

Blue = complete/closed/ not started  
Red = missed deadline/unable to deliver  
Amber = at risk of non-delivery/not meeting deadline  
Green = on track to delivery by deadline

Delivery Plan Workplan Y1 Q2

Title	Project Description	Strategic Aim	Priority	Project Ref.	Start Date	End Date	BRAG Status	If BRAG Status is RED, AMBER or BLUE what is the main reason for this?	Explain why BRAG Status is RED/AMBER/BLUE	RED/AMBER Mitigation Actions	Tier	Measures	Latest Update
1. Use of Properties	Consolidate our use of properties	Modernising Service Delivery	Best use of Resources	MSD01	01/07/2025	31/03/2026	Green				Tier 4 (System Change)	Reduction in Premises Costs by £153,000	The target savings of £153k for this financial year have already been achieved through moving CTAC and Imrms from South College Street into Countesswells and the Health Village. CTAC also moved out of Carden House to give the GP Practice more clinical space allowing them to see more patients. The Woodside building has also been reviewed and these together with utility savings across ACHSCP have ensured we met our target. Work is ongoing to identify savings and efficiencies for the next two financial years which will be reported in due course.
2. Utility Savings	Deliver savings in Utility costs	Modernising Service Delivery	Best use of Resources	MSD02	01/07/2025	31/10/2025	Amber	Budget/Savings; Overall Assurance/Risk Level	Bill's come in several months retrospectively and only then will it be known if reduction activities have been successful.	Reduced heating temperatures were instructed from 1st April	Tier 4 (System Change)	Reduction in Utility Spend by £50,000	Actual utility costs are only known retrospectively , but heating in hubco buildings has been reduced and "switched off" most of the time until end September at least. Zonal Heating will be introduced within the Health Village within Q3 and this will mean only heating the areas that staff and patients use out of hours
3. Management of Vacancies	Deliver efficiencies from robust management of vacancies	Modernising Service Delivery	Best use of Resources	MSD03	01/07/2025	31/03/2026	Amber	Overall Assurance/Risk Level	However it is difficult to measure how many posts have been removed from establishment in 25/26 and how much of the savings can be equated to delaying the process in 25/26.	The vacancy assessment protocol asks managers to skill mix and redesign posts to enable new posts to be considered by the Chief Officer for approval. As of June 2025, all approved vacancies can now be collated on a monthly basis.	Tier 4 (System Change)	Reduction in Staff Costs by £1,346,000	Vacancy Assessment Protocol continues to be used across the Partnership. The Protocol has been reviewed on a quarterly basis and minor changes have been made. There is evidence from NHSG that the vacancy management process, introduced earlier this year, has contributed to a slowdown in the growth of headcount and whole-time equivalents (WTE). Within Aberdeen City H&SCP, headcount has decreased by 3.3% and WTE has declined by 4%. In comparison. In absolute terms, this represents a reduction of 65 in headcount and 65.1 in WTE between July 2024 and June 2025. Average Band of vacancies approved in 25/26 so far is B5. Assuming this as an average of posts that have been delayed, with on-costs each post would be £43k approx. 65 posts =£2.8m.
4. ACHSCP Posts	Reduce the number of posts in ACHSCP establishment	Modernising Service Delivery	Best use of Resources	MSD04	01/07/2025	31/03/2026	Green				Tier 4 (System Change)	Reduction in Staff Costs by £884,000	Recent evidence via NHS that ACHSCP reduced headcount by 4% wte (65 headcount) from June '24 to June '25. 13 posts have been lost through VRES in ACC 4 Senior Leadership Team posts have become vacant since 01/04/2025 and none are currently filled.
