



## RISK, AUDIT AND PERFORMANCE COMMITTEE

<b>Date of Meeting</b>	23 September 2021
<b>Report Title</b>	Leadership Team Objectives – Update on Delivery
<b>Report Number</b>	HSCP.21.107
<b>Lead Officer</b>	Alex Stephen, Deputy Chief Officer and Chief Finance Officer
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<b>Consultation Checklist Completed</b>	Yes
<b>Appendices</b>	Appendix A - Leadership Team Objectives Progress Quarter 1

### 1. Purpose of the Report

- 1.1. The purpose of this report is to provide an update to the Risk, Audit and Performance Committee (RAPC) on progress on the delivery of the 2021/22 Aberdeen City Health and Social Care Partnership (ACHSCP) Leadership Team Objectives.
- 1.2. RAPC on 22 June 2021 agreed that progress reports would be submitted to the September 2021, December 2021 and March 2022 meetings.

### 2. Recommendations

- 2.1. It is recommended that RAPC:
  - a) Notes the progress update in relation to the delivery of the ACHSCP Leadership Team Objectives.
  - b) Notes that further progress reports will be submitted to the 21 December 2021 and 1 March 2022 meetings of RAPC.



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

- 3.1.** At the meeting of RAPC on 22 June 2021, report HSCP.21.072 outlined the proposed plans for delivering and monitoring the 2021/22 Leadership Team Objectives which included organising the objectives into projects and programmes; allocating support; creating Huddles to oversee delivery; identifying key performance measures; and developing a Performance Dashboard.
- 3.2.** The programmes and projects have all be clarified, leads have been allocated and they have been split between the three Huddles. The Transformation Team has recently been merged with the Strategy and Performance Team and the Capital and Assets Team. The organisational change process, which has taken some months, is now complete and although recruitment to vacant posts is now underway there is currently a 37% vacancy rate in the merged team. The project and programmes that support the Leadership Team Objectives have been prioritised as the team has been unable to support all of them at this time. Whilst support and delivery of our objectives will accelerate when the posts are filled there is nonetheless a risk to overall delivery which will be closely monitored over the coming months.
- 3.3.** Appendix A contains a visualisation of the progress made to date on our development of a Performance Dashboard. We continue to develop and review performance measures for all projects whether underway or planned.
- 3.4.** We have detailed our measurable performance indicators against each objective, however some of these indicators will develop as we progress our projects/programmes. The Surge and Flow Dashboard has enabled our day-to-day management of flow in and out of Hospital to Community, and has created greater collaboration between ACHSCP, the Acute sector and commissioned social care providers. Plans are in place with Health Intelligence to help analyse the data within the dashboard identifying patterns and trends since its creation at the beginning of the year. We will include these findings in the report to the December RAP meeting.
- 3.5.** Staff Health and Wellbeing continues to be at the forefront of the Leadership Teams Objectives. There was concern over the impact Covid 19 related



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absences could have on service delivery and this initiated development of a daily staffing situation report (sitrep) which detailed vacancies, annual leave and absences of all types per service. This has proved to be an invaluable monitoring tool to identify potential problem areas enabling pre-emptive action to be taken which ensures our services continue to be safe. This tool confirmed our understanding that the most disruptive impact on service delivery is the number of staff absent due to psychological issues such as anxiety and stress.

- 3.6. We are developing our data and performance dashboard alongside the refresh of the Strategic Plan performance framework. The resultant framework will consist of key performance measures which demonstrate delivery of the Strategic Plan.

### 4. Implications for RAP

- 4.1. **Equalities, Fairer Scotland Duty and Health Inequalities** - The Leadership Team Objectives were agreed as part of the Medium-Term Financial Framework (HSCP.21.025, Integration Joint Board 23 March 2021) for which a full equalities and human rights impact assessment was undertaken. The assessment, on the whole, was positive in relation to the impact on equality and diversity within Aberdeen, however any equality impacts on individual project work will be kept under review.
- 4.2. **Financial** – Delivering the Leadership Team Objectives within existing budgets is key to ensuring financial sustainability of the ACHSCP.
- 4.3. **Workforce** – The Leadership Team Objectives are to be delivered using existing resources although as noted in paragraph 3.2 above that the recruitment process is underway to bring the Strategy and Transformation team to full capacity.
- 4.4. **Legal** - There are no direct legal implications arising from the recommendations in this report.
- 4.5. **Carers** – There are no implications for Unpaid Carers arising directly from the recommendations in this report.



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**4.6. Covid-19** – Delivery of the Leadership Team Objectives will be undertaken with cognisance to the relevant guidance in relation to Covid-19. Most work continues to be carried out remotely and where it is necessary to get groups of staff together this is done in an environment where they can remain safely distant, wearing face masks, with good ventilation and access to hand washing or sanitising.

**4.7. Other** - none

### 5. Links to Aberdeen City Health & Social Care Partnership Strategic Plan

**5.1.** The Leadership Team Objectives contribute to the delivery of the Strategic Plan as follows:

**Staff Health and Wellbeing** – supports the enabler of Empowered Staff.

**Reshaping our relationship with our communities** – supports both the Prevention aim - promoting positive health and wellbeing, and the Resilience aim - promoting and supporting self-management and independent living for individuals.

**Reshaping our commissioning approach** – supports our enabler of Principled Commissioning.

**Whole system and connected remobilisation** – support delivery of the Personalisation aim ensuring right care, right place, right time.

**Living and responding to Covid** – focuses on resilience in our communities particularly those communities that have been worse affected by Covid. It contributes to the Prevention aim - addressing the factors that cause inequality in outcomes in and across our communities.

### 6. Management of Risk

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

There is a risk, if the Leadership Team Objectives are not delivered as expected that, not only will delivery of the Strategic Aims, Commitments and



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Priorities of ACHSCP be negatively impacted, but will negatively impact on delivery of the Medium-Term Financial Framework.

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

This report links to Risks 2, 5 and 7 on the Strategic Risk Register.



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

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

7. Failure to deliver transformation at a pace or scale required by the demographic and financial pressures in the system.

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

This report sets out the arrangements to ensure delivery of the Leadership Team Objectives which will be monitored in an open and transparent way with the opportunity for scrutiny by the RAP Committee who will be able to hold the Leadership Team to account.

Approvals	
	Sandra Macleod (Chief Officer)
	Alex Stephen (Chief Finance Officer)