



Aberdeen City Health & Social Care Partnership
A caring partnership



Health and Care Experience Report

Results of 2023-2024 Survey



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Executive Summary

The Health and Care Experience (HACE) survey is a national survey that asks people about their experiences of accessing and using health and social care services in Scotland. The survey covers topics such as general practice, hospital care, social care, community health services, and carer support. The survey is conducted every two years and the latest results are based on responses from over 100,000 people across Scotland, including 3,190 from Aberdeen City, who completed the survey.

The report compares Aberdeen City's results with Scotland's and the previous survey's results, aiming to inform strategic planning to address challenges and anticipate future improvement.

Key findings include:

- Historically, Aberdeen City has outperformed the Scotland-wide average, but in recent times, the trend has reversed, with Scotland now achieving higher results.
- The overall care rating from General Practice as excellent or good was 60%, a decrease from 65% in 2021/22 and below the Scottish average of 69%.
- The most positive results from respondents were:
 - Experience of General Practice - I understood the information I was given (88% positive)
 - Experience of General Practice - I was treated with dignity and respect (84% positive)
 - Experience of General Practice - I was listened to (83% positive)
 - Experience of General Practice - I was able to ask questions if I wanted to (83% positive)
 - Experience of Out of Hours healthcare - I understood the information I was given (85% positive)

The demography of the respondent shows that majority of people were white, middle aged, and living in the least deprived areas of the city, and with a response rate equating to approximately 1.5% of the local population, results should be interpreted with this context in mind.

The report also outlines strategic plans to address challenges, including improving primary care stability, implementing the Carers Strategy, and enhancing community support. The Primary Care Improvement Plan (PCIP) focuses on six workstreams, with vaccination, pharmacotherapy, and



community treatment as key areas. Successes include the opening of two additional CTAC sites and increased access to physiotherapy and non-medical prescribers.

The Carers Strategy aims to improve support for unpaid carers, with initiatives like the Young Carers Charter and the Carer Reference Groups. The strategy's second year focuses on recommissioning support services and continuing with charter aims.

It is anticipated that implementation of the above will help contribute towards improvements in these metrics moving forward.

Overview of the 2023/2024 HACE Results for Aberdeen City

The Scottish Health and Care Experience (HACE) survey has been carried out once every two years since 2009/2010. The survey asks about people's experiences of:

- accessing and using their general practice and out of hours services
- aspects of care and support provided by local authorities and other organisations
- caring responsibilities and related support.

It is an online and postal survey sent to a random sample of people registered with a general practice in Scotland. For the 2023/24 round of the survey the questionnaire was reviewed to ensure continued relevance of survey questions for policy objectives, to reflect changes to the way that health and care services are provided, and to incorporate feedback from the 2021/22 survey.

For the 2023/24 round of the survey, 526,758 survey packs were sent out, and 107,538 completed surveys were received back, which gives a response rate of 20%. This is lower than the response rate achieved in the 2021/22 survey (24%). The response rate in Aberdeen City was also 20% equating to 3,190 individual responses, after 15,945 forms were sent out. This equates to approximately 1.5% of the total population.

This report intends to display the results from Aberdeen City and compare these to Scotland and to the results from the previous survey in 2021/22.



In response to the findings, key initiatives will be described to ensure our strategic planning will address the challenges faced by the community and anticipate areas where future enhancements are required.

The full Scottish Government report can be found using the following link.

[Health and Care Experience Survey 2023/24](#)

The table presented below offers a comparative analysis of the outcomes from the 2023/24 HACE survey for Aberdeen City against the national average for Scotland. Generally, the Scotland wide average outperform Aberdeen City.

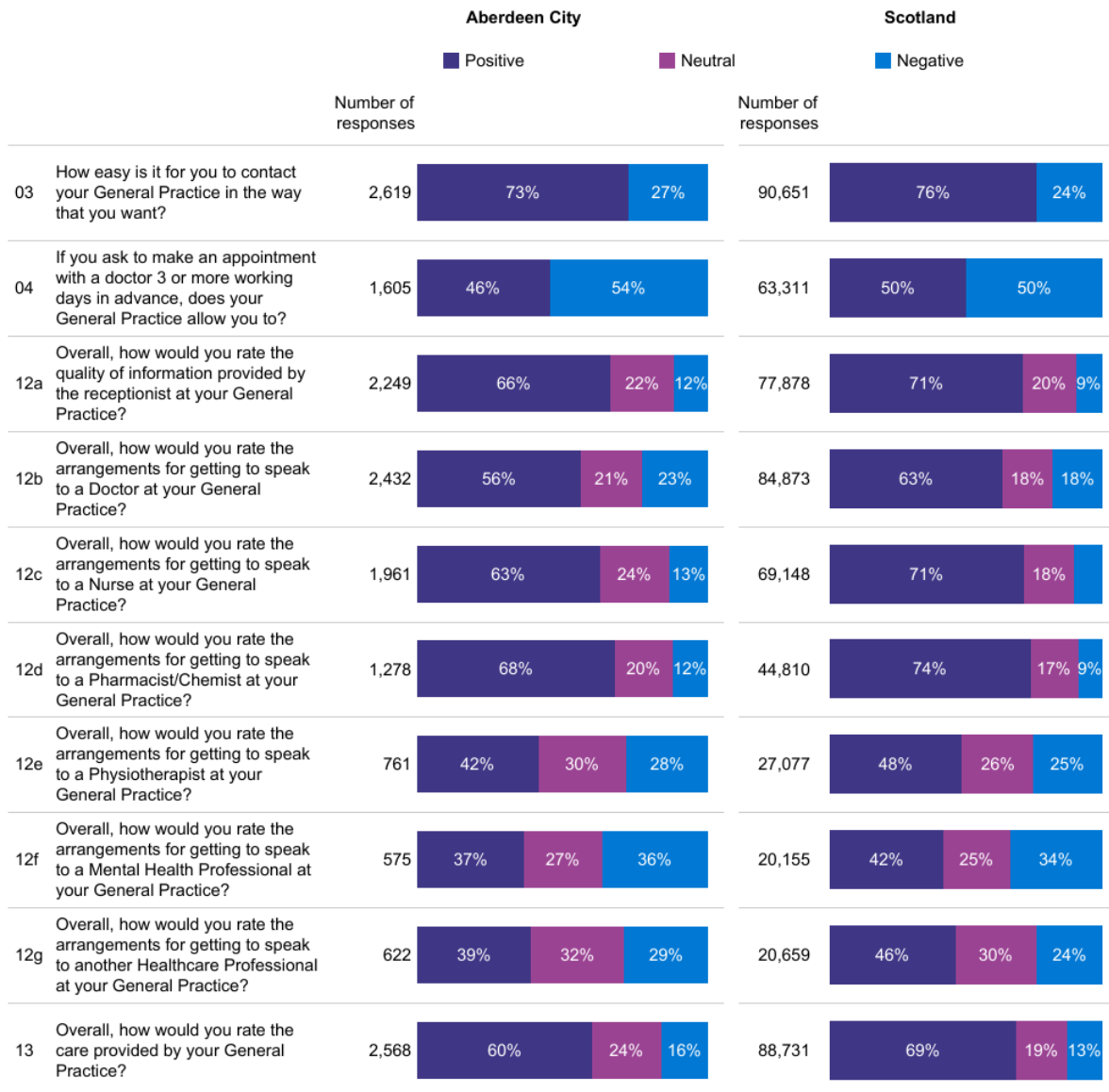


Table 1: Comparison of Aberdeen City and Scotland wide results of the HACE 2023/2024 survey

Aberdeen City Comparison Results

The following table displays a comparison between Aberdeen City’s results and the Scottish 2023/24 results, and also to the Aberdeen City HACE results against that of the Scottish results from 2021/22 and notes whether there is any statistical difference or change.



Examining the differences in results from the HACE survey for Aberdeen City between the 2023/24 period and the 2021/22 period reveals marked variances, with a number of outcomes showing a statistical decrease compared to previous years whereas some remained unchanged.

