Risk, Audit and Performance Committee-Quarter 4 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 | 10 | 12 |
| Red | Missed Deadline/Unable to Deliver | 0 | 0 |
| White | Not Started | 1 | 1 |
| Purple | Closed | 4 | 5 |
| | 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% | 20% | 20% | | | | Two TEC workshops held for professionals and one with a group with lived experience to determined how TEC can be expanded across the city, one with professionals and another with a group with lived experienced Risk assessed care meeting held in February with several key actions arising including initiating a pilot for risk assessed care and capturing baseline care levels Funding is in place for the next financial year for the counselling contracts and also for Thinc and Dial A Bus (DAB). There is to be further review for the IJB in December | The funding for the Deeside beds were able to be sustained as there was some underspend from Woodlands which enabled us to extend the time we had the beds commissioned. The beds in Deeside ended at the end of March |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------|------|-------|-------|-----|--------|-------|---|--|
| Communities (6) | | 100% | | | | | COPD CAD planned in May; Dementia Post Diagnostic Support CAD planned for June and Chronic Pain CAD Planned for July Working closely with Chest Hearty Stroke Scotland for the introduction of Health Defence Team planned to commence in Summer 2025 which sees the delivery of free Health Assessment and Physical Activity support. Although open to anyone, the target group will be women's health, specifically women at risk of stroke, heart disease and diabetes. The main benefits of the work will be providing accessible preventative health checks; providing personalised lifestyle support and co-design services to meet specific | Care Opinion will come to an end on 31 March 2025 with alternative options being explored The Gathering is an event for over 50's to age well and plan for retirement. It was decided by SLT that due to the financial position the Gathering will no longer continue into 2025, however the Wellbeing Festival currently being planned with go ahead |

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|--------------------------------|------|-------|-------|-----|--------|-------|--|---|
| | | | | | | | needs. Work is ongoing to understand the potential reach of this work. | |
| Digital (5) | 20% | 40% | 20% | | 40% | | Camascope eMAR system went live at Back Hilton Road Learning Disability Service in January 2025. Transition from analogue to digital community alarms proceeding well with only 7 out of 2277 units remaining to be replaced. | Digital investment sets out a proposal to invest in the two proposals from Microsoft as part of Phase A to deliver 1) a social work practitioner application and 2) home care commissioning portal. These are currently closed as requires review from a financial viability |
| Frailty (7) | | 86% | 14% | | | | Rehab review programme plan developed and progressing Discharge to Assess trial continues and now has been extended to cover ED and AMIA | The pilot of the Frailty Liaison Service in General Medicine wards was due to commence January 2025 however this has been postponed due to the involvement of NHS Grampian in the National Discharge Without Delay work which will commence March / April 2025. This work will now be progressed as part of this programme. |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------------|------|-------|-------|-----|--------|-------|---|---|
| Home Pathways (3) | | 100% | | | | | | Registration yet to be completed for Stoneywood. No issues are anticipated and the Area Manager for The Richmond Fellowship Scotland continues to meet with the team weekly. The next project team meeting is towards the end of April 2025 |
| Hospital at Home Expansion (5) | | 40% | 40% | | | 20% | Currently when fully staffed the H@H service can provide capacity up to 50 beds. The team are working on a Scottish Government request to increase opportunities for expansion. Key work ongoing towards increasing referrals into the service through testing direct referral route from CAARs and investigating direct referrals from community heart failure nursing team | Remote monitoring systems not being explored at this time due to existing pressures Significant staff absences (due to unplanned and planned leave) within the H@H team are impacting patient flow in the service. |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------|------|-------|-------|-----|--------|-------|---|---|
| | | | | | | | Referrals direct from City Visits now established for acute patients | |
| Infrastructure (3) | | 67% | | | 33% | | Building for health and care services in Countesswells now fully operational in March 2025 The Infrastructure Plan will be aligned with the MTFF and new Strategic Plan, once approved. It will be developed alongside the Whole System Infrastructure Planning with NHSG. SLT have approved a number of savings and efficiencies that are being progressed in relation to buildings, most of these are complete but two are ongoing. Once completed capacity can then be focussed on finalising the Infrastructure Plan, a first draft is expected to be ready by October 2025 | |
| MHLD (6) | 17% | 50% | 33% | | | | General Adult Mental Health Secondary Care | Additional money from the Enhanced Mental Health |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------------|------|-------|-------|-----|--------|-------|--|--|
| | | | | | | | Pathway Review project reaching completion. Learning Disability Health Checks continuing across Aberdeen City. MHLD Board approved recommendations for seven workstreams within the Bed Base review. | Outcomes Framework allocation was expected in April 2025 from Scottish Government, however this has yet to be confirmed |
| Prevention (12) | | 92% | 8% | | | | Three strategic systems network group meetings have been undertaken for the health weight work. Three new local immunisation clinics opened in Torry, Health Village and Countesswells in March 2025 Cost of smoking tutor training delivered in Aberdeen Fun Activity Leaders Training Session delivered to 25 volunteers across Aberdeen Communities Team will be supporting 21 tutors who are delivering HIIC | Grampian Sexual Health Service is compliant with HIS standards, which in summary, improve access; reduce inequalities; identify areas for improvement & allow benchmarking with other services. Service currently receiving NHSG waiting times funding to reduce longest waiting times. Senior nurses retirals and imminent deputy service manager vacancy will temporarily restrict scope for further service improvements. Partnership contributing towards the development |

