



RISK AUDIT PERFORMANCE COMMITTEE

Date of Meeting	10 September 2024
Report Title	Quarter 1 Delivery Plan Update
Report Number	HSCP.24.064
Lead Officer	Alison MacLeod
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Consultation Checklist Completed	Yes
Exempt	No
Appendices	<ul style="list-style-type: none"> a. <i>Quarter 1 Overview</i> b. <i>Delivery Plan Quarter 1 Tracker</i> c. <i>ACHSCP Delivery Plan Dashboard</i>
Terms of Reference	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.

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.



RISK AUDIT PERFORMANCE COMMITTEE

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 3 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.** For the 2024-2025 financial year, there are a total of 82 projects within the Delivery Plan, spanning across 16 programmes. This compares with the 2023-2024 financial year where there were 64 projects spanning across 16 programmes. From the 2023-2024 financial year, the programme 'Flexible Bed Base' has been removed as a standalone programme, and for the 2024-2025 financial year, 'Hospital at Home Expansion' has been added as a standalone programme.
- 4.4.** The Partnership also classifies its projects by Tiers: Tier 1 being prevention; Tier 2 being early intervention; and Tier 3 being response. The changes of the proportion of projects aligning to these tiers between the 2023-2024 and 2024-2025 financial year are visible below:



RISK AUDIT PERFORMANCE COMMITTEE

Tier	2023-2024 Delivery Plan No. Projects (%)	2024-2025 Delivery Plan No. Projects (%)
Tier 1 (Prevention)	53 (83)	17 (21)
Tier 2 (Early Intervention)	4 (6)	33 (40)
Tier 3 (Response)	7 (11)	32 (39)
Total	64 (100)	82 (100)

- 4.5.** Despite the above, direct comparisons with Year 2 are challenging for several reasons. Firstly, the tier allocation occurred after the Delivery Plan was agreed upon, and the initial attempt did not include agreed definitions. Additionally, the comparison is complicated because we included projects from the programme plans of some larger programmes, most of which fall into Response Tier 3. However, we have increased the number of projects within the Prevention programme from seven to twelve.
- 4.6.** 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 this detail for each entry within the Year 3 Delivery Plan. The Delivery Plan Dashboard in Appendix C displays the key measures and updated figures (where possible) related to these.
- 4.7.** The Delivery Plan Progress Tracker is a spreadsheet used 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 April to July 2024 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.
- 4.8.** For this reporting period, there are six projects marked as completed, with the rationale for each provided below. Further information regarding project descriptions; their categorisations and programme alignments, can be viewed in Appendix B. All project closures have been approved by the Partnership's SLT.



RISK AUDIT PERFORMANCE COMMITTEE

Project Reference	Project Title	Rationale for Project Closure
SE27	Review BAC Contract	Contract has been reviewed with new service specifications added, contract has been signed by both parties
SE29	Interim Beds	Contract ended with Woodlands on 31 st May 2024, with two beds at Deeside remaining until March 2025
SE10	MORSE Review in CN / AHPs	Evaluation was completed and presented to the IJB in May 2024 alongside a paper recommending the renewal of the license for a further three year period until October 2027. This was approved.
AFHL08	Complex Care Workforce and Skills Development	The Complex Care Framework is out to tender and the Capability Framework is completed. The Capability Framework will be applied when providers are appointed to the Complex Care Framework.
CT21	Hospital Discharge Pathway	Project complete. Final survey on implementation success has been completed and findings indicate a continued positive benefit of the change to aligned wards.
SE23	Care for People	Local Resilience Partnership has tested new model and was well received, with no further action required at this time.

4.9. At a programme level, Flexible Bed Base (that was reported upon during the 2023-2024 financial year) is no longer a standalone programme for the 2024-2025 financial year.

4.10. Appendix C shows the Delivery Plan Dashboard. This has been sorted by Programme as consistent with reporting throughout the 2023-2024 financial year.

5. Implications for IJB

5.1. Equalities, Fairer Scotland and Health Inequality



RISK AUDIT PERFORMANCE COMMITTEE

There are no direct implications arising from this report as it is a noting 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.

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

None.

6. Management of Risk



RISK AUDIT PERFORMANCE COMMITTEE

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 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: -

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.



RISK AUDIT PERFORMANCE COMMITTEE

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.