5. Technology and TEC usage	Increase the use of technology and Technology Enabled Care across the system	Modernising Service Delivery	Best use of Resources	MSD05	01/07/2025	31/03/2026	Amber	Timescales; Resources; Deliverables	The digital innovation project has just been initiated and the level of resource required and capacity to meet resource requirements is being determined.  Community pharmacies that serve three of the in-house Learning Disability services have advised that they will not integrate with eMAR for reasons of cost. This issue may impact on timelines and deliverables.	Liaison with internal resources to establish capacity and availability to meet digital innovation project requirements.  Discussion between in-house Learning Disability management, SLT, Primary Care and NHS Grampian Community Pharmacy to inform decision-making regarding next steps with regards to pharmacy.	Tier 2 (Early Intervention)	No. of care packages including TEC	Digital innovation and TEC paper was discussed and approved at IJB on 30th September. This detailed all of the current or planned digital and TEC projects proposed. Funding was approved by SLT for the roll out of eMAR to the remaining four in-house learning disability services in May 2025. Weekly meetings are in place to progress the project. There are a number of dependencies which impact timeline including: community pharmacy software integration, device ordering, D&T resource to set up 13 devices and input to Data Protection Impact Assessment (DPIA), medication cycle dates, in-house service capacity (taking account of no go-live in December). Timeline will be updated as timescales regarding dependencies are confirmed, current estimate of eMAR integration at all sites by end March 2026, with a 4 month post-implementation evaluation period. Community pharmacies for 3 of the 5 services have currently declined integration with eMAR. Alternative pharmacies that could provide an eMAR service are currently being identified. Dialogue currently ongoing with SRO, Learning Disability Service Manager, Primary Care team and NHS Grampian community pharmacy lead regarding barriers to community pharmacy adoption (these are financial) and decision regarding services moving their business to different pharmacies that provide eMAR. Stoneywood TEC (Just Checking system) awaiting installation of WiFi and broadband connectivity at the site for go-live, currently in progress. Evaluation will be conducted over a 12 month period following the first supported person moving in and system going live. A small co-design project funded through the Health Improvement Fund is currently under way at Len Inside Centre, trialling the Konpanion Maah products using sensor data to generate insights valuable in care planning. Demand request submitted for Aberdeen City Council Digital & Technology input to DPIA. TEC pop-up is planned for 5th November at Woodend Hospital and TEC awareness week is being planned for week commencing 3rd November, avoiding school holidays. This will included an invited event, with venue to be confirmed. <b>Digital Improvement Programme (DIP) Update</b> There are four AI Applications planned for development. Funded by Scottish Government Practitioners Search - (suggesting content from multiple different source to help with filling in business process documentation like assessments etc) <b>Practitioners Application</b> - (Transcription tool creating draft minutes of recorded meetings or consultations with service users ) <b>Single Point Of Contact SPOC</b> - Service directory Tool helping practitioners find the right help and referral pathways across the partnership <b>Initial Point of Contact</b> Creating tools and forms for service users to get right help and or sign posting, and or filter referrals for practitioners - his project is current being report here in the delivery plan TBD if amaigamated <b>Successes so far</b> Funding agreed Initial scoping and proposal agreed Work order and contracts signed off Start date of Project and project & timelines provisionally agreed with moving to mobilisation and project kick off for late September Note : The Technology and TEC updates will be separated for the next reporting cycle to assist in updates and review.
6. Social Care Charging	Implementing the new Charging Policy	Modernising Service Delivery	Best use of Resources	MSD06	01/07/2025	31/03/2026	Green				Tier 4 (System Change)	Policy developed and approved, systems and communications in place	New charging policy was approved by the ACC Finance & Resource Committee on 6th August. An in-person and a virtual workshop will be held with key staff to identify priorities for the first implementation phase (Nov 2025-March 2026), and ensure good alignment and coordination across social care, finance, and IT systems, teams, and ways of working. Benefits of outcomes will be identified at workshops to ensure effective tracking of benefits, continuous improvement and evaluation of project delivery. This includes estimating changes in income generation from next FY onwards.
7. Older People Care Provision	Modernise care provision for Older People	Modernising Service Delivery	Best use of Resources	MSD07	01/07/2025	31/03/2026	Green				Tier 1 (Prevention)	Reduction in Spend by £3,328,000	The Option 2 reviews remain ongoing; however, the timeline has been impacted by staff sickness and competing review priorities. As a result, completion is now expected in early Q3. We continue to monitor progress closely and will provide further updates as needed.