While there has been a decline, 73% of the individuals who reported ease in contacting their General Practice still represents a majority, indicating that a significant number of people find it relatively straightforward to get in touch with their GP when needed. Despite the drop from the previous year's 77% and falling below the Scottish average of 76% for 2023/24, the figure remains an evidence to the accessibility of GP services.

Just under half of the survey respondents (46%) reported they are able to book appointments at their General Practice three or more working days in advance. This figure is a slight decrease from the 49% reported in the 2021/22 survey and is also below the Scottish average of 50% for 2023/24.

The quality of information provided by the receptionist was rated as good or excellent by 66% of individuals, which is consistent with the 2021/22 results and, although lower than the Scottish average (71%) for 2023/24 results, still reflects a majority positive perception.

Survey participants were asked to rate the arrangements for getting to speak to a different healthcare professionals at their General Practice.

- Arrangement to speak with a Doctor: 56% of respondents found the arrangements to speak to a doctor satisfactory, this is slightly lower to the 2021/22 results (59%) and the 2023/24 Scottish result (63%).
- Arrangement to speak with a Nurse: 63% of respondents found the arrangements to speak to a nurse satisfactory, this is lower than the 2021/22 results (70%) and the 2023/24 Scottish result (71%).
- Arrangement to speak with a Pharmacist/Chemist: 68% of respondents found the arrangements to speak to a Pharmacist/Chemist satisfactory, this is lower than the 2021/22 results (77%) and the 2023/24 Scottish result (74%).
- Arrangement to speak with a Physiotherapist: 42% of respondents found the arrangements to speak to a Physiotherapist satisfactory, this is lower than the 2021/22 results (56%) and the 2023/24 Scottish result (48%).



- Arrangement to speak to a Mental Health Professional: 37% of respondents found the arrangements to speak to a Mental Health Professional satisfactory, this is significantly lower than the 2021/22 results (49%) and the 2023/24 Scottish result (42%).
- Arrangement to speak to another Healthcare Professional: 39% of respondents found the arrangements to speak to another healthcare professional satisfactory, this is significantly lower than the 2021/22 results (55%) and the 2023/24 Scottish result (46%).

The proportion of people rating the overall care from their General Practice as excellent or good are 60% in the 2023/24 survey, this has decreased compared to the 2021/22 percentage of 65% and Scottish wide result of 69%.

		2024 % Positive (selected area)	Comparison to Scotland		Comparison to 2022			
			Statistically different to Scotland?	Scotland 2024 % Positive	Statistical change since 2022?	2022 % Positive (selecte..		
03	How easy is it for you to contact your General Practice in the way that you want?	73%	Lower	↓	76%	Lower	↓	77%
04	If you ask to make an appointment with a doctor 3 or more working days in advance, does your General Practice allow you to?	46%	Lower	↓	50%	No	○	49%
12a	Overall, how would you rate the quality of information provided by the receptionist at your General Practice?	66%	Lower	↓	71%	No	○	66%
12b	Overall, how would you rate the arrangements for getting to speak to a Doctor at your General Practice?	56%	Lower	↓	63%	No	○	59%
12c	Overall, how would you rate the arrangements for getting to speak to a Nurse at your General Practice?	63%	Lower	↓	71%	Lower	↓	70%
12d	Overall, how would you rate the arrangements for getting to speak to a Pharmacist/Chemist at your General Practice?	68%	Lower	↓	74%	Lower	↓	77%
12e	Overall, how would you rate the arrangements for getting to speak to a Physiotherapist at your General Practice?	42%	Lower	↓	48%	Lower	↓	56%
12f	Overall, how would you rate the arrangements for getting to speak to a Mental Health Professional at your General Practice?	37%	Lower	↓	42%	Lower	↓	49%
12g	Overall, how would you rate the arrangements for getting to speak to another Healthcare Professional at your General Practice?	39%	Lower	↓	46%	Lower	↓	55%
13	Overall, how would you rate the care provided by your General Practice?	60%	Lower	↓	69%	Lower	↓	65%

Table 2: Results comparison between Aberdeen City 2023/2024 results and the Scotland wide 2023/2024 results and the Aberdeen City 2021/2022 results.



Patient Experience, Out of Hours and Caring Support

The Table below displays the results from those questions relating to patient experience, out of hours and caring support. The majority of responses in this category are positive, with the exception of, 'I feel supported to continue caring' which had 37% positive response, 41% neutral responses and 22% negative response.

Select a question from the list below to compare a result to the equivalent 2022 result and the Scotland result, and display a time trend for all surveys since 2016, where questions are comparable. Statistical comparison against 2022 available at Scotland, NHS Board and Health & Social Care Partnership level.		Number of Responses	Aberdeen City		
			Positive	Neutral	Negative
13	Overall, how would you rate the care provided by your General Practice?	2,568	60%	24%	16%
03	How easy is it for you to contact your General Practice in the way that you want?	2,619	73%		27%
25	Overall, how would you rate the care you experienced from this Out of Hours service?	543	71%	16%	12%
31	Overall, how would you rate your help, care or support services? Please exclude the care and help you get from friends and family.	270	65%	22%	13%
30e	Experience of Social Care: I was supported to live as independently as possible	250	68%	24%	8%
37e	I feel supported to continue caring	325	37%	41%	22%
37a	I have a good balance between caring and other things in my life	381	66%	22%	12%

Table 3: Results from the 2023/24 HACE Survey displaying patient experience, out of hours and carings support.

Patient Experience

The table below shows a further breakdown of the responses from respondent on the treatment or advice from the General Practice. Majority of response were positive across all areas, with the exception of 'I was given the opportunity to involve the people that matter to me' which had 44% positive response, 44% neutral response and 12% negative response.



Select a question from the list below to compare a result to the equivalent 2022 result and the Scotland result, and display a time trend for all surveys since 2016, where questions are comparable. Statistical comparison against 2022 are available at Scotland, NHS Board and Health & Social Care Partnership level.

		Aberdeen City			
		Number of Responses	Positive	Neutral	Negative
16a	Experience of your General Practice: I was given the opportunity to involve the people that matter to me	1,713	44%	44%	12%
16b	Experience of your General Practice: I was listened to	2,329	83%	9%	8%
16c	Experience of your General Practice: I was given enough time	2,279	77%	13%	10%
16d	Experience of your General Practice: I was treated with compassion and understanding	2,297	80%	13%	7%
16e	Experience of your General Practice: My treatment and care were well co-ordinated	2,189	65%	20%	15%
16f	Experience of your General Practice: The healthcare professional knew my medical history	2,241	61%	23%	17%
16g	Experience of your General Practice: I had a chance to ask about the benefits and risks of the treatment	1,972	57%	29%	14%
16h	Experience of your General Practice: I was able to ask questions if I wanted to	2,301	83%	10%	7%
16i	Experience of your General Practice: I understood the information I was given	2,312	88%	8%	
16j	Experience of your General Practice: The health professional checked I understood what I had been told	2,154	70%	19%	11%
16k	Experience of your General Practice: Staff helped me to feel in control of my treatment and care	1,972	56%	29%	15%
16l	Experience of your General Practice: I was involved in decisions about my care and treatment	2,025	63%	24%	14%
16m	Experience of your General Practice: I felt able to make an informed choice about my treatment and care	1,995	62%	25%	12%
16n	Experience of your General Practice: I was treated with dignity and respect	2,315	84%	11%	5%

Table 4: Results from the 2023/24 HACE Survey displaying patient experience (treatment or advice from the General Practice)

Out of Hours Healthcare

The table below shows a further breakdown of the responses from respondent on out of hours healthcare. The majority of the responses in this group are positive, with the most positively rated statements being: 'I understood the information I was given' (85%), 'I was able to ask questions and I was listened to' (82%) and 'I was treated with dignity and respect' (81%).



Select a question from the list below to compare a result to the equivalent 2022 result and the Scotland result, and display a time trend for all surveys since 2016, where questions are comparable. Statistical comparison against 2022 are available at Scotland, NHS Board and Health & Social Care Partnership level.

