



Aberdeenshire Health and Social Care Partnership Annual Performance Report 2024 – 2025 July 2025





Thank you to all colleagues who have contributed to the production of this report.

Previous annual performance reports for Aberdeenshire Health and Social Care Partnership (AHSCP) can be accessed at: Aberdeenshire Health and Social Care Partnership Annual Performance Reports - Aberdeenshire Council

This website also provides access to all key strategies and publications of AHSCP.

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- Information within this document in another format including easy-read and plain text
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Foreword

On behalf of the Aberdeenshire Integration Joint Board (IJB) we are pleased to present this annual performance report for the Aberdeenshire Health and Social Care Partnership (HSCP).

2024/25 has been a difficult year for the IJB and HSCP, during which we have required to make some extremely challenging decisions about the health and social care services we provide across Aberdeenshire to meet demand within budget. We are not alone in facing these pressures - the landscape for health and social care services nationally is one of increased demand, workforce challenges and financial constraints.

These challenges will continue into the short to medium term as the Aberdeenshire IJB implements its financial recovery plan, to achieve required savings of £15.788million in 2025/26. A further £17.155million is underwritten by our funding partners, NHS Grampian and Aberdeenshire Council, who themselves face significant budgetary pressures. We are committed to ensuring we continue to deliver our core services safely to those who require them, to the required standards of quality and care, within the budget available to us.

This means we must review the services we provide, and where and how we deliver them, to ensure we make best use of our finite resources. In doing so, we seek to achieve financial stability in the short term whilst planning for and securing sustainable services for the longer-term. We appreciate that this can present considerable uncertainty and concern for the people we support, their families/carers, our communities and our staff. We have a significant challenge ahead of us, and we need to work in partnership with you all to make changes and move forward together.

Amid this challenge, we can still be exceptionally proud of the many areas of positive change and progress that have been achieved over the last year. Some of these are reflected in this report, but we know there are countless other examples of how our staff and partners working across the HSCP make a difference to the lives of people in Aberdeenshire every day. We thank you all for your hard work, commitment and dedication to achieve the best outcomes possible for our communities.

Dr John Tomlinson Chair, Aberdeenshire IJB Councillor Anne Stirling Vice-Chair, Aberdeenshire IJB

Leigh Jolly Interim Chief Officer



1. Introduction

1.1 Overview of the Aberdeenshire Health and Social Care Partnership

Aberdeenshire Health & Social Care Partnership (AHSCP) is overseen by the Integration Joint Board (IJB). The IJB consists of 5 Aberdeenshire Councillors and 5 NHS Grampian Board members. There are also non-voting members which include council and NHS officers as well as representatives from users of adult health and social care services, carers groups, trade unions and the third sector.

The AHSCP delivers a range of health and social care services including care home provision, very sheltered housing, respite services, care at home and supported living services for older people and adults with physical and learning disabilities. AHSCP also provides support through community mental health services, criminal justice social work and alcohol and drugs services.

AHSCP is responsible for 10 community hospitals, community nursing services (including district nursing, health visiting and school nursing teams), community-based Allied Health Professions (Physiotherapy, Occupational Therapy, Dietetics, Podiatry and Speech and Language Therapy) and primary care services (General Practice, Pharmacy, Optometry and Public Dental Service). The AHSCP also manage a Joint Equipment Service (for aids and adaptations),

In addition to these services, the AHSCP hosts the management of some health services on behalf of all three IJBs (Moray, Aberdeen City and Aberdeenshire). This includes the health care team at Her Majesty's Prison (HMP) & Young Offender Institute (YOI) Grampian, forensic medical examiners, chronic oedema service, and specialist nursing services including Marie Curie, diabetes with retinal screening, continence service, and heart failure services.

This is delivered within an annual budget of £415.6 million (2024 – 2025 figure).

1.2 Aims and Context of the Annual Performance Report

As laid out in the <u>Public Bodies (Joint Working) (Scotland) Act 2014</u>, the purpose of this report is to demonstrate the progress and performance of the AHSCP in planning and delivering health and social care services to the people of Aberdeenshire. AHSCP, like other Health and Social Care Partnerships nationally, continues to face significant financial challenges in addition to increasing demand for complex care and support. This report recognises the improvement activity undertaken this year, whilst acknowledging the need for continuous service improvement and innovation to meet the needs of our population within budget.



