



## Appendix 1 – NHS Grampian Unscheduled Plan and Funding Phase 1 (Aug 2025 - March 2026) Overview

Phase 1	Occupancy Reduction	Required Funding	Key Objective	Accountable Officer	KPIs	End of Month Estimated Impact Timeline						
						Aug-25	Sept-25	Oct-25	Nov-25	Q1 26/27	Q2 26/27	Q3 26/27
FNC Strengthening	--		Admission avoidance	CO Acute	Shift Coverage Call back time, Reduced conveyances							
Aberdeen City increased community capacity – 5 intermediate care beds and 700 hours Care @ Home additionality aligned to D2A	2.5%	£656K not including D2A (HSCP core funded)	Reduced Occupancy	CO City	ARI Occupancy, reduced DD							
Frailty at the Front Door	13.8%	£803K*	Reduced occupancy	CO City	Admission %age Frailty Acute LoS							
Enhance pharmacy coverage	1.5%		Reduced occupancy	CO Acute	Daily discharge total Weekend Discharges, reduced LoS							
Increase DGH Discharge Lounge hours	0.3%		Reduced occupancy	CO Acute	Occupancy SAS stacking volume							
Increase AHP provision (7 day service)	1.7%		Reduced occupancy	CO Acute	Weekend discharge totals, reduced LoS							
Establish Moray Home to Assess capability	1.2%		Reduced occupancy	CO Moray	LoS DGH and CHs, reduced DD							
Establish Aberdeenshire D2A			Reduced occupancy	CO Shire	LoS ARI & CH, reduced DD							
Aberdeenshire enhanced step-down pathways to community hospitals	17%		Reduced occupancy	CO Shire	Frailty Acute LoS CH LoS, reduced DD							
Rapid transfer of patients to most appropriate care location - firebreak	12%		Reduced occupancy	CO Shire	CH/ARI occupancy, reduced DD							
FNC Expansion	~2% TBC		Presentation Avoidance	CO Acute	ED/AMIA Presentations							
Integrated Discharge Hub HALO/Discharge Coord/Discharge Lounge	~2% TBC		Reduced occupancy	CO Acute	Daily discharges Mean time of discharge							
Flow Enabler Support (F&E)			Reduced Occupancy	CO Acute	Bed waits ED/AMIA							
Hospital at home Moray			Reduced Occupancy	CO Moray	DGH Occupancy DGH LoS							

**Note** Non ACHSCP 'Required Funding' has been redacted as this is out with the responsibility of the ACHSCP and updates may still take place.