		Aberdeen City			
		Number of Responses	Positive	Neutral	Negative
24a	Experience of Out of Hours healthcare: I was listened to	524	82%	10%	9%
24b	Experience of Out of Hours healthcare: I was given enough time	505	77%	13%	10%
24c	Experience of Out of Hours healthcare: I was treated with compassion and understanding	514	79%	12%	9%
24d	Experience of Out of Hours healthcare: I was given the opportunity to involve the people that matter to me	444	62%	27%	11%
24e	Experience of Out of Hours healthcare: I understood the information I was given	505	85%	10%	
24f	Experience of Out of Hours healthcare: I was able to ask questions if I wanted to	505	82%	9%	9%
24g	Experience of Out of Hours healthcare: Staff helped me to feel in control of my treatment and care	476	66%	20%	14%
24h	Experience of Out of Hours healthcare: My treatment and care was well coordinated	485	68%	18%	15%
24i	Experience of Out of Hours healthcare: I was treated with dignity and respect	513	81%	11%	8%
25	Overall, how would you rate the care you experienced from this Out of Hours service?	543	71%	16%	12%

Table 5: Results from the 2023/24 HACE Survey displaying patient experience, out of hours healthcare

Care, Support and Health with Everyday Living

The table below shows a further breakdown of the responses from respondent on care, support and health with everyday living. The majority of response were positive across all areas, with the exception of 'I had a say in how my help, care or support was provided', with 48% positive response, 33% neutral and 19% negative response.



Select a question from the list below to compare a result to the equivalent 2022 result and the Scotland result, and display a time trend for all surveys since 2016, where questions are comparable. Statistical comparison against 2022 are available at Scotland, NHS Board and Health & Social Care Partnership level.

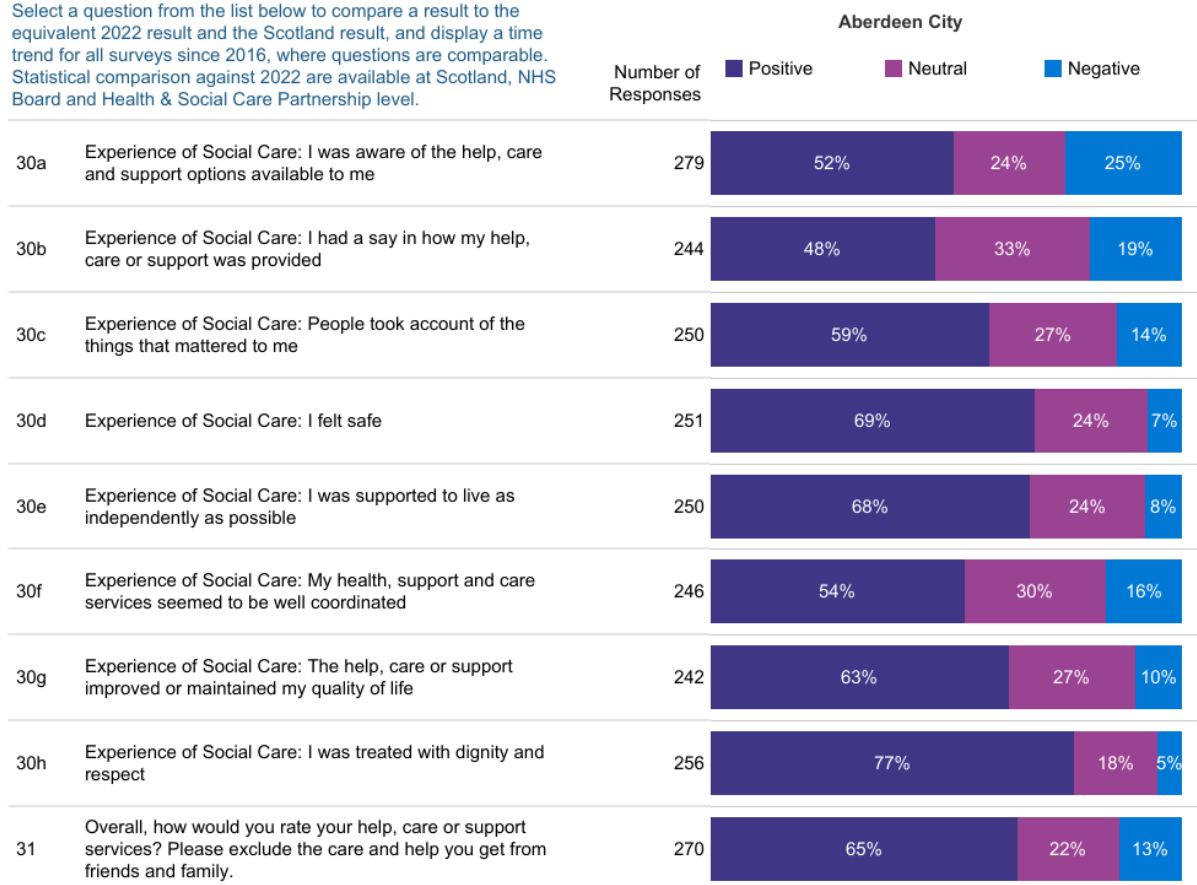


Table 6: Results from the 2023/24 HACE Survey displaying caring support and help with everyday living.

Care Responsibilities

The table below shows a further breakdown of the responses from respondent care responsibilities.

Only one statement was rated positively by majority of respondents: : 'I have a good balance between caring and other things in my life (66%).



Select a question from the list below to compare a result to the equivalent 2022 result and the Scotland result, and display a time trend for all surveys since 2016, where questions are comparable. Statistical comparison against 2022 are available at Scotland, NHS Board and Health & Social Care Partnership level.