1.3 Aberdeenshire Health and Social Care Partnership Strategic Plan

The strategic direction, vision, and priorities of the IJB are set out in AHSCP's Strategic Plan 2020 – 2025. The Plan outlines AHSCP's commitment to working with our partners to improve the health of the people of Aberdeenshire and provide care and support when needed, working towards delivery of the nine National Health and Wellbeing Outcomes.

These national outcomes provide the strategic framework for all HSCPs in Scotland when delivering health and social care services and support, as summarised below.



National Outcomes | National Performance Framework

People are able to look after and improve their own health and wellbeing and live in good health for longer.
People, including those with disabilities or long term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.
People who use health and social care services have positive experiences of those services, and have their dignity respected.
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.
Health and social care services contribute to reducing health inequalities.
People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.
People who use health and social care services are safe from harm.
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.
Resources are used effectively and efficiently in the provision of health and social care services.



The AHSCP Strategic Plan 2020-2025 outlines our 5 key priorities for health and social care services in Aberdeenshire from 2020 – 2025. The priorities are aligned to one or more of the National Health and Wellbeing Outcomes as summarised below:

Aberdeenshire HSCP Strategic Priority	Alignment to National Health and Wellbeing Outcomes
Engagement	Outcomes 3 and 8
Prevention and Early Prevention	Outcomes 1 and 6
Reshaping Care	Outcome 2
Tackling Inequalities and Public Protection	Outcomes 5 and 7
Effective Use of Resources	Outcomes 4 and 9

Audit and Governance

The work of the AHSCP is governed by Aberdeenshire Integration Joint Board (IJB). Its <u>membership</u> includes Aberdeenshire Council elected members, NHS Board members, public and carer representatives, the third sector and trade union representatives (see Appendix 1 for list of IJB members during 2024/25).

The IJB is supported by the Clinical and Adult Social Work Governance Committee which provides the framework for monitoring and assuring the quality of health and social care services. One of the areas of work this group seeks assurance within is the inspections that take place within health and social care services in Aberdeenshire.

In the 2024-2025, the following Care Inspectorate inspections were undertaken in Aberdeenshire:

- South Care at Home Service Support Service – May 2024



- Central Care at Home Service August 2024
- Bennachie View Care Home August 2024
- Pleyfauld House Very Sheltered Housing August 2024
- Aberdeenshire Responders for Care at Home Service (ARCH) November 2024
- Jarvis Court Very Sheltered Housing November 2024
- Durnhythe Care Home February 2025
- Willowbank Bungalows 1, 2 & 3 and Care Home Services, Peterhead February 2025
- Ellon Day Opportunities February 2025

The following service inspection was carried out by The Mental Welfare Commission:

- Fraserburgh Hospital, Brucklay Ward - March 2025

In addition an inspection of prison healthcare provided in HMP YOI Grampian was undertaken by Healthcare Improvement Scotland in June 2024 as part of the wider <u>whole prison inspection</u> by His Majesty's Inspectorate of Prisons for Scotland (HMIPS). A summary of all of these inspection reports can be found in the Annex Data Report document.

IJB scrutiny is delegated to the IJB Audit Committee, which has representation from Aberdeenshire Councillors, NHS Board members and non-voting members. The committee provides updates to the IJB on audits, risk management, financial controls and performance.

The Strategic Planning Group (SPG) brings together a wide range of AHSCP colleagues, partners and stakeholders supporting an integrated strategic approach. Through the course of the year the SPG has monitored progress of the various workstreams under the AHSCP's Strategic Delivery Plan and overseen the completion of a Joint Strategic Needs Assessment to support the development of the next Strategic Plan. The SPG have also had oversight of and contributed to the initial engagement undertaken to develop strategic priorities for the next iteration of the AHSCP's Strategic Plan.



3. Performance against Strategic Priorities

This section provides an overview of some of the key areas of work and progress achieved by AHSCP against our 5 Strategic Priorities.

3.1 Priority 1 – Engagement

Our commitment: AHSCP committed to be clear and transparent in our decision making. We will listen to and be responsive to what individuals and our communities say. We will be open, honest and transparent when communicating with individuals and our communities and will continue to engage with our staff.

