



RISK AUDIT PERFORMANCE COMMITTEE

Date of Meeting	17 June 2025
Report Title	Delivery Plan Update
Report Number	HSCP.25.049
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Consultation Checklist Completed	Yes
Exempt	No
Appendices	<i>a. Year 3 Final Delivery Plan</i> <i>b. Mock 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:
- 2.1.1. Endorse the proposed status of the Year 3 Delivery Plan projects following completion of this plan as detailed in Appendix A.



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- 2.1.2. Endorse the proposed approach to performance monitoring for the Year 1 Delivery Plan of the new Strategic Plan, recognising this will adapt over time to ensure it is fit for purpose

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 conclusion of the Year 3 Delivery Plan as approved by the IJB in March 2023. It summarises the ongoing status of each project in response to the imminent implementation of the Partnership's new Strategic Plan later in 2025 (along with the associated Year 1 Delivery Plan for the new strategic planning cycle), in addition to refined performance reporting procedures.
- 4.2. As outlined in the revised Performance Framework, this Committee previously received the Delivery Plan Progress Tracker (showing updates for all entries in the Delivery Plan) and a supporting Dashboard (showing the key measures which the progression of the Delivery Plan sought to impact upon).
- 4.3. Following conclusion of this Delivery Plan, programme reports were drafted by Programme Managers, in collaboration with Senior Responsible Officers and broader colleagues as appropriate, to review the projects being closed; the projects continuing under business as usual arrangements; and projects continuing into the new delivery plan. The final update for each project, along with their future status, is visible in Appendix A. Of the 82 projects; 37 are transitioning to business as usual; 13 are closed; 10 are completed; and 22 are continuing onto the new Delivery Plan.
- 4.4. With the Partnership's new Delivery Plan being more streamlined to allow for a balance between prevention; transformation and financial sustainability, the performance reporting arrangements have been reviewed to ensure



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parity with this. The following are in development to accompany the next Delivery Plan:

4.4.1. A Delivery Plan Dashboard, providing a visual overview of progress by priority area. The Dashboard will be developed using PowerBI (a Microsoft digital platform for data visualisation), allowing progress to be reviewed at a glance and easier focus on areas not progressing as anticipated. It is proposed that the Committee will receive a summary of this information, in addition to key risks (and subsequent mitigations) and key success measures undertaken during the reporting period. A visual mock-up of this is visible in Appendix B.

4.4.2. A Strategic Plan Dashboard, the purpose of which is to 1) act as a frame of reference for the context we are working in, with specific regard to financial context; demographic context; workforce context and demand context; 2) monitoring of key national indicators most closely aligned to our delivery plan priorities and 3) act as a potential mechanism for showing potential progress on an annual basis. The methodology for developing this dashboard is being co-designed with colleagues from Public Health Scotland's Local Intelligence Support Team.

4.5. These reporting arrangements are deemed to be proportional in order to provide adequate assurance to the Committee that the Partnership's priorities are being sufficiently managed. However, the arrangements shall remain flexible with the potential to refine over time if required.

4.6. Performance reporting for Quarter 2 of the new Delivery Plan will be considered at the following Committee meeting on 27th August 2025.

5. Implications for IJB

5.1. Equalities, Fairer Scotland and Health Inequality

There are no direct implications arising from this report.

5.2. Financial

There are no direct implications arising from this report.

5.3. Workforce



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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

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



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				responsibility of the Committee would not be met.
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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.

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 and, that this has been monitored by the Senior Leadership Team on a monthly basis who consider and direct remedial action and unblock barriers where relevant. It further provides assurance that these arrangements shall continue into the new strategic planning cycle.