Risk, Audit and Performance Committee-Quarter 3 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 (Blue, Red, Amber, Green) status although it should be noted that additional categories have been added i.e. White for Not Started and Purple for Closed.

Section 1.2 shows the projects sorted by Programme to give an overview of some key areas of progress.

1.1. Overall Delivery Plan Status, by BRAG.

| Status | Description | No. of Projects | % of Total Projects |
|--------|--|--------------------|------------------------|
| Blue | Complete | 10 | 12 |
| Green | On track to deliver by deadline | 57 | 70 |
| Amber | At risk of non-delivery/not meeting deadline | 11 | 13 |
| Red | Missed Deadline/Unable to Deliver | 0 | 0 |
| White | Not Started | 1 | 1 |
| Purple | Closed | 3 | 4 |
| | TOTAL | 82 | 100 |

NB: Rounding of percentages to the nearest whole number may mean that the total does not add up to exactly 100%

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 or if a proportion of projects have been completed / closed. 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 | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------------|------|-------|-------|-----|--------|-------|--|--|
| Commissioning (5) | 60% | 40% | | | | | All GCC Contract review workstreams have held initial meetings Key stakeholder meeting undertaken for collaborative counselling ahead of initial Steering Group meeting scheduled for January 2025 | Three projects closed within this programme TEC workshop planned for January 2025 to determined best use for TEC across the City |
| Communities (6) | | 100% | | | | | Successful Community Appointment Day held at Northfield Hub in November with 98 attendees Locality Empowerment Group attendance increased from 26 in October 2023 to 35 in October 2024 Grampian Gathering held in October with almost 200 community members attending | Projected date for occupation of Countesswells Health & Wellbeing Clinic delayed and awaiting confirmation of proposed new date Planning begun to deliver annual wellbeing and GMAN Festivals later this year |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------|------|-------|-------|-----|--------|-------|--|---|
| Digital (5) | 20% | 40% | | | 40% | | DPIA completed and signed off for implementation of Electronic Medication Administration Recording Model Purchase Order Form for the new Alarm Receiving Centre has been finalised and signed | One project closed within this programme (renewal of Morse license for further 3 years approved by the JB in May 2024 Single Point of Contact work slowed due to operational pressures |
| Frailty (7) | | 86% | 14% | | | | Discharge to Assess trial recommenced in January 2025 following pilot in November-December 2024 New frailty standards published November 2024 with the Partnership completing a self-assessment against these | Pilot of the Liaison Service with General Medicine wards commencing in January 2025 |
| Home Pathways (3) | | 100% | | | | | Independent Living and Specialist Provision Housing Market Position Statement approved at IJB in November 2024 Sub-group of Disabled Adaptations Group | |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------------|------|-------|-------|-----|--------|-------|---|---|
| | | | | | | | established to ensure alignment with the recently published Adaptations guidance | |
| Hospital at Home Expansion (5) | | 40% | 40% | | | 20% | Direct referrals now being taken from City Visits Team has had input from Organisational Development colleagues around Courageous Conversations training. Attended GP city event in December to promote admission avoidance pathway | Remote monitoring systems not being explored at this time due to expansion pressures Significant staff absences impacted patient flow |
| Infrastructure (3) | | 100% | | | | | Building for health and care services in Countesswells furnished and ready for occupation | Infrastructure Plan development impacted by the ongoing Premises review Proposals aligned to Rapid Review of Assets remain on track to be completed by February 2025 |
| MHLD (6) | 17% | 50% | 33% | | | | Data is complete on all NHS out of authority placements and cases are being routinely reviewed | Capability Framework completed and applied to Complex Care Framework which is now live |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------------|------|-------|-------|-----|--------|-------|--|--|
| | | | | | | | Aberdeen City's LOIP project charter regarding suicide prevention approved All actions for Adult Mental Health Secondary care Pathway Review assessed, with 75% either in progress or completed | No further Scottish Government funding for Adult Autism Assessment Team beyond March 2025 Enhanced Mental Health Outcomes Framework funding has been reduced by 10% across all programmes, meaning planning for current deliver models is being revisited |
| Prevention (12) | | 92% | 8% | | | | Uptake for Child Immunisations has seen a small increase following test of change at Tillydrone and Bucksburn clinics Systems Network Group established for Whole System Approach to Obesity work Wellbeing Coordinators have taken part in 'Stand up to falls' with 33 sessions of Falls Prevention Awareness delivered across the City | HIS Sexual Health Standards unable to be progressed due to major staffing pressures The Partnership will contribute towards delivery of NHS Grampian's 5 year Health Equity Plan for communities within Aberdeen City |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|---|------|-------|-------|-----|--------|-------|--|--|
| | | | | | | | Monthly staff walk has been established with Paths for All Make Every Opportunity Count training delivered to ~40 individuals at Middlefield Community Hub | |
| Primary Care (3) | | 100% | | | | | CTAC workstream has been delivered 98% against the 2018 Primary Care Improvement Plan. Multiple targeted cost saving projects underway to mitigated against increasing prescribing costs | Reports drafted to be presented to all three IJB's in January / February 2025 regarding the GP Vision implementation programme |
| Redesigning Adult Social Work (1) | 100% | | | | | | | Some areas of redesign slowed or paused due to operational, strategic and national priorities Given social care is entering into a targeted project to reduce costs and thereafter a further redesign will be undertaken, the evaluation is not |