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|---|------|-------|-------|-----|--------|-------|--|---|
| | | | | | | | courses within all locality across Aberdeen | of the new Health Transport Action Plan. |
| Primary Care (3) | | 100% | | | | | CTAC workstream has been fully delivered within limitations of the funding. Pharmacotherapy roll-out is almost at full capacity Reflect and refresh workshop held on March on GP Vision implementation programme to review priorities against resources Roll out of pharmacy technician and pharmacist support to target prescribing efficiencies on behalf of Practices has begun. Reports drafted presented to all three IJB's in January / February 2025 regarding the GP Vision implementation programme | Transport Action Fidil. |
| Redesigning Adult Social Work (1) | 100% | | | | | | • | Given the current position and the need to reduce costs in social care, further |

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|--------------------------------|------|-------|-------|-----|--------|-------|---|---|
| | | | | | | | | work will be required as set out in our recovery plan. This refocus being on the drive to modernise social care using tec and enhancing digital opportunities alongside enablement. |
| Review of Rehab (3) | | 67% | 33% | | | | Clear programme plan in place outlining key areas of work within the strategic rehabilitation review | Consultation ongoing with Moray and Aberdeenshire regarding neurorehabilitation work moving forward. |
| Resilience (5) | 20% | 60% | | | 20% | | ACC Budget Setting meeting approved new charges for 2025/26 for the Contributing to Your Care Policy, with implementation plans prepared. | 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% | | | | | Delivery Plan for social care charging for 2025/26 in development as part of Aberdeen City Council's budget setting programme | Improvement to recording by NHSG Grampian staff of Adult Support and Protection activity is completed Just social work delivery plan project completed, with new strategic |

| Programme (total no. projects) | Blue | Green | Amber | Red | Purple | White | Achievements | Challenges/Worthy of Comment |
|--------------------------------|------|-------|-------|-----|--------|-------|---|---|
| | | | | | | | Weekly project meetings ongoing regarding discharge to assess work TEC management has been agreed for Stonewood | direction work now ongoing |
| Strategy (7) | | 86% | 14% | | | | Carers Strategy annual report approved at February JB meeting. All 2024 Hosted Services Audit recommendations now closed Infant massage sessions continuing at Froghall Community Centre contributing towards the reducing neglect referrals work Progress against equalities outcomes being collated for May 2025 JB Report | The Scottish Government is gathering views to help inform new Statutory Guidance for public bodies, to support them in putting the climate change duties into practice. This consultation has gone live and the Partnership will be collating a response for this during the consultation period. |
| Workforce (4) | | 50% | 50% | | | | Joint presentation on recruitment and retention being undertaken with colleagues from Aberdeenshire and Moray at the Commissioning Academy event in March. | Subject to completion of the strategic plan, a refreshed workforce plan is due to be produced in the second half of 2025 High sickness absence levels across the |

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| | | | | | | | This joint online even for all three areas had a total of 45 attendees. | Partnerships were in December 2024, however this was in line with annual seasonal patterns. Specific performance management and well- being activities are now established in the Partnership service with the highest absence rates. |

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 | 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 three wards. Decrease in length of stay in two with Stroke Unit East remaining relatively stable. |
| 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 | Decreases in both alcohol and 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