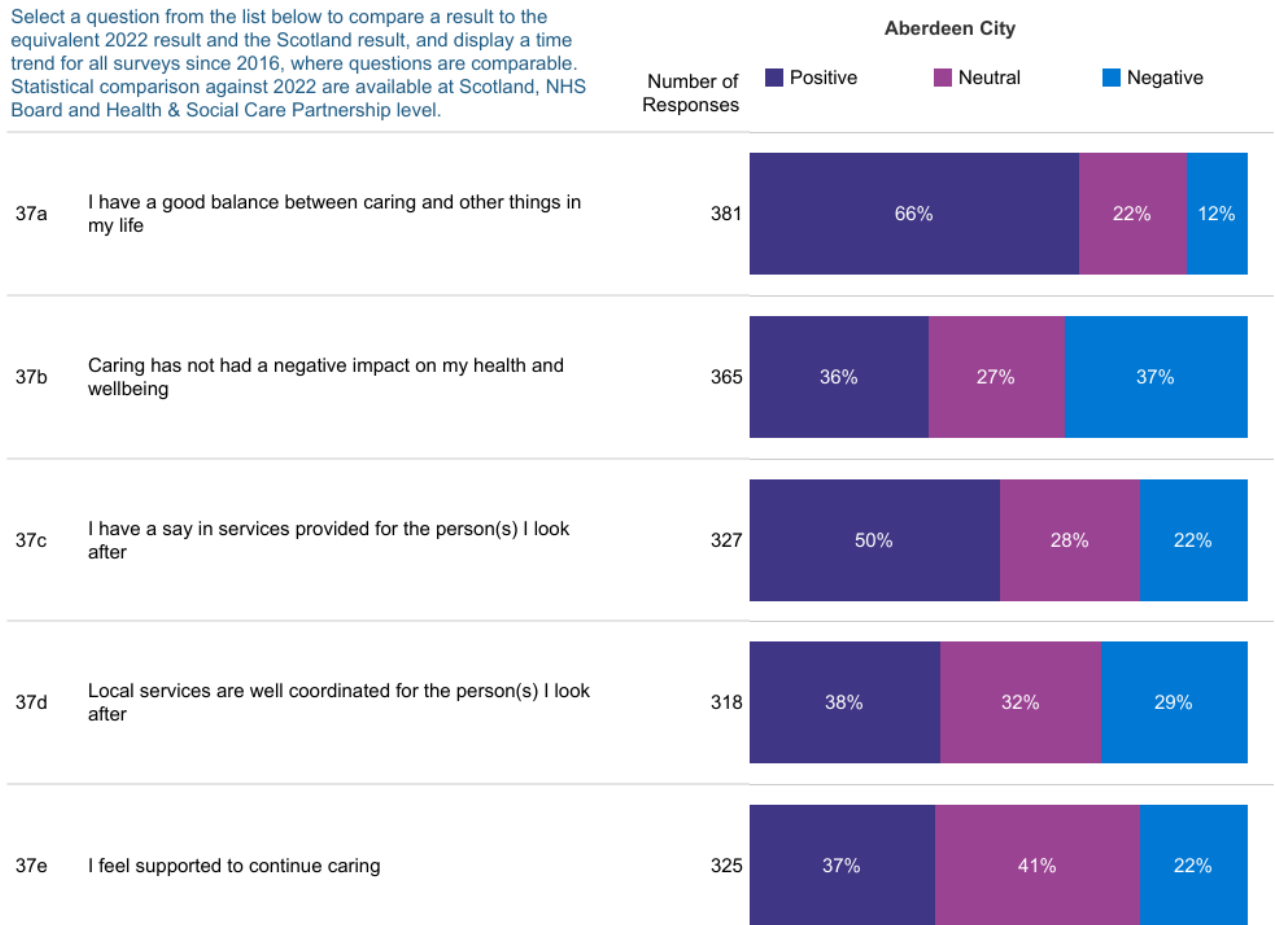


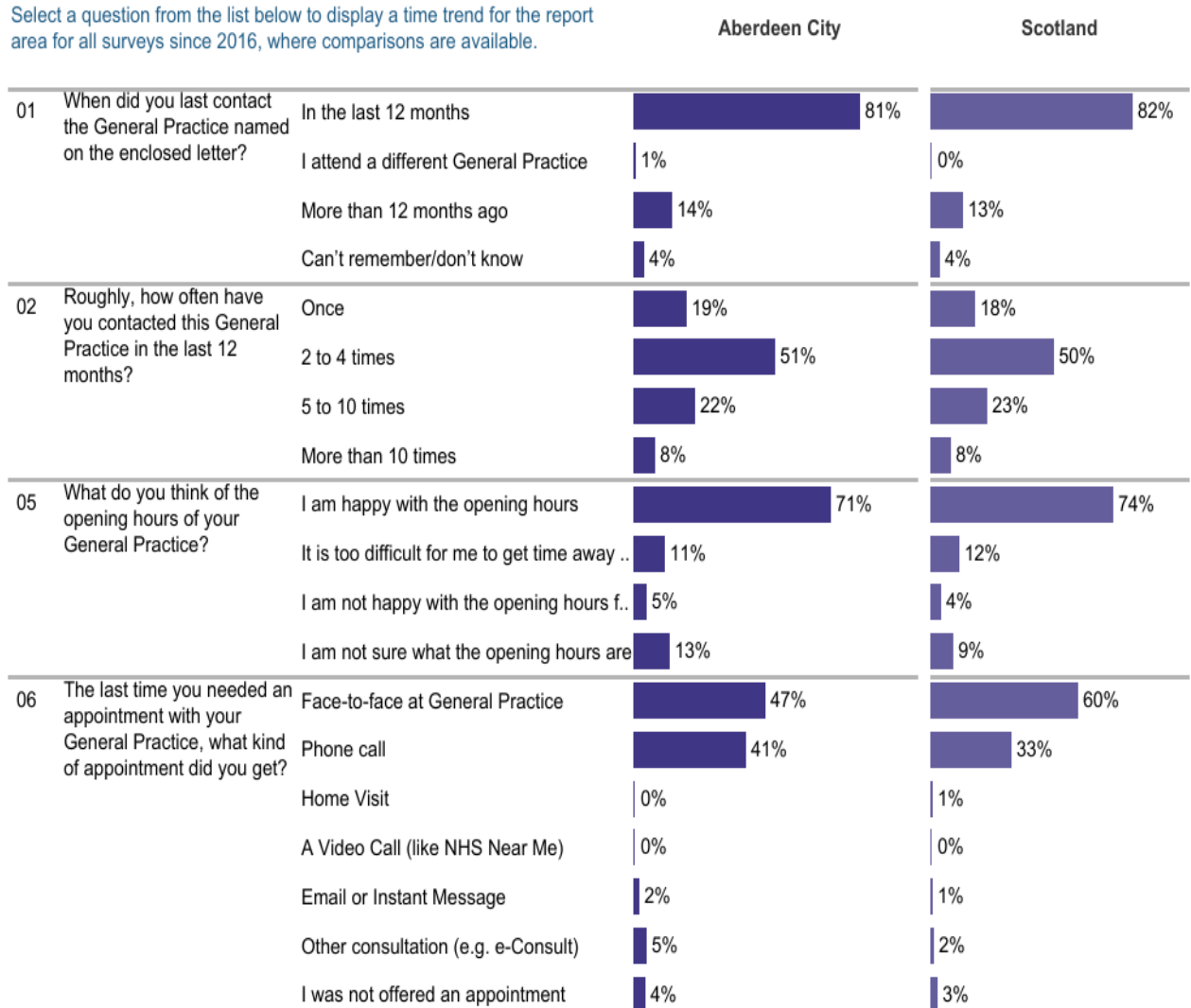
Table 7: Results from the 2023/24 HACE Survey displaying caring responsibilities



Contact frequency and Information Results

The survey also inquired about the frequency of contact with GP Practices and social care services, as well as the level of information provided about care and support. The results for Aberdeen City and Scotland showed a considerable range of variation. In Aberdeen City, respondents were less likely to have a face-to-face encounter at the GP Practice (47%) compared to the Scottish average (60%), but were more likely to have appointments via phone or email (41%) than the Scottish average (33%).

Select a question from the list below to display a time trend for the report area for all surveys since 2016, where comparisons are available.





07	Were you offered a choice in the kind of appointment you received?	Yes	26%	32%
		No	57%	51%
		Not applicable	17%	17%
08	Were you satisfied with the appointment you were offered?	Yes, and I accepted an appointment	73%	81%
		No, but I still took an appointment	24%	18%
		No, and I did not take an appointment	2%	1%
09	If you weren't satisfied with the appointment you were offered, why was that? Please tick all that apply.	It was not at the time or on the day I wa..	11%	14%
		It was not the type of appointment I wan..	57%	51%
		The appointment wasn't soon enough	28%	26%
		I couldn't book ahead at my General Pr..	14%	20%
		It wasn't with my preferred Healthcare P..	13%	16%
		Another reason	14%	11%
10	The last time you needed to see or speak to a doctor or a nurse from your General Practice quite urgently, how long did you wait?	I saw or spoke to a doctor or nurse on t..	43%	49%
		I saw or spoke to a doctor or nurse withi..	18%	17%
		I waited more than 2 working days to se..	16%	12%
		I haven't needed or cannot remember s..	23%	22%
11	What was the main reason you waited longer than 2 working days when you needed to see or speak to a doctor or a nurse from your General Practice quite urgently?	The person I wanted to see was not ava..	13%	16%
		The times available in the next 2 days w..	2%	5%
		I was not offered a chance to see or spe..	79%	70%
		Another reason	7%	10%

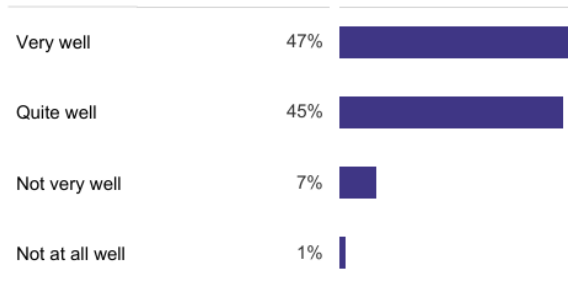
Table 8: Contact frequency and experience Aberdeen City and Scotland Wide comparison results from 2023/2024 HACE survey



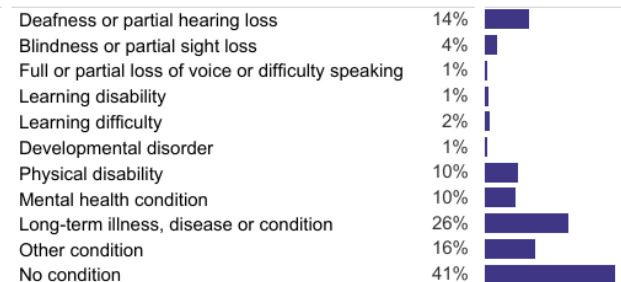
About the respondents

The survey asked respondents to provide some demographic information, such as their age, gender, ethnicity, disability status, and caring role. The table below shows the breakdown of the respondents from Aberdeen City by these characteristics. The majority of people who responded to the survey were white middle aged living in the least deprived areas of the city.