8. Residential Care Review	Review mix of residential care	Modernising Service Delivery	Best use of Resources	MSD08	01/07/2025	31/03/2026	Green				Tier 3 (Response)	Reduction in spend by £336,000	All packages have been reviewed and are due to be discussed with Contracts to finalise the contractual arrangements. However, a number of providers have now issued notice on some packages. Despite 1:1 support being in place, the providers have indicated they are no longer able to meet the individual needs of the service users. Work has commenced on creating a template to report on the care package review carried out using the manually gathered data which will be available at the beginning of October. The Care Package Review Report has been drafted and is currently being reviewed. This will be presented at SLT on 05/11/2025
9. Develop data dashboards	Develop data dashboards to support the planning and delivery of services	Modernising Service Delivery	Best use of Resources	MSD09	01/07/2025	31/03/2026	Amber	Deliverables	This project is Amber in specific relation to the Activity Dashboards. Whilst they have been developed, a full cycle has not yet occurred whereby they have been presented and socialised at SLT meetings. Further, feedback has been provided that context would be valuable to ensure this information is interpreted appropriately, however this has yet to be produced.	All iterations of the activity dashboard will be presented at SLT. Further, an associated commentary documented will be developed, helping provide guidance as to how best interpret the metrics contained within the dashboards, and an indication as to where may be the most appropriate areas of focus. This will be operational by November 2025.	Tier 4 (System Change)	Dashboards in place and reports informing work focus	<b>Delivery Plan Dashboard</b> Dashboard is live for Delivery Plan updates in the 2025/26 financial year. This was being considered for the first time at the Partnership's Senior Leadership Team in September 2025 with further refinements to the BRAG status criteria being identified as necessary to progress. <b>PMB Dashboard</b> Dashboard is in development. The purpose is to provide a visual overview of key performance indicators aligned to the Adult Social Work Service Performance Framework. For this reporting period, the data model / schema was developed along with data security and access controls, which were presented to the Performance Management Board in August. The first iteration of the dashboard was viewed at the Board meeting in September. <b>Activity Dashboard</b> Dashboard is in development. Three views are being developed: System indicators (Key Measures which if viewed daily can indicate pressure on the Partnership as a whole); High level dashboard (give an indication of pressure points and activity on particular services on a weekly basis); and operational dashboard (give an overview of activity across Partnership Services on a monthly basis). A second demo of the dashboard was presented to the Chief Officer in September, with further socialising / refinement of its development to occur at Senior Leadership Team meeting <b>Strategic Plan Dashboard</b> Further discussions to be held with the new Principal Information Analyst for Public Health Scotland who has recently been appointed to the Grampian region about alternative options of delivering this. It is likely that data from existing initiatives (such as the activity dashboard described above) can be repurposed to fulfil this ask. <b>Governance Dashboard</b> Dashboard is live and reviewed by the Partnership's Senior Leadership Team on a monthly basis, covering a variety of data such as staff absences; fulfilment of audit recommendations; training compliance; complaints and agency expenditure. This is now regarding as business as usual and future updates will only be provided when changes are made to its contents.
10. Modernise Care Models	Modernise care delivery models for vulnerable adults including people with Learning Disabilities and Complex Needs.	Modernising Service Delivery	Best use of Resources	MSD10	01/08/2025	31/03/2026	Amber	Timescales; Deliverables; Budget/Savings	This is one of a number of priorities aligned to LD which need to be planned for. There is a lack of both planning capacity and operational capacity to fully progress, and other projects underway will need to complete to release capacity. The Stoneywood Project for complex residential care has been top priority for the teams and this workstream.	Work continues to review care packages regularly and make adjustments when needed; providers are reviewed on a regular basis to ensure compliance and if there are issues of overprovision this is addressed. The Dynamic Support Register to log all current and at risk complex and out of area packages is now fully established; Stoneywood site has now opened and will accommodate 5 individuals with complex needs; all these people were longstanding Out of Area cases. Over last six months we have had to prioritise Stoneywood which will also provide key procedures, practices and learning to inform and facilitate further modernisation of all our care delivery models.	Tier 1 (Prevention)	Increase in % of clients with LD and Complex Needs living independently; Reduction in Out of Area placements	This project has not fully commenced due to capacity issues however as referenced in the mitigations a number of actions are already underway which support the aims of this work. The broader capacity issues especially in the operational team will continue to have an ongoing effect to this work as they will need to complete current projects and essential work; particularly around cost reduction and containment, options for freeing up capacity and the team is limited. Additionally there is limited project capacity to spread across a large number of projects. Significant progress has been made but a wider review and prioritisation of this project will now be undertaken with the SRO and service manager to align milestones and focus team efforts.