3.1.1 Engagement: Strategic Planning

In 2024, we started work on the next iteration of the AHSCP Strategic Plan. As part of developing the programme of engagement a number of internal workshops were held to consider data compiled through the Joint Strategic Needs Assessment.

Three key topics were identified for engagement with both staff and the wider public:

- Early Intervention and Prevention
- Access to Services/Transport
- Community Focussed Approach

An 8-week period of staff and public engagement took place during late summer/autumn 2024 using a range of activities and approaches to enable as many people as possible to be involved in the process to inform the AHSCP's future strategic direction, and in addition to support engagement around the AHSCP's budget, Workforce Plan, Digital Strategy, and Equality Outcomes.





The engagement included:

- In-person events for staff and public held at various venues within 14 of the 17 Academy towns across Aberdeenshire.
- Online and paper-based surveys, including easy-read.
- Provision of facilitation packs to enable groups (such as community councils, community organisations and third sector organisations) to run self-facilitated discussions.
- Staff Engagement, including sessions at internal staff meetings, such as our Strategic Planning Group and Collaboration and Leadership Forum.
- Attendance and feedback gathered from existing groups and forums, including attending a Sensory Impairment Event, a Learning Disability Self-Advocates group and the Tackling Poverty Lived Experience Forum.



The analysis showed overall agreement with the key areas of focus listed above and work continues on the Strategic Plan development.

3.1.2 Engagement: Minor Injuries Unit (MIU)

In 2024, engagement took place with communities in Fraserburgh, Huntly and Peterhead to understand the impacts of closing Minor Injury Units (MIUs) overnight, within the three towns. The engagement sessions were also used to promote awareness of accessing out of hours services moving forward.

The feedback highlighted to us that communities were worried about access to support out of hours and the potential impacts on the health of individuals who were injured or ill. The engagement enabled us to share the rationale for the overnight closures of the MIU's, and to provide information



and reassurance using the "Know Who to Turn to" campaign. This campaign provides advice and guidance to enable people to find their way quickly to the right service for them if they are ill or injured, reducing delays in accessing the treatment they need.

We continue to receive feedback from people who have accessed services out of hours since the Minor Injury Service overnight closures were implemented through a <u>Minor Injury Service Patient Experience Survey</u>. Their feedback is reviewed and fed into the implementation process.



3.1.3 Engagement: Westbank Care Home

In March 2024, the IJB approved a proposal to rationalise the number of residential care facilities for older people operated by AHSCP. An options appraisal process was undertaken, resulting in the recommendation to close Westbank Care Home in Oldmeldrum.

Senior Managers met in-person with staff, residents and families/guardians in May 2024 to enable us to understand fully the potential impact of the proposed closure. This personcentred approach ensured we understood the actions needed to reduce concerns and/or impacts for each person., with a focus on supporting staff and residents through the process.

In June 2024, the IJB approved the recommendation to close Westbank Care Home. Further meetings focused on supporting residents, their families/guardians and our staff through the process of moving to their new homes and new roles.



3.1.4 Engagement: Adult Carer Strategy

Engagement with adult unpaid carers and those who provide support to unpaid carers took place as part of a review of Aberdeenshire Adult Carers Strategy. There were two surveys created, one for carers and one for people supporting carers. The survey ran from August to October 2024.

Over 200 survey responses were received, from178 carers, 10 former carers and 20 people who support carers. Of these, 50 carers volunteered to be involved in future carer engagement and will be invited to participate in future engagement. There was a low response from people who support carers, and future engagement will consider alternative ways such as team meetings to gather professional feedback.

The responses received informed the draft updated Adult Carer Strategy, which aims to improve carer awareness, recognition and support for carers in Aberdeenshire. Work continues on the new draft strategy.



3.2 Priority 2 – Prevention and Early Intervention

Our commitment: AHSCP will support people to live healthy lifestyles. We will support people to self- manage long term conditions. We will work to help people avoid preventable conditions.