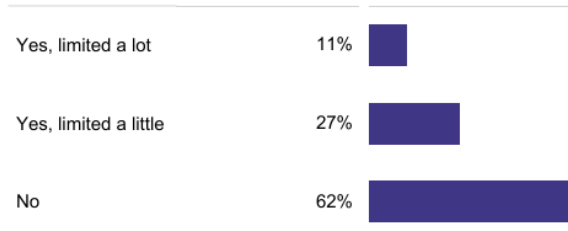
In general, how well do you feel that you are able to look after your own health?



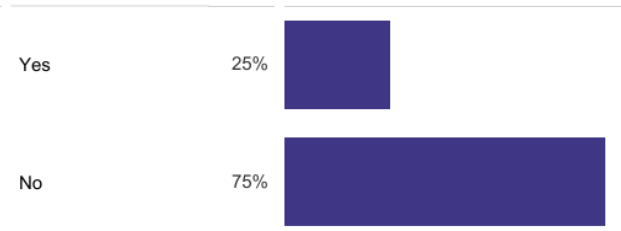
Do you have any of the following, which have lasted, or are expected to last, at least 12 months? Please tick all that apply.



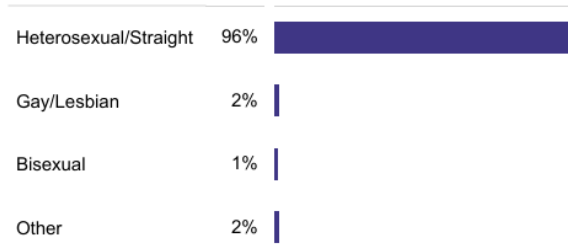
Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?



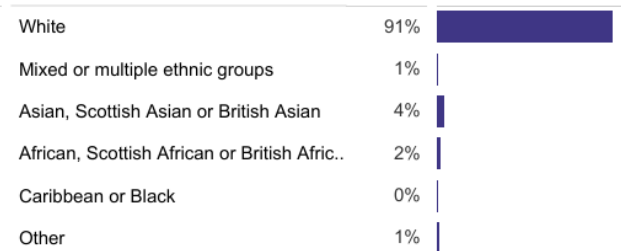
Do you suffer from chronic or persistent pain, that is pain that carries on for longer than 3 months despite medication or treatment?



Which of the following options best describes your sexual orientation? Please tick one box only.

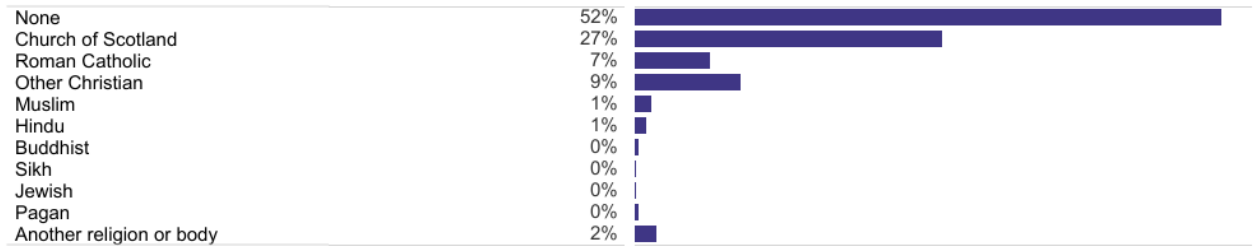


What best describes your ethnic group? Please tick one box only.

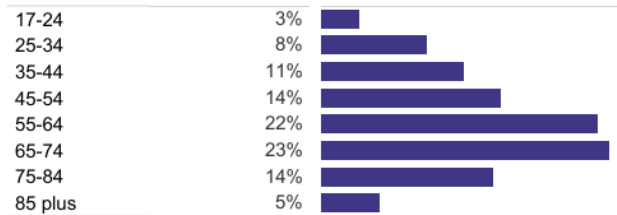




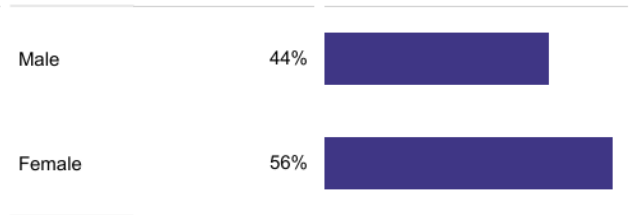
What religion, religious denomination or body do you belong to?



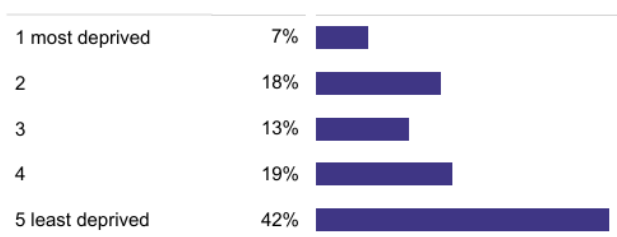
Age group:



Sex:



**Scottish Index of Multiple Deprivation (SIMD):
 (1 most deprived; 5 least deprived)**



Urban/Rural classification:

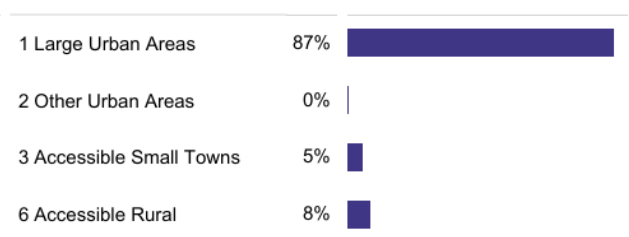


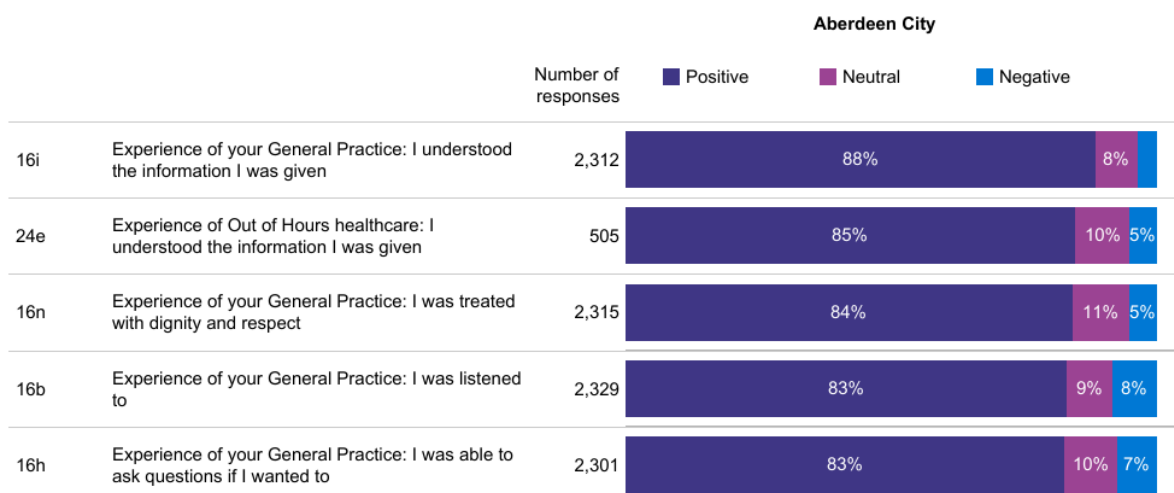
Table 9: Demographic make-up of Aberdeen City 2023/24 HACE Survey respondents.