11. Improving Transitions	Implement transitions process to improve service user experience and future financial planning	Modernising Service Delivery	Best use of Resources	MSD11	01/07/2025	31/03/2026	Amber	Resources	The action, to review with Health (CAMHS, LD) its relationship with the approved Transitions Pathway, could not be undertaken by the end of September and remains ongoing.	Project Manager undertook a review of the pathway with existing information gained from Health, as an interim, and determined no concerns. A meeting with appropriate Health colleagues has been scheduled. Remain positive and confident for completion by March 2026.	Tier 1 (Prevention)	Process implemented, client feedback, budget performance	Transitions Pathway Intranet Page is active. Transitions Pathway Staff Guide approved and active. Staff Communications approved and shared for distribution. Transitions Partnership Group (TPG)/Coordinator Role reviewed alongside gaps identified from engagement undertaken with stakeholders. Transitions Referral Form live and proforma responses agreed. Drop-In Sessions organised for early Q3. Meeting with Chief Officer of CSW and Family Support rescheduled for early Q3
12. Learning Disability Day Care	Review Day Care Provision for people with Learning Disabilities	Modernising Service Delivery	Best use of Resources	MSD12	01/07/2025		Amber	Timescales;#Resources	The milestones and dates have slipped over the last month because of other team workload priorities.	Slippage due to limited care management Team resources and need to focus on statutory duties and other work especially around cost control and containment.	Tier 3 (Response)	Reduction in spend by £1,449,000	Work continues on the identified LD day opportunities which are being reviewed by care managers. The milestones and dates have slipped over the last month because of other team workload priorities. Budget savings have been taken out of the service budget and therefore we will not separately report on these, this will be via finance reporting and oversight from the budget holder.  Significant progress has been made but a review and prioritisation of milestones and dates will now be undertaken with the SRO and service manager to focus team efforts.



26. Healthy Weight	Publish an agreed multi-agency Healthy Weight Action Plan for Aberdeen City by December 2025	Prevention & Early Intervention	Improve Health	PAEI03	01/07/2025	31/12/2025	Green				Tier 1 (Prevention)	Plan published following approval by relevant agencies.	A system-wide workshop was held on 16/09/25. The purpose of which is threefold: 1) revisit the causes of obesity; 2) prioritise system level change ideas; and 3) refining our vision statement. There were 58 individuals who attended the event, including cross-system representation from Partners in academia; the third sector; catering; transport; education; sport and healthcare services. Of those who completed the post-event evaluation, the average satisfaction rating was 8.5/10, with almost half of responders rating the event 9/10. One responder stated they "felt part of a movement rather than learning" and particularly enjoyed "brain storming and thinking rather than listening to presentation[s]". Next steps is collating feedback and actions highlighted. Representatives from the project team co-presented an abstract at the UK Congress on Obesity on the 10-11 September. The presentation focused on the role of the Health Determinants Research Collaborative in supporting the development of the Healthy Weight Approach in Aberdeen City
27. Public Mental Health	Publish an agreed multi-agency Public Mental Health action plan for Aberdeen City by March 26	Prevention & Early Intervention	Improve Health	PAEI04	01/07/2025	31/03/2026	Green				Tier 1 (Prevention)	Plan published following approval by relevant agencies.	Early stakeholder engagement is now underway to introduce action plan development work to key stakeholders from across the system High level service mapping is being undertaken to better understand mental health services and supporting landscape in Aberdeen City Collaborating with colleagues in NHS Grampian's Health Intelligence department to secure support for data mapping and high level summary of mental health data across Aberdeen City Planning to undertake wider action mapping work with stakeholders, which will inform stakeholder workshops that are currently scheduled for November.
28. Ageing Well	Publish an agreed multi-agency Ageing Well action plan for Aberdeen City by April 2026	Prevention & Early Intervention	Improve Health	PAEI05	01/07/2025	30/04/2026	Amber	Timescales; Deliverables; Budget/Savings; Resources	Amber rating as project is currently meeting its milestones, however challenges will emerge at upcoming phases relating to key staff and partner availability to support the project over the winter period, particularly as the project only has one member of the Strategy and Transformation Team working on the project. There is also a risk around the complexity of the mapping exercise.	Programme Plan Communication and Engagement Plan Risk Register Support and oversight of Prevention SRO, Active Ageing Aberdeen Working Group, and Public Health Oversight and Support Group	Tier 1 (Prevention)	Plan published following approval by relevant agencies.	The Active Ageing Aberdeen programme commenced in June 2025 and is coming to the end of phase 1 of its programme cycle (programme set up). Programme governance has been put in place, which includes development of key documents such as a programme plan, risk register, communication and engagement plan, and programme initiation document.  The Active Ageing Aberdeen Working Group met for the first time on 26 June and now meets on a six-weekly cycle. The Active Ageing Working Group is chaired by ACHSCP's Prevention Lead and supported by the Transformation Programme Manager-Communities. Membership of the Working Group includes representation from Primary Care, Strategy and Transformation, Mental Health and Learning Disabilities, Community Nursing, Adult Social Work, Bon Accord Care, and NHS Grampian's Older Person's Psychology Service.  The programme has now commenced phase 2 (Building the Local Picture) and mapping the active ageing system across Aberdeen City has begun. The Active Ageing Working Group next meets on 4th December. The programme remains on track to develop an Active Ageing action plan by April 2026.