3.2.1 Rehabilitation and Enablement

Rehabilitation and Enablement (Reablement) is an approach to help people regain and maintain their independence in daily living as they recover from illness or injury or experience increasing frailty. It is provided by our community multidisciplinary teams (MDT's) of Home Carers, Occupational Therapists, Care Managers, Physiotherapists and Community Nurses.

We aim to provide reablement first for at least 75% of people who are eligible for care and support at home following assessment.

Figure 1 shows the progress made in 2024 in comparison with the two previous years. Over 50% of people received this service first by December 2024 and we continue to build on this.

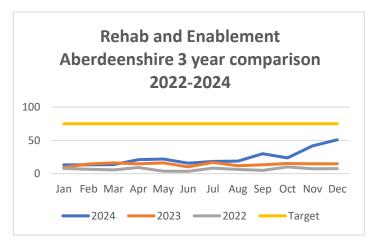


Figure 1: Rehab and Enablement cases 2022, 2023 and 2024.

3.2.2 Supporting Adult Unpaid Carers

Since the implementation of the <u>Carers (Scotland) Act 2016</u> and the <u>statutory guidance</u> we have seen consistently high numbers of new carers registering with the Aberdeenshire Carers Support Service. There were 1380 registered adult carers with VSA on 31 March 2025.

During 2024/25 the SDS & Carer's Team supported:

- A development day, held with VSA, aiming to support carer practitioners (AHSCP) and carer advisors at VSA to understand and apply the eligibility criteria for unpaid carers and to help carers access support they need.
- The engagement and the drafting of the next iteration of the Adult Carer's Strategy
- The promotion of the Aberdeenshire Carer Support Services and carer's and SDS team's role in supporting eligible carers to access SDS at the strategic engagement roadshows that took place in Autumn 2024.



3.2.3 Self-Directed Support

The <u>Social Care (Self-Directed Support) (Scotland) Act 2013</u> sets out principles governing Scotland's approach to how social care in Scotland should be delivered. The overarching aim of the Self -Directed Support (SDS) Act is to support and enable people to achieve the outcomes that are important to them, to lead full and meaningful lives, and to participate in and contribute to the economy and society.

AHSCP offers <u>four options of Self-Directed Support</u>, in line with our duties under the SDS Act. In 2024, a new team was established to embed Self-Directed Support across all service user groups in Aberdeenshire.

The team's focus over the last year has included:

- Raising awareness of the <u>SDS National Improvement Plan</u> and the new national <u>SDS Framework of Standards</u> at a local level.
- Developing a more equitable approach to unpaid carers accessing support within Aberdeenshire. Working with teams to raise
 awareness of the unpaid carer's needs at an early stage when the person they care is being assessed. This will lead to
 unpaid carers being referred to VSA (Commissioned service) for assessment and if eligible, accessing further support earlier.
- Maintaining partnership links and developing relationships with commissioned support services

3.2.4 Primary Care: Stonehaven Vaccination Centre

The team at Stonehaven vaccination centre have been working collaboratively with the Stroke Association (national charity), NHS Grampian Public Health and Aberdeen City Health & Social Care Partnership, to be part of a Stroke Prevention Media Campaign.

They agreed to be part of pilot to help increase public awareness of how an irregular pulse (atrial fibrillation) could lead to a stroke.

Through a media campaign led by Stroke Association, patients within a 3km radius of Stonehaven GP practice were invited to check their pulse and if in doubt about the rate or rhythm, to make appointment at the local vaccination clinic to get their pulse and blood pressure checked.

The campaign proved very effective in raising public awareness of atrial fibrillation as a risk factor for stroke and was considered successful by all stakeholders. Although no atrial fibrillation detected, patients with high blood pressure were identified and commenced treatment following review by a GP. The service has now been rolled out to 9 GP practice populations.



3.2.5 Primary Care: Learning Disabilities Annual Health Check – Vaccination Centre



In May 2022, the Scottish Government asked NHS Health boards to implement annual health checks for service users over the age of 16 with a learning disability (Scottish Annual Health Checks for People 16+ with Learning Disabilities - gov.scot).

In Aberdeenshire, Learning Disability nurses worked with our vaccination centre teams to provide these health checks and, following a successful pilot in 2023, this was rolled out to patients of 3 further General Practices in 2024.