Top Five Positive and Negative Results

Based on the scores and the percentage of positive responses, the following are the top five positive and negative results for Aberdeen City from the survey:

Most positive results



Most negative results

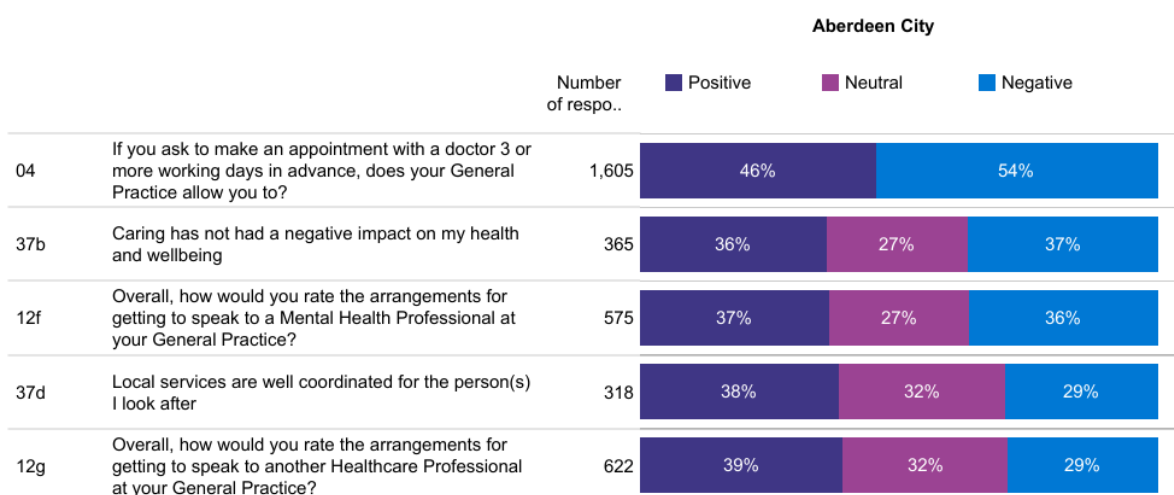


Table 10: HACE survey results displaying most positive and negative results for Aberdeen City.

It is notable that 88% of our populous who responded to the survey find that they understand what is spoken about within a GP appointment, 84% felt they were treated with dignity and respect, while 83% felt listened to and able to ask questions if they wanted to.



Those respondents who experienced out of hours care also responded positively with 85% feeling they understood the information they were given.

However, looking at the five areas where Aberdeen City scored negatively, we see that a little over half of the respondents responded negatively to the question 'if you ask to make an appointment with a doctor 3 or more working days in advance, does your GP Practice allow you to'. Looking at this in more depth, we found that positive responses to this question have reduced by 35% over the past eight years as can be seen in Table 8.

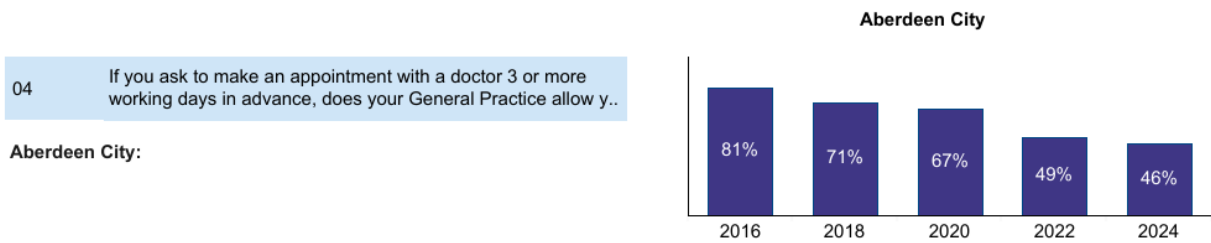


Table 11: Aberdeen City HACE responses from 2016-2024 for doctor appointments 3 or more days in advance.

Historically, Aberdeen City has outperformed the Scotland-wide average, but in recent times, the trend has reversed, with Scotland now achieving higher results. The comparison highlights a more favourable trend across Scotland, with a 2% reduction from 2022 to 2024, as shown in the data.

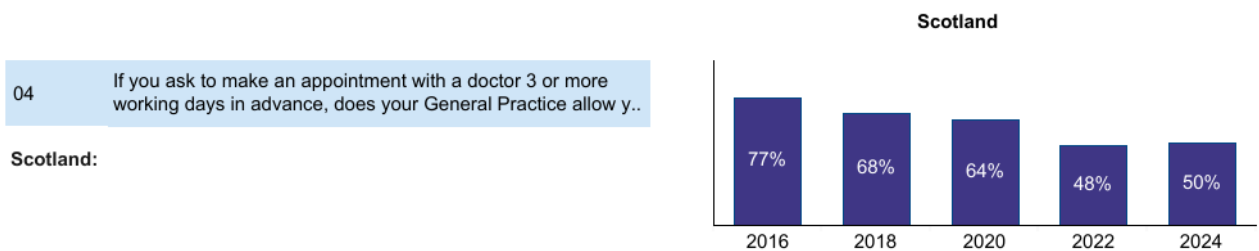


Table 12: Scotland HACE responses 2016-2024 for GP appointments 3 or more days in advance.

Looking at the results obtained for 'Overall, how would you rate the Arrangement to speak to a Mental Health Professional', this appears to have decreased over time with a significant 9% drop between the 2020 and 2024 results.



12f

Overall, how would you rate the arrangements for getting to speak to a Mental Health Professional at your General Practitioner?

Aberdeen City:

Aberdeen City

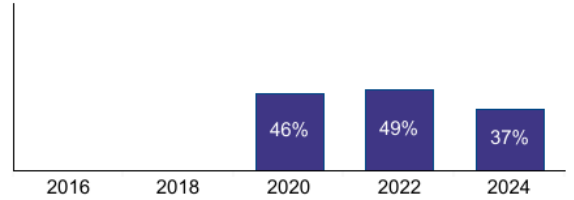


Table 13: Aberdeen City HACE responses from 2016-2024 for an arrangement to speak with a Mental Health Professional at GP.

The downward trend is observable as well in the Scottish average over that time span.

12f

Overall, how would you rate the arrangements for getting to speak to a Mental Health Professional at your General Practitioner?

Scotland:

Scotland

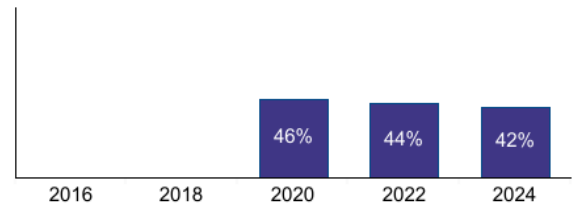


Table 14: Scotland HACE responses 2016-2024 for an arrangement to speak with a Mental Health Professional at GP.

The trend for how 'local services are being well coordinated for the person(s) I look after' from 2016 to 2024 is relatively stable for Aberdeen City.

37d

Local services are well coordinated for the person(s) I look after

Aberdeen City:

Aberdeen City

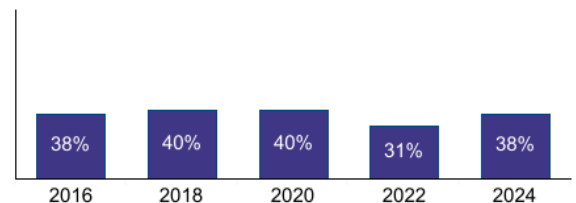


Table 15: Aberdeen City HACE responses from 2016-2024 for Local services coordination.



37d Local services are well coordinated for the person(s) I look after

Scotland:

Statistically different: higher than 2022

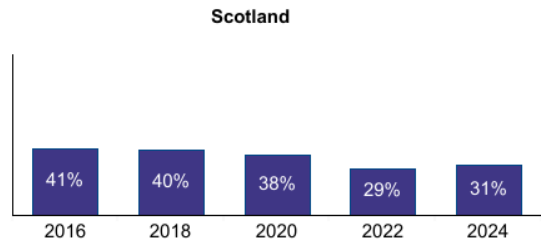


Table 16: Scotland HACE responses 2016-2024 for Local services coordination.

