.</li> </ul> | 2021-24 | <p>This is ongoing as the number of Exit Questionnaires completed in 2021/22 had significantly reduced to 101 for Unpaid Work and 56 for Supervision. This has improved somewhat in 2022/23 with figures for Unpaid Work at 164 and Supervision at 62.</p> <p>It is acknowledged that these need to be improved, more so the low number of Exit Questionnaires for Supervision. This has been discussed at JSW practice issues and best practice meetings and the Delivery Plan Steering Group will be taking this forward to explore better ways to encourage service users to complete these in order for JSW to make and evidence the required improvements.</p> <p>We are planning to review the format and use of the Current Exit Questionnaire system and to better involve service users in the development of the service.</p> <p>In the interests of client confidentiality, data protection and GDPR, these are anonymous.</p> |
|            |                             |                    | <ul style="list-style-type: none"> <li>We will improve the quality of our drug and alcohol assessments.</li> </ul>   | 2021-24 | <p>A new Development Officer post was recruited to in 2022 to work across the ASCP between JSW and the Alcohol and Drugs Service.</p> <p>This has resulted in all staff and some service users being trained in the use of Naloxone which has undoubtedly saved lives.</p> <p>This Officer offers up to date information to management and workers, identifies appropriate training for staff to increase</p>   |

| Objectives  | Themes  | Quality Indicators  | Actions  | Date    | Comments   |
|---|---|---|--|---------|--|
|   |   |   | <ul style="list-style-type: none"> <li>Our social work practice will continue to be person-led, structured, resilient and flexible; Staff supervision will ensure that this practice is appropriate, supportive and working in the best interests of the individual whether statutory or voluntary.</li> </ul> | 2021-24 | <p>their skills and knowledge to undertake assessments and provide support to clients. This also provides a direct link to the Assertive Outreach Team resulting in clients being able to access essential services at the appropriate times and when in crisis until their planned treatment can resume. This work is to reduce the risk of drug related death.</p> <p>Regular staff supervision is imperative to all social work and is managed as a priority throughout JSW. In addition to this there is a duty Senior Social Worker available at all times in JSW for support, advice and guidance.</p> <p>The newly introduced Supervision Policy for all services focusses on Trauma Informed Practice and supports the wellbeing of staff. Training is being rolled out with the remaining staff with supervision responsibilities due to complete this by the end of September.</p> |
| To promote the social inclusion of people who have committed offences | <p>Complex, inter-dependent needs</p> <p>Alternatives to statutory orders</p> | 1.1 Improving the life chances and outcomes of people in the justice system | <ul style="list-style-type: none"> <li>We will seek to provide as part of our Unpaid Work Improvement Plan, more learning opportunities and placements which encourage meaningful links with the local community.</li> </ul>   | 2021-24 | <p>During Covid the Unpaid Work staff team were very creative in developing materials and meaningful tasks to enable unpaid workers to complete their Orders despite the pandemic. The fact that we managed to support some individuals to complete their orders meant that we had less of a backlog than some other authorities.</p> <p>The Unpaid Work Team have an improvement plan which has been approved at the Performance Board Management meeting and is ongoing. It is unfortunate that the Unpaid Work Team are displaced in various buildings at present, however, some Order Supervisors are based within the Court/Townhouse which has supported the undertaking of initial contacts etc.</p>  |

| Objectives | Themes | Quality Indicators | Actions   | Date    | Comments  |
|------------|--------|--------------------|---|---------|---|
|            |        |                    |   |         | We are in discussions with Housing to include completed community projects in their regular newsletters to inform communities of the good work undertaken in their area.  |
|            |        |                    | <ul style="list-style-type: none"> <li>Drugs and Alcohol training will be provided to the JSW workforce.</li> </ul>   | 2021-24 | As above, it is stated that this is in progress with the newly appointed Development Officer.   |
|            |        |                    | <ul style="list-style-type: none"> <li>Mental Health training will be provided to the JSW workforce.</li> </ul>   | 2021-24 | This forms part of a LOIP Charter and is ongoing. All JSW have been included in the Trauma Informed Practice Training.  |
|            |        |                    | <ul style="list-style-type: none"> <li>We will link with other services as appropriate to improve in particular, housing, health, employment and financial outcomes for the individuals with whom we work.</li> </ul> | 2021-24 | <p>There are good relationships between JSW and partner agencies such as the Scottish Prison Service, Health, Substance Misuse and third sector. We have identified points of contact for these services as well as a Justice Support Work Team who liaise regularly with the Financial Inclusion Team, Housing, Health and Substance Misuse Services.</p> <p>We also work closely with the Foyer to identify training and employment opportunities for those we work with.</p> |
|            |        |                    | <ul style="list-style-type: none"> <li>We will promote alternatives to statutory orders such as Bail Supervision, Diversion, Fiscal Work Orders, Problem-Solving and Structured Deferred Sentences.</li> </ul>        | 2021-24 | <p>New legislation and guidance around the use of Supervised Bail and Electronic Monitoring commenced on 17<sup>th</sup> May 2022. We have and will continue to monitor the use, implementation, practice and wider impact regularly.</p> <p>There has been a significant increase in the numbers for bail supervision which were recorded as 26 in 2021-22 compared to 107 in 2022-23.</p> <p>Structured Deferred sentences increased from 30 in 2021-22 to 40 in 2022-23.</p> |

| Objectives | Themes | Quality Indicators | Actions  | Date    | Comments  |
|------------|--------|--------------------|--|---------|---|
|            |        |                    |  |         | Diversions continue to increase also and have exceeded 30 referrals per month in 2022-23.   |
|            |        |                    | <ul style="list-style-type: none"> <li>Seek to raise public awareness of the role, remit and scope of Justice Social Work</li> </ul> | 2021-24 | Community Justice Scotland is undertook a profile-raising exercise in 2022 to include JSW. The outcome of this does not appear to have been published as yet and will be considered once this is available to support this. |