



RISK AUDIT PERFORMANCE COMMITTEE

Date of Meeting	24 February 2026
Report Title	Quarter 3 Delivery Plan Update
Report Number	HSCP.26.009
Lead Officer	Alison MacLeod
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Consultation Checklist Completed	Yes
Exempt	No
Appendices	<i>a. Delivery Plan Summary</i> <i>b. Delivery Plan Workplan</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 2025-2029.

2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee:
- Notes and considers the Delivery Plan Quarter 3 Workplan and Summary as appended to this report.
 - Are satisfied that risks to the Delivery Plan are being monitored and feels assured with the mitigations highlighted with the appendices to the report



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3. Strategic Plan Context

- 3.1.** The ACHSCP's Strategic Plan for 2025-2029 was approved by the Integration Joint Board on 1st July 2025. The Strategic Plan's Reporting Framework outlines our requirement to provide assurance to RAPC on a quarterly basis that progress is being made 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 Quarter 3 update to the Risk, Audit and Performance Committee based upon the Year 1 Delivery Plan as approved by the Risk, Audit and Performance Committee in August 2025.
- 4.2.** At the Committee meeting on 17th June 2025, RAPC endorsed the proposed approach to performance monitoring for the Year 1 Delivery Plan, recognising this would adapt over time to ensure it was fit for purpose. Appendix A provides a visual overview of progress by priority area. This was developed using PowerBI (a Microsoft digital platform for data visualisation), allowing for progress to be reviewed at a glance. Information is provided regarding the status of projects; mitigations implemented should projects be at risk; and any measurable progress documented during the reporting period.
- 4.3.** At the previous Committee, the newly established criteria for BRAG status guidance was presented. Given the increasingly challenging context in which the ACHSCP operates, it was felt that the BRAG status criteria was required to be more sensitive in order to adequately account for nuances associated with delivery, for example programmes of work whereby different deliverables may be progressing at varying degrees. Further, the thresholds for projects reporting an overall status of 'at risk' or 'missed deadline' have been lowered. This was deemed to be more appropriate in recognition that all projects carry an inherent level of risk that requires active management; for example having limited staffing capacity and the need to balance delivering budget savings with transformative and preventative activity. Given this stricter criteria, projects reporting an 'at risk' position is likely to appear more frequently when compared to previous delivery plans the Committee has received.



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- 4.4. The Delivery Plan Workplan is a spreadsheet used by our programme and project teams to provide updates to the Senior Leadership Team (SLT). This contains the full output of all Delivery Plan entries and is visible in Appendix B. It should be noted that the status of a particular project may have progressed since the update in the report was given and therefore should be deemed to be historically accurate.
- 4.5. For this reporting period, there are five projects that are marked as closed / complete for the following reasons:

Title	Description	Strategic Aim	Priority	Rationale for Closure / Completion
5.Technology and TEC usage	Increase the use of technology and Technology Enabled Care across the system	Modernising Service Delivery	Best use of Resources	Has been closed and split into three projects: 5a (Digital Innovation Programme); 5b (TEC); 5c (eMAR)
7.Older People Care Provision	Modernise care provision for Older People	Modernising Service Delivery	Best use of Resources	All Option 2 reviews for services completed.
20.Counselling Services	Codesign alliancing work with Counselling Services	Modernising Service Delivery	Transforming Service Delivery	Project moved to business as usual
23.Initial Point of Contact	Develop an Initial Point of Contact Model (pre assessment offer) for Adult Social Care	Modernising Service Delivery	Transforming Service Delivery	Now reported under 5a (Digital Innovation Programme)
26.Healthy Weight	Publish an agreed multi-agency Healthy Weight Action	Prevention & Early Intervention	Improve Health	Multi-agency action plan successfully developed



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	Plan for Aberdeen City by December 2025			
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5. Implications for IJB

5.1. Equalities, Fairer Scotland and Health Inequality

There are no direct implications arising from this report.

5.2. Financial

Budget saving activities within the Delivery Plan are supporting the ACHSCP to achieve a sustainable financial position.

5.3. Workforce

The Delivery Plan contains projects aiming to deliver efficiencies from the robust management of vacancies, therefore reducing the overall number of posts within the ACHSCP establishment.

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.



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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 responsibility of the Committee would not be met.

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.



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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 2025-2029 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.