Our Response

Consistent with previous reports, this section outlines the strategic response to the five areas identified as needing the greatest improvement in Aberdeen City. Existing work being implemented through the Partnership’s Strategic Plan 2022-2025 is thought to directly positively impact upon these areas. The below table describes some of the initiatives being undertaken and how they align to the areas identified above, before each are described in greater detail. It is important to note that this is not an exhaustive list of activities.

ID	Question	Initiative
04	If you ask to make an appointment with a doctor 3 or more working days in advance, does your General Practice allow you to?	General Practice Vision Programme Primary Care Improvement Plan
12f	Overall, how would you rate the arrangements for getting to speak to a Mental Health Professional at your General Practice?	
12g	Overall, how would you rate the arrangements for getting to speak to another Healthcare Professional at your General Practice?	
37d	Local services are well coordinated for the person(s) I look after	Initial Point of Contact Enhanced Community Support Huddle
37b	Caring has not had a negative impact on my health and wellbeing	Implementation of the Carers Strategy



By delivering these projects, we will aim to increase capacity, designed to positively impact upon waiting times while also giving the public access to services in a way that should be more aligned to how they would like to engage.

General Practice Vision Programme

The model of provision of GP services has had to develop and change to cope with increased demand on services due to an increasingly complex and aging population coupled with workforce challenges.

In response to the evolving significant sustainability challenges within General Practice in ACHSCP, the GP Vision Programme was commissioned to outline a new vision and strategic objectives that will guide the future direction of General Practice across Grampian. A Vision Statement has been created which captures the changes required to move towards a more sustainable General Practice sector within the area. A sustainable General Practice across Grampian which enables people in their communities to stay well through the prevention and treatment of ill health.

A co-production approach which included cross system workshops and patient engagement enabled the creation of a central vision statement, with surrounding 10 key objectives which capture the changes required to move towards a more sustainable General Practice sector in Grampian. Co-production highlighted need to provide comprehensive and accessible healthcare services that not only address illness, but also promote preventive care, to empower individuals to lead healthier lives. There is an objective for each of the key themes which are: Data, Multi-disciplinary Team, Models of contract, Digital, Premises, Pathways, Keeping the Population well, Continuity of care, Mental Health & Wellbeing and Recruitment, Retention & Wellbeing.

The new vision for General Practice contributes to local, regional and national initiatives including:

- The National Health and wellbeing outcomes;
- NHS Grampian Vision, Values and Strategic Themes;
- Aberdeen City, Aberdeenshire and Moray HSCPs Vision and Priorities; and
- Local Outcome Improvement Plans across Grampian.

Key Progress Points

Practices have introduced new ways of working, such as triage, to ensure patients see the right person at the right time and that the whole multi-disciplinary team are used effectively in the provision of



care for their patient population. This has meant that the patient can be seen on the day and significantly reduces the need for pre-bookable GP appointments. If the practitioner determines a pre-bookable appointment is necessary this can be actioned.

- PCIP Review Group has now met 3 times and a short life working group to determine data required has been set up including representation from finance and public health
- Data Workstream has carried out the first workshop sessions to determine what data sets require to be collected
- Regular meetings with the Scottish Government established to help deliver the models of contract objective

An Implementation plan has been created, and a programme delivery board and working groups set up to deliver on the objectives. The priority objectives are currently being taken forward.



Primary Care Improvement Plan (PCIP)

The ACHSCP is working with GPs to focus on becoming expert medical generalists and in turn provide better care for patients by maintaining and improving access, enabling more time with the GP for patients when it is really needed (continuity), and providing more information and support for patients (co-ordination) and better health in communities.

The PCIP is working towards delivering 6 workstreams within the Memorandum of Understanding:

1. Vaccination Transformation Programme (VTP), 2. Pharmacotherapy, 3. Community Treatment and Care (CTAC), 4. Urgent Care, 5. Additional professional roles, for example, but not limited to, musculoskeletal focused physiotherapy services & community clinical mental health professionals (e.g. nurses, occupational therapists) and 6. Community Link Worker service.

Of the 6 workstreams there are 3 key workstreams of focus: Pharmacotherapy, 2. Community Treatment and Care (CTAC) and 3. Vaccination Transformation Programme (VTP). Plans for Urgent Care, Community Link Workers and additional Professional roles should continue and services already in place should be maintained. Due to other external challenges, including funding, the ongoing sustainability of particular initiatives, such as funding around mental health, has been limited. In these circumstances, the learning from such tests of change have been shared with Practices to facilitate the embedding of lessons learned into their practice.

Key Successes over the last 12 months include:

1. Two CTAC sites were opened over the last year, which brings the total to eight clinic sites (Inverurie Road Clinic Bucksburn, Bridge of Don Clinic, Northfield Clinic, Carden House, College Street, Kincorth Health Centre, Airyhall Health Centre and Aberdeen Vaccination and Wellbeing Clinic).
2. Vitamin B12 injections are now available and delivered by CTAC at the Vaccination and Wellbeing Hub in the city centre. This was Implemented in February and demand has reached 600+ patients using this service. This frees up capacity in practices and patients have the option to have their injections at the practice or book an appointment at the hub.
3. Electro-cardiogram provision also began in CTAC clinics within the past year.

Improvements Made



1. Physiotherapy First Contact Practitioners - Now available in 26 practices across the city, offering more direct access to physiotherapy.
2. Training to the non-medical prescribers is available and on a phased programme. Percentage of contacts being First Contact has increase in true first contact appointments, from 50% in 2022-23 to 70% in 2023-24, freeing up appointments for GPs, more appropriate use of the service/improved patients journey. Approximately 279 clinical hours of patient contact in a week.
3. Link Workers service - There are link workers who are based within the GP practices who signpost to services including 3rd sector. This is a referral based service and practice staff can refer eg GP's, Practice Nurses, Reception staff and Physiotherapists. There are a variety of reasons for referrals and this includes housing issues, financial issues and low level mental health issues.
4. CTAC delivers over 4,000 x 15 minute appointments across the city on a weekly basis.

Initial Point of Contact

Initial point of contact was developed to intervene early during an individual's journey and help them to avoid a crisis situation further down the line.

ACHSCP organised a workshop attended by citizens, care providers and social care staff it was recognised that there is a need to develop a multi-disciplinary preventative and proactive approach to supporting older people and those with physical disabilities who are at risk of crisis. One of the main themes to arise from this was how to intervene early during an individual's journey and help them to avoid a crisis situation further down the line. Out of this arose the concept of an Initial Point of Contact for citizens, their families or representatives to contact when they had concerns for their wellbeing.

The Initial Point of Contact will receive calls from the public and will determine eligibility for referrals relating to Care Management, CAARS Occupational Therapy, Bon Accord Care Occupational Therapy, CAARS Physiotherapy and Community Nursing, as well as signposting to other support services as required.

It is proposed that an Initial Point of Contact (IPOC) is created to handle calls from members of the public if they have concerns for their wellbeing and feel they need some form of support, or their friends or their representatives if they have concerns about someone's wellbeing.

The calls will be handled by the existing Aberdeen City Council Community Support team, and it is anticipated that 0.5 WTE will be required for handling the calls, based on existing call volumes. Full



training will be provided to the Community Support team in order to handle the calls as effectively as possible. Upon receiving a call, the call handler will determine the support required by the person, and which service or services from those listed above is best placed to provide that support, and whether the person requiring support meets the eligibility criteria. There are 3 outcomes for a request for support. The person is eligible for support, the person is not eligible for support, or the IPOC call handler is unable to determine whether the person is eligible for support due to the complexity of the person's needs or if the caller is in crisis. In these circumstances, the details will be passed to a professional in the relevant service to use their skills and experience to consider the person's eligibility, this will thereby enhance how local services are coordinated.

Enhanced Community Support Huddle

ACHSCP created the Enhanced Community Support Huddles (ECS) during the COVID19 pandemic to facilitate key community services participating in a daily virtual meeting to provide effective coordination, governance support, engagement with GPs and ensure quality improvements to the service. Enabling coordinated, rapid, wrap around support for primary care patients who were at risk of admission, or are deteriorating. The ECS is key in addressing patient safety needs swiftly.