3.3 Priority 3 – Reshaping Care

Our commitment: We will support people to remain in a homely environment. We will ensure that people can access the right support when they need it. We will support people to live healthy and independent lives.

3.3.1 Technology Enabled Care (TEC)

As we continue to focus on ensuring services are sustainable, Technology Enabled Care (TEC) provides different options to support and enable people to live independently for longer. In Autumn 2024 the TEC room in Peterhead opened to the public. The TEC room showcases a range of technology-based options, to both staff and families. These can support with care needs in a less intrusive way, as required and as appropriate.

The TEC room showcases the technology available such as smart home devices, which can be self-purchased, to support independent living. There are also examples of Aberdeenshire Lifeline Community Alarm and Telecare equipment on display. A walkthrough video was produced to share the resource and information more widely across our communities. Evaluation and learning from our first TEC room will inform our approach in other parts of Aberdeenshire, whilst ensuring resources and benefits are maximised for clients, carers and staff.



Other TEC pilots have been developed within Aberdeenshire including the use of technological solutions in the provision of Supported Accommodation and Care at Home services. Focus has been given to delivering projects within existing resources or funded by services on a spend-to-save basis in recognition of financial constraints, whilst striving to maximise use of digital technology where this can deliver benefits to service users in terms of independence and access to care and support.

3.3.2 Learning Disability Strategy

Aberdeenshire's 5-year Learning Disability strategy 'Be All You Can Be' which was published in 2020 has four priorities which are people with learning disabilities in Aberdeenshire feel:

- Well
- Involved
- Valued
- Supported

Keys areas of progress in 2024/25 include:

- **Health Inequalities** People with learning disabilities have some of the poorest health outcomes compared to any population group. The introduction of annual Health Checks as previously described supports the health outcomes of people with a learning disability.
- **Engagement and Self Advocacy** In 2024/25 the Learning Disabilities online hub has been further developed with the addition of the Day Services newsletters and a news feed function on the hub. Work is ongoing to look at further enhancing the information available through the hub.

Work continues with the Learning Disability self-advocates group with strategic and operational changes being discussed with the group to ensure that service user voices are incorporated into our decision-making processes. In 2024/25, A Transport 'Plan on a page' was developed with our self-advocates group and hosted on our hub outlining the transport options for people in Aberdeenshire with a learning disability.

In February 2025 the IJB agreed that a review of Learning Disabilities Day services would be undertaken whilst the continued implementation of the Be All You Can Be Learning Disability strategy took place in North and Central Aberdeenshire. The outcomes of the review were reported to IJB in May 2025.



3.3.3 Dementia Strategy

Aberdeenshire's Dementia strategy, "Making Connections" is a nine-year strategy, launched in 2021. The dementia strategy sets out six key priorities and outcomes focused on improving the lives of people living with dementia in Aberdeenshire.



During 2024/25 the plan has focused on:

- Promoting Dementia Awareness Week 2024 alongside Aberdeen City HSCP, Moray HSCP and NHS Grampian. There were 2 learning and development events 'Let's Talk About Dementia', each attended by over 100 participants.
- Updating and developing a new version of the Dementia Aberdeenshire website which has been accessed over 2000 times since its launch in July 2024.
- Supporting the development of the new TEC room in Peterhead which opened in Autumn 2024.

3.4 Priority 4 – Tackling Inequalities and Public Protection

Our commitment: We will work to keep vulnerable people safe. We will work to make sure that everybody is able to access the service or treatment that they might need. We will work to remove barriers to accessing services. We will work with partners to ensure that Aberdeenshire is a safe and happy place to live for everyone.

3.4.1 Prison Inspection and Workforce Planning

AHSCP hosts the Prison Health Team based at HMP/YOI Grampian in Peterhead. In 2024, there were two inspections undertaken on the Prison Health Team: Health Improvement Scotland (HIS) Inspection (as part of the wider HM Inspectorate of Prison for Scotland) and Mental Welfare Commission Inspection in June 2024. Since these inspections and in response to the recommendations made, there has been a significant amount of work undertaken and achievements to date include:

- A reduction in nursing staff vacancies
- Development of assessment criteria for mental health support where specialist mental health nursing and psychiatric is available to those assessed as meeting the criteria.
- Ongoing identification of patients with chronic disease and go onto developing management plans and processes.



