

APPENDIX 1



Strategic Delivery Plan - Quarterly Performance Report Summary

IJB Report Date: 05 JULY 2023

KEY HIGHLIGHTS	
18 out of 32 projects currently reporting Green RAG status indicating they are currently on track to achieve project aims and milestones.	<p>Overview of RAG Status - All Projects</p> <p>Not stated, 3 Red, 0 Amber, 11 Green, 18</p>
RAG status performance improved against 3 projects (Digital Strategy Development, In-House Care at Home and Primary Care Mental Health Hub).	
Autism Strategy - The final version of the Autism Strategy has been produced based on feedback from the public consultation. The strategy has been approved by Aberdeenshire Council's Education & Children's Services Committee and will be submitted to the IJB meeting in July for approval.	
Community Hub Programme: <ul style="list-style-type: none"> Completion and agreement of the project mandate with Senior Management Team Initial workshops taken place with Senior Management Team Representatives to agree workstreams within scope under the Community Programme remit. 	
Digital Strategy - A Digital Project Manager has been recruited and is in post. Work has started around the development of the digital work programme	
Frailty Pathway - Aberdeenshire has been selected to be part of the Hospital at Home expansion programme offered by Healthcare Improvement Scotland providing additional improvement advice and capacity, support in planning and networking with other programme teams.	
Social Care Sustainability Programme: In-House Care at Home - A new post of Care Team Support Co-ordinator has been created and graded to provide succession planning and promote service quality. 6 posts will be advertised as a test of change. A job referral incentive scheme for home carers has been agreed. A recruitment strategy for home carers has been completed and is being implemented. The service has been shortlisted for participating in Scottish Government international recruitment pilot. Work trialling full-time shift patterns and supporting transport options for home carers is ongoing. Very Sheltered Housing (VSH) Review: A number of engagement sessions have been held with residents, relatives and staff from both VSH services in Central Aberdeenshire to gather their views and experiences. These have been very positive and invaluable in informing how we continue to support and enable these services to be fit for the future. Further feedback/comments to support the review are being collated through a survey on Engage Aberdeenshire.	
Primary Care Improvement Plan: <ul style="list-style-type: none"> Responsibility for delivery of Vaccinations have been successfully transferred over to the Health Board. We have several clinics operating across Aberdeenshire and a premises review of all our clinics is underway. First Contact Physio - This is a well established service which has physiotherapists based in practices offering appointments for musculoskeletal conditions. We currently have 29 practices with access to this service averaging 477 appointments offered weekly across Aberdeenshire. 	
Health Improvement Delivery Plan - Progress since last report includes: <ul style="list-style-type: none"> The delivery of the Aberdeenshire Wellbeing Festival in May 2022 (theme Loneliness); The delivery of the HEAL component of the Aberdeenshire Health and Wellbeing LOIP priority, which has included the development of a HEAL Action Plan featuring 35 actions under 4 key priorities (Physical Activity, Food Accessibility, Mental Health and Wellbeing and Education and Self-Management; a range of healthy eating, food skills and healthy weight work e.g. Confidence to Cook and HENRY Supporting Live Life Aberdeenshire in the delivery of a Physical Activity Pathway for individuals living with long-term conditions 	
2c Practices - What is the Future - The number of salaried GPs has now increased reducing our reliance on locum GPs. We now employ 11 salaried GPs in Aberdeenshire. Additionally, we have had successful trials of using shared resources and hubs across our 2c practises which has allowed for the more efficient utilisation of resources and shared processes.	

ISSUES FOR ESCALATION	
Issue	Mitigations or Improvement Actions
Analogue to Digital RAG status has moved to amber due to a number of risks including supply chain and manufacturer issues, uncertainty around timelines for migration and costs.	Work is currently ongoing to lessen these risks. We have undertaken a purchasing strategy with Tynetec/Legrand for their hybrid digital alarms which should start to see our stock levels improve since monthly ordering began in November 2022 and increased to 100 units per month since February 2023. Currently, around 20% of installed dispersed alarms are digitally compatible, with the anticipated increase in stock it is hoped to increase this to 50% by the end of this calendar year.
Insch Service Review - The RAG status has moved from Green to Amber reflecting the requirement for ongoing conversations with stakeholders.	The project has been progressing again with Community Treatment And Care Services (CTAC) starting to deliver services onsite at the beginning of June.
11 projects currently reporting Amber status.	Relevant impacts and mitigations described in project performance tracker. Work will continue on critical review of Strategic Delivery Plan and identification of key priorities for this financial year to ensure deliverability of targets and objectives.
Primary Care Mental Health Hub model previously at Red RAG status due to no national funding allocated in 2022/23.	Local options appraisal is being considered in relation to opportunities within existing resource, with a focus on building mental health support from a primary care perspective and within the wider Community Hubs programme, hence RAG status improved to Amber for this quarter.
Social Care Sustainability Programme Board - Ongoing system and staffing pressures have impacted attendance at the Social Care Programme Board.	A workshop is to be convened during the summer to allow the programme board to review its progress over its first year, to identify areas for improvement and to agree focus for capacity and resources in year 2.