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|--------------------------------------|------|-------|-------|-----|--------|-------|---|---|
| | | | | | | | | required. therefore the project will stop |
| Review of Rehab (3) | | 33% | 67% | | | | Review of wheelchair service has commenced Strategic Review Group assembled to review focus on rehabilitation review | Phase 2 of neuro rehabilitation pathway being developed as a budget savings option as part of the 2025/26 budget setting process. |
| Resilience (5) | 20% | 60% | | | 20% | | Communications Plan and Timetable for 2025/26 being developed Budget saving options for increase to existing charges being developed and will be submitted alongside the Medium Term Financial Framework in March 2025 | Category 1 Responder project complete, with Emergency Activation Plan approved at RAPC in December 2024 Review of Care for People arrangements completed and closed |
| Social Care Pathways (7) | 43% | 57% | | | | | Currently in second PDSA cycle regarding the Partnership's Discharge to Assess approach Vendor selected to supply TEC requirements at | Hospital discharge pathway project completed Prisoners (Early Release) (Scotland) Act 2025 received Royal Assent on 22 January 2025. This will see the ongoing future release of short term prisoners after 40% of their |

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|--------------------------------------|------|-------|-------|-----|--------|-------|---|---|
| | | | | | | | Stonewood Learning Disability Service • Appeals process and associated documentation for charging has been completed and now being implemented | sentence (rather than 50%) - except for those with sentences relating to sexual assault or domestic offences. • Given the implementation of inspection recommendations and the ongoing improvement plan that sits under the ASP strategy, this project no longer required. |
| Strategy (7) | | 86% | 14% | | | | The statutory Climate Change report was presented at the IJB in November 2024, highlighting the progress made in the previous 12 months, and was submitted to the Scottish Government thereafter. Development session for Carers Strategy Implementation Group held in December 2024 Pan-Grampian working group established to deliver recommendations from | Draft Strategic Plan and associated documents now due to go to the JJB in March 2025 to allow for financial pressures to be fully considered |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------------|------|-------|-------|-----|--------|-------|---|---|
| | | | | | | | Hosted Services Internal Audit | |
| Workforce (4) | | 50% | 50% | | | | Workforce conference took place in December 2024 with a focus on staff health and wellbeing | High sickness absence levels currently due to flu |

1.3 Delivery plan Dashboard

The following provides comment on the Delivery Plan Dashboard.

| Measure | Comment |
|--|---|
| H@H Admissions | Increase in overall number of admissions compared to previous quarter |
| H@H Capacity | Average occupancy increases within Hospital @ Home and OPAT, with ELC and ANP remaining steady |
| Ward 102 Admissions | Admissions slightly increased compared to previous quarter |
| Ward 102 Boarders | Slight increase in boarders compared to previous quarter |
| Rosewell House | Marked increase in overall admissions and percentage of step up admissions compared to previous quarter |
| Rehabilitation review (SOARS admissions and occupancy) | Slight increase in average occupancy, however a slight decrease in the number of admissions |
| Specialist Older Adults Rehab Services-Length of Stay (LOS) | Average length of stay increased in four wards. Marked decrease in length of stay in neuro rehab unit. |
| Delayed Discharges Specialist Older Adults- Rehab Services | Slight decrease in distinct out of delayed discharges, but increase in monthly bed days. Decrease in no harm falls. |
| Social care pathways | Average carer searches in place consistent with previous quarter. Slight reduction in average weekly carer hours |
| Home Pathways | Increases both in discount count of delays and bed days monthly |
| Division A & B Hosted Services | Increase in percentage of patients treated within 18 weeks for Hosted Specialist MHLD services compared to previous quarter, with CAHMS percentage remaining high and stable. |
| MHLD Transformation | Slight increase in delayed bed days, with average overnight occupancy remaining high. |







| Strategy | Increases in number of adult and young carers supported. |
|--------------|--|
| Prevention | Slight increase in alcohol related admissions compared to previous quarter, with reduction in drug related admissions. Sexual health clinic attendances remain consistent. |
| Primary Care | Increase in attendance rate at CTACs compared to previous quarter, with the number of calls taken decreasing. Number of Practices operating at full service continues to increase. |

NB: Metrics whereby Q3 data are unavailable is due to data collection being on a monthly lag