3.4.2 Alcohol and Drug Services

Over the last three years our Drug and Alcohol service has focussed on increasing accessibility and being proactive in reaching out to those most at risk of harm from drug and or alcohol use. **ARIES** is our assertive outreach team which responds to reports of overdose and other harms, usually by seeing people in their homes within 24 hours of being made aware of a high-risk incident. The team are extremely proactive in their approach and ensure people are receiving the best support to reduce the current risk. The team works with other partners including Housing/ Housing First, Financial Inclusion, Prison and Justice, Police, Third sector, Out of Hours and Mental Health support.

Case Study - Journey to Recovery

At just 14 years old, she began experimenting with drugs, a decision that would cast a long shadow over her teenage years. Initially, it was the usual party scene drugs, but a family bereavement and personal struggles pushed her deeper into addiction. Seeking solace in substances, she found herself in a relationship with another drug user, which led to the use of harder drugs like opiates and crack cocaine. The consequences were severe, and her life seemed to spiral out of control.

Her journey to recovery began with a glimmer of hope when a close friend, already in treatment, introduced her to a local drug and alcohol service. Taking a courageous step, she attended her local Step In, with hopes of finding some support. She was prescribed methadone on the same day, and this marked the beginning of a new chapter in her life. With the support of medical-assisted treatment, she started to manage her addiction.

With a determined mindset to reclaim her life and find stability, she relocated to a new area. The continued support she received in her new environment from services such as Aries and The Foyer has played a crucial role in her recovery.

As she progressed on her journey, she began to reduce her methadone prescription, a significant milestone that reflected her growing strength and resilience. Her newfound stability allowed her to rediscover her passions and dreams. One dream stood out – her childhood aspiration of becoming a lawyer. With unwavering determination, she set her sights on this goal, enrolling in college to pursue her studies.



The ARIES team provide all an outreach service carrying all harm reduction equipment, wound dressings and practical support items with them. The **Days of Action** continue delivering a multi-agency outreach service on a monthly basis and contact to some of the most vulnerable members of our communities at risk of harm through alcohol, drugs, or associated risks such as criminal exploitation. The format new includes support from the Welfare Rights team, Money Advice Service, Scottish Prison Service, who support the Housing, Social Work, Health and Police staff who work the event. Over the last 8 months, the Days of Action have reached over six hundred people, offering advice, health, housing and social support, food parcels, naloxone provision amongst other things.

3.4.3 Justice

Justice Social Work Services aims to encourage rehabilitation, reduce reoffending, and protect the public, which will lead to fewer victims of crime and safer communities. The national strategy reiterates that this requires strong partnership working at every stage of the justice system, from the point of arrest through to integration into the community.

Through the current Aberdeenshire Criminal Justice Outcomes Improvement Plan (CJOIP), AHSCP with others continue to work towards the priorities: improving community understanding and participation in community justice, strategic planning and partnership working and effective use of evidence based interventions, equitable access to services. An <u>annual report</u> is published by the Aberdeenshire Community Justice Partnership which provides performance information from the previous year.

As a partner within Aberdeenshire Community Justice partnership, AHSCP Justice Social Work services are working with others towards the production of an updated CJOIP.

3.4.4 Suicide Prevention

Aberdeenshire Health and Social Care Partnership have supported the development of the Aberdeenshire Suicide Prevention Action Plan which is working towards meeting the outcomes in the national suicide prevention strategy, 'Creating Hope Together' and action plan. Key themes within the Aberdeenshire Suicide Prevention Action Plan include:

- Building Community Capacity
- Children and Young People
- Increase Training across Services in Aberdeenshire



With the support from SAMH (Scottish Action for Mental Health), we:

- Delivered the Introduction to Suicide Prevention Awareness Training and ASIST (Applied Suicide Intervention Skills Training) courses across Aberdeenshire.
- Provided Introduction to Suicide Prevention Awareness Training to staff at Shell's St. Fergus gas terminal.
- Attended Turriff Show hosting a stall which provided opportunities to raise awareness on supports and resources to help prevent suicide.
- Promoted Suicide Prevention Week in September 2024 with a programme of activities across Grampian including an open training session at Woodhill House for Councillors and staff across services