IN-FOCUS - PERFORMANCE AREAS FOR IJB OVERSIGHT

Performance Area / Overview	Medication Assisted Treatment (MAT) Standards Implementation - one of the platforms for successful delivery of the National Drugs Mission to improve and save lives of people who use drugs and their loved ones. This performance update summarises Aberdeenshire HSCP progress against the first five Standards which are expected to be in place by 31/03/23 with full implementation of all ten Standards by 31/03/24.	
Period covered by report	January 2023 to March 2023	RAG Rating
Key Objectives	1. All people accessing services have the option to start MAT from the same day of presentation.	Green
	2. All people are supported to make an informed choice on what medication to use for MAT, and the appropriate dose.	Green
	3. All people at high risk of drug-related harm are proactively identified and offered support to commence or continue MAT.	Green
	4. All people are offered evidence based harm reduction at the point of MAT delivery.	Green
	5. All people will receive support to remain in treatment for as long as requested.	Green
	6. The system that provides MAT is psychologically informed (tier 1); routinely delivers evidence-based low intensity psychosocial interventions (tier 2); and supports individuals to grow social networks.	Amber
	7. All people have the option of MAT shared with Primary Care.	Amber
	8. All people have access to independent advocacy and support for housing, welfare and income needs.	Amber
	9. All people with co-occurring drug use and mental health difficulties can receive mental health care at the point of MAT delivery.	Amber
	10. All people receive trauma informed care.	Amber

Progress - Key Highlights	<p>Progress on MAT implementation is scored nationally by the MAT Implementation Support Team (MIST). This is based on a 'RAGB' rating where a 'Blue' rating is achieved once evidence of two years' information indicates the process is fully embedded as day to day practice and includes all elements of each standard. MIST rating was initially undertaken for standards one to five last year. Each ADP area was asked to submit information on each of the ten standards by 14 April 2023. This included:</p> <ul style="list-style-type: none"> • Process information e.g. Standard Operating Procedures (SOPs), Prescribing guidelines etc. • Data – various numerical information for standards 1-5 (no data for standards 6-10 as yet). • Experiential feedback of staff, people accessing the service and family members. <p>The MIST team have attended regular Support to Implement and Report (STIR) meetings with delivery partners in the area. It was at these meetings that indicative scorings of Green for standards one to five and Amber for six to 10 were given. Feedback from the rating process is that Aberdeenshire have scored well overall. The anticipated Green and Amber scores were changed to provisional scores as we did not have adequate experiential feedback for these standards as this process commenced later than anticipated. This was the case in many other ADP areas and there is recognition that this will improve over time.</p> <p>We have been advised that all ADP areas will score either red or Amber for standards six to ten. This is mainly due to the data reporting element not being confirmed. The expectation is still that we achieve these standards by the end of March 2024.</p> <p>Next steps will involve continuing to develop services delivering standards one to five to allow evidence of this being fully embedded across Aberdeenshire and achieving a blue rating (this rating will be achieved once evidence of two years' information indicates the process is fully embedded as day to day practice and includes all elements of each standard) whilst also ensuring an increased focus on standards six to ten.</p>
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Risks / Issues	Mitigations / Actions
Risk to delivery of MAT standards in some areas due to premises availability.	Premises have been secured in Peterhead and Banff and we have leased premises in Fraserburgh for a year. Premises have been identified in Inverurie and work ongoing to get final approvals and plans in place. Temporary accommodation has been identified in the meantime. Stonehaven do not have permanent premises yet and operating in local hospital and in communities - work continues with the HSCP property team to resolve these issues.
Recruitment and Retention	Recruitment issues are being experienced across Scotland. Consultant vacancy has been unsuccessful in recruitment and we are progressing recruitment of a locum. In relation to increasing safe prescribing capacity in the service, 5 nurses started Non-Medical Prescribing course at end of September and have passed. A further 4 nurses started this course March. A further 5 will start in September.
Gathering of appropriate Experiential Feedback for each standard.	Experiential feedback required to support good progression with MAT 3 but applies to all standards. Some people and family members have provided feedback for the experiential capture. We continue to review how best this is done and will establish a specific questionnaire for Outreach activity.

Data Measures and Targets	<p>Local Delivery Plan Standard: Drug and Alcohol Waiting Times - 90% of people wait less than 3 weeks between referral and treatment: Aberdeenshire Performance 2022-23 Quarter 1: 87.2% Quarter 2: 90.8% Quarter 3: 91% Quarter 4: 96%</p> <p>National Substance Use Treatment Target - by 1 April 2024 there will be at least 32,000 people with problem opiate drug use in community-based Opioid Substitution Therapy (OST) treatment in Scotland (90% of all drug-related deaths in Scotland currently involve opiates). This target equates to approx. 9% increase on current baseline and a target increase of 72 (count) for Aberdeenshire (national target increase has been applied equitably across Integration Authority areas in Scotland).</p> <p>Other data measures in development to ensure meaningful reporting of progress towards delivery of MAT Standards (to include experiential information), supported by NHS Grampian Health Intelligence and linking to the DAISy system. [Drug and Alcohol Information System (DAISy) is a national database holding data relating to specialist drug and alcohol treatment from services across Scotland with the aim of monitoring treatments provided, understanding outcomes from treatment and improving future care.]</p>
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