29. Smoking in Pregnancy	Decrease the number of women who are smoking during pregnancy in the 40% most deprived SIMD	Prevention & Early Intervention	Reduce Harm	PAEI06	01/07/2025	30/09/2025	Green				Tier 2 (Early Intervention)	Reduction in smoking prevalence at booking, number of pregnant women who set a quit date	<b>Aberdeen City continues to show strong progress under the new Tobacco Dependency in Pregnancy (TDIP) pathway.</b> In July 2025, 144 women were booked by Aberdeen City Community Midwives, with 83 receiving CO tests at booking—representing a 57.6% testing rate. Of these, 10 women were identified as smokers or recent quitters, and 6 had elevated CO readings. These figures contribute to the wider Grampian improvement, where CO testing at booking rose from 71.4% in July 2024 to 77.1% in July 2025. The Healthpoint service has successfully contacted 175 women across Grampian, with 78.1% of those who requested support setting quit dates—many from SIMD 1 & 2 areas. <b>Local engagement and service integration are key to Aberdeen's success.</b> Healthpoint wellbeing calls now include advice on smoking, oral health, gestational diabetes, mental wellbeing, and financial support. In Aberdeen, 34 women have been referred to the Infant Feeding Peer Support team, and 28 received dental access advice. (Source: Tobacco Dependency in Pregnancy Monthly Report July 2025)
30. Young People Vaping	Reduce the number of 13-18-year-olds in regular use of Vaping products	Prevention & Early Intervention	Reduce Harm	PAEI07	01/05/2024	30/04/2026	Green				Tier 2 (Early Intervention)	No. 13-18 year olds regularly Vaping	The "ABZ Vape-Free Generation" improvement project is working to reduce regular vaping among 13–18-year-olds to 4% by 2026. Led by Education Support Officers and supported by a Health Improvement Officer this is aligned with the LOIP goal of increasing healthy life expectancy, the initiative responds to rising youth vaping trends driven by sweet-flavoured, brightly packaged products and social media influence. The project includes school-based surveys, awareness campaigns, and support mechanisms tailored to young people. It aims to shift attitudes and behaviours through education and engagement, recognising the addictive nature of nicotine and the unknown long-term health impacts of vaping.
31. Drugs and Alcohol Harms	Reduce harm caused by the use of drugs and alcohol	Prevention & Early Intervention	Reduce Harm	PAEI08	01/07/2025	31/03/2029	Amber	Deliverables; Resources; Overall Assurance/Risk Level	Aberdeen, along with other areas in Scotland, have had an increase in drug deaths in 2025 linked to synthetic opioids contaminating the illicit drug supply. This has increased pressure on services. Specialist drug and alcohol services are GOPES4. ADP/CPA system changes are ambitious but capacity to support transformation is limited	Maintaining service capacity / stability	Tier 2 (Early Intervention)	Reduction in deaths related to drugs and alcohol by 10%	A number of initiatives are progressing, albeit slowly. Work on scenario and emergency planning is progressing. Need to get more partners proactively engaged. Work ongoing to refresh LOIP. Awaiting new SG plans for 25/26. Medication Assisted Treatment Standards (MAT Standard) Reporting prepared for national benchmarking
32. Suicide and Self Harm Prevention	Deliver & implement Action plans for Suicide & Self Harm Prevention Strategies	Prevention & Early Intervention	Reduce Harm	PAEI09	01/07/2025	31/03/2029	Green				Tier 1 (Prevention)	5 Year Rolling Average No. of Suicides	Based on the National Strategy for Suicide Prevention 'Creating hope together' and how it aligns with Aberdeen City. SAMH are the current service provider for Suicide Prevention work which started in April 2025 - March 2026. There are 5 priorities across Aberdeen City. These are: Building Community Capacity, Children and Young People, Lived/Living experience, Bereavement and Data analysis and risk. We are in the process of developing the 2025/2026 action plan. This feeds into the Aberdeen/Moray Suicide Prevention Leadership Group (AMSPLG). Aberdeen City Delivery multi-agency group is established to focus on local issues, aims and local action plans. We link into the Aberdeen City Local Outcome Improvement Plan where the project aim is "Reduce the 5 year rolling average number of suicides in Aberdeen by at least 5% by 2026". Quarterly updates are submitted. Aberdeen City are piloting a multi-agency database system for death review called QES which, started on 01/10/24. Processes have been developed alongside Public Health Scotland and ongoing monitoring of this is underway. World Suicide Prevention Day took place on 10th September 2025 where various events happened across the City, on social media and Marischal College will be lit up. An evaluation will take place on how we did.