In order to show staff engagement and the improvements that have been made, a survey of ECS participants in 2022. The findings indicate that while there is a need to enhance the existing information flow, a significant number of staff concur that the quality and speed of care and support would improve with more robust connections between General Practitioners and Emergency Care Services.

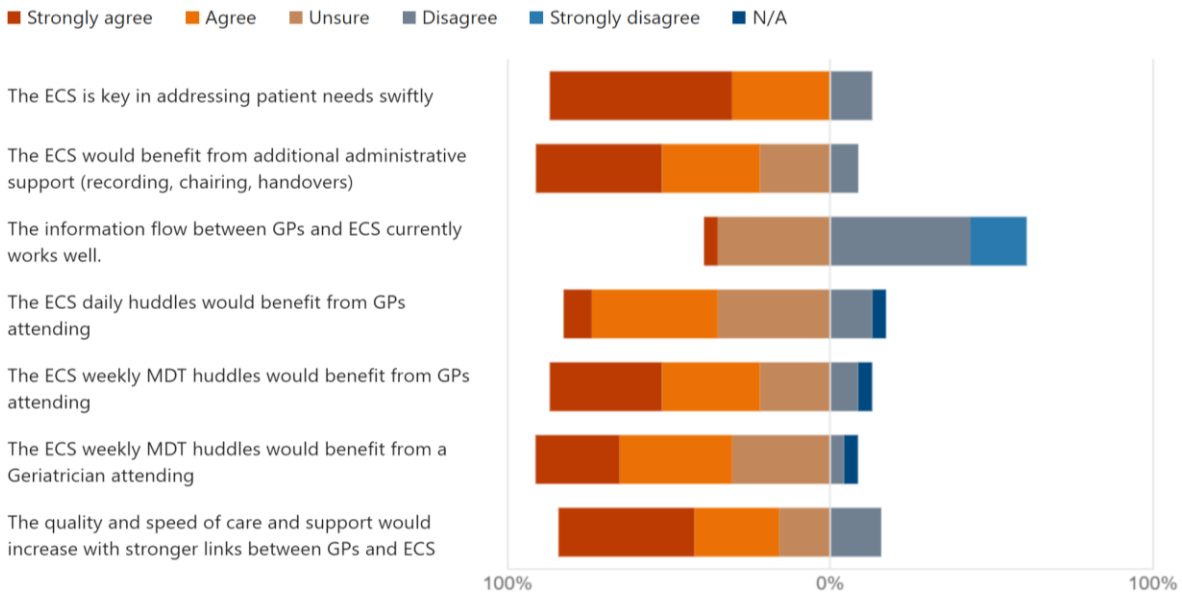


Table 17: Enhanced Community Support Huddles Survey carried out in 2022 showing staff engagement and the improvement

A similar survey was re-run November 2023 and there has been a shift shown towards Strongly Agree across the answers, with no Disagree/Strongly Disagrees chosen.

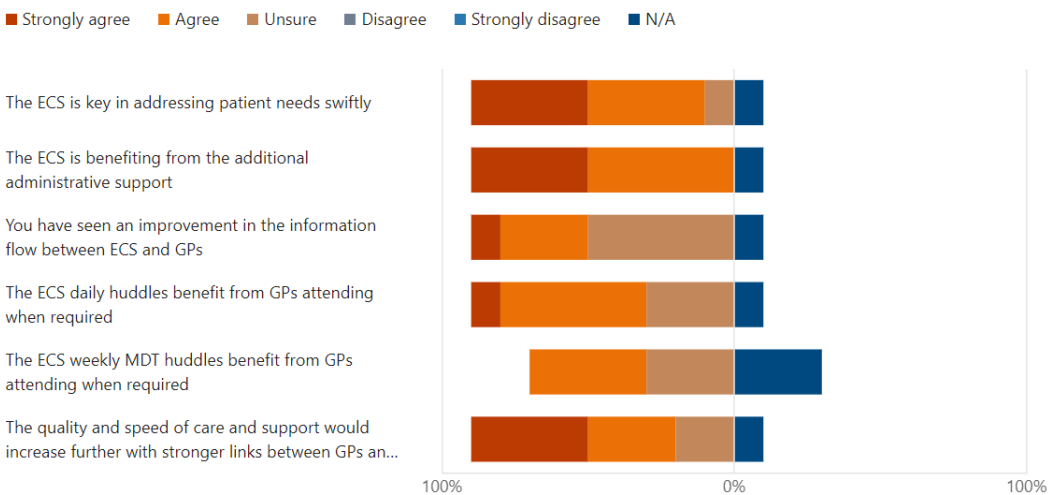


Table 18: Enhanced Community Support Huddles Survey carried out in Nov 2023 showing staff engagement and the improvement

Implementation of the Carers Strategy

The Carers Strategy and Action Plan aims to plan and deliver services and support for Unpaid Carers across Aberdeen City. Identifying Carers, getting them access to support, and providing information to support them to support others are key objectives. The overarching aim of this strategy is to improve the



experience of all carers in Aberdeen City, making best use of available resources to do so. You can view the carers strategy here- [achscp-carers-strategy-2023-2026.pdf \(aberdeencityhsc.scot\)](https://www.aberdeencityhsc.scot.nhs.uk/achscp-carers-strategy-2023-2026.pdf).

Comparing the results from the ACHSCP 2022-23 Carer Strategy Survey and those of the 2023-24 survey, the percentage of people who “strongly disagree” that ‘Local services are well coordinated for the person I look after’ has declined from 48.4% in the 2022-2023 survey, to 36.7% in the 2023-2024 survey. In-house data therefore shows a similar slight improvement in how well coordinated local services are.

Collaborative work is ongoing between ACHSCP and providers who give support to unpaid Carers to build relationships and provide a quality service. In addition, the Carer Strategy Implementation Group (which meets with providers, and a range of other relevant stakeholders on a bi-monthly basis) is focused on the four broad priorities expressed in the ACHSCP Carer Strategy. This continuous dialogue and focus may have some bearing on the attention that providers/ stakeholders give to ‘ensuring local services are well coordinated’.

Some key progress report published in February 2024 highlighted key areas such as:

- Launch of the Young Carers Charter - is a LOIP project initiated in May 2023 has the project aim to increase by 20% registered young carers accessing support from the young carers service by 2025. Progress against this charter includes reviewing the use of the Young Carers Statement and referral process and pathway. Barnardo’s has also been successful at implementing the Think Young Carer training
- Initiation of a Carer Reference Group: we ensured Carers are empowered to have input in future service design and have their say on what information they need to support them as a Carer.
- Achievement of the Adult Carers Project: to increase the number of unpaid carers feeling supported by 10% by 2023, allowing them to enjoy a life alongside caring and to enable the caring role to be sustained. This project led to the development of several initiatives, including the Respite Bureau and the Time to Live project. A further initiative, the Wee Blether Cafes, is highlighted overleaf.
- Carer Strategy Implementation Group which brings together a range of HSCP professionals and Carer Support Services. The regular dialogue and focus on the Carer Strategy between ourselves/ ACHSCP and other health and social care professionals is intended to have a positive effect on all aspects of the strategy.



- The ACHSCP's creation and maintenance of the CRG ('Carers Reference Group'), which was a key aim of the Carers Strategy for Aberdeen City may, in time, be able to improve the carer experience results. The groups intention is to grow in size and diversity, with the aims of: providing peer/ mutual support, information sharing within the group and with ACHSCP, and in raising issues of concern with ACHSCP. This may help to effectively identify some of the systemic barriers for unpaid Carers to maintain and improve their health and wellbeing. Those barriers – whether personal, interpersonal or in respect of service provision and systemic barriers, can only be addressed when accurately identified.

In the coming year, we plan to recommission both Young and adult carers support services through a collaborative commissioning process, getting key input from all stakeholders. Also, continue with Young Carers Charter and refocused aim for the Adult Carers Charter with the refreshed Local Outcome Improvement Plan (LOIP) improvement projects approved from April 2024.