3.4.5 Public Health: IJB Equality and Outcomes

<u>The Equality Act 2010</u> legally protects people from discrimination in the workplace and in wider society. The Act means that it is unlawful to discriminate against anyone because of age, being or becoming a transsexual person, being married or in a civil partnership, being pregnant or on maternity leave, disability, race, religion, sex or sexual orientation. These are called protected characteristics. Everyone is protected by the Equality Act 2010 as every person has at least one or more of the above characteristics. As a public body, AHSCP has a duty to take account of the need to:

- eliminate discrimination, harassment and victimisations
- Advance equality of opportunity
- foster good relations

There is a statutory requirement for HSCP's to develop a set of Equality Outcomes every four years, setting out what the IJB intends to achieve advancing equalities and reducing inequalities.

In September – October 2024, we engaged with our staff and communities on progress with the partnership's current equality outcomes 2020-2024. Their feedback has been used to develop AHSCP's Equality Outcomes for the period 2024 -2028 and we will consult on those proposed during Autumn 2025.



3.4.6 Public Health: Grampian Wellbeing Festival

The <u>Grampian Wellbeing Festival</u> is a collaborative project involving Public Health, AHSCP, Aberdeenshire Council Services, the Third Sector across City, Aberdeenshire and Moray.

The aim is to provide opportunities for people to access free activities during the whole month of May to support their mental health and wellbeing by offering events in each area of Aberdeenshire and wider Grampian.

The festival builds capacity within communities by raising awareness of wellbeing services/activities available across Aberdeenshire. The festival programmes share key messages to support mental health and wellbeing as part of promoting positive mental health.



Grampian Wellbeing Festival - May 2024

A wide range of <u>activities</u> were offered in Aberdeenshire during the 2024 festival. These included exercise classes, mindfulness activities, health walks, yoga and community café events for example.

3.5 Priority 5 – Effective Use of Resources

Commitment: We will work to ensure that we have the right number of staff with the right skills. We will focus our resources where they are most needed. We will manage our reducing budget against increasing need.

3.5.1 Joint Equipment Store (JES)

The Joint Equipment Store (JES) provides a wide range of occupational therapy and other healthcare equipment to support people to live independently. This also includes telecare and community alarm provision.

The Joint Equipment Store continues to focus on working efficiently by:

- Consolidating equipment lines Products provided by the JES were reviewed and consolidated, to avoid duplication in stock.
- Contract tendering: the aids to daily living framework contract was tendered and awarded.
- In-house servicing: JES is increasing the amount of in-house services work being undertaken.



3.5.2 Workforce and Recruitment



The AHSCP has had to deal with many workforce challenges in recent years because of the challenging financial environment it is operating in, in addition to demographic changes. In 2024/25, we have experienced challenges in recruiting staff to "hard to fill" posts which are essential to meet future need and to fill the gaps from those leaving and retiring. Specific areas of challenge have included Care at Home services, some Allied Health Professions and community and specialist nursing posts, and Mental Health consultant recruitment.

Across the AHSCP various workstreams and activities have continued with the aim of supporting recruitment and retention in such areas. For example, a group of 36 staff volunteers enabled us to attend events throughout Aberdeenshire during 2024. Through these events, we reached a broader audience with a focus on promoting our hard to fill vacancies.

Senior Management within the AHSCP review data on trends and changes in the HSCP's workforce as part of its performance monitoring processes. AHSCP colleagues are either employed by Aberdeenshire Council or NHS Grampian. As per tables below, the Aberdeenshire Council workforce shows a 7.5% decrease in headcount and the NHS Grampian workforce shows a 9% increase between September 2023 and June 2024. However, by December 2024, it has since decreased by 3%.

Aberdeenshire Council Staff Workforce - Headcount

	2022	February 2023	October 2023	June 2024	December 2024
Total	2487	2623	2,743	2,644	2,538

NHS Grampian Staff Workforce - Headcount

	2021/22	2022/2023	September 2023	June 2024	December 2024
Total	1647	1690	1714	1871	1813



The AHSCP also utilises the annual iMatter staff experience survey to gather and understand views from staff, including all health and social care teams, about their experiences of working within both their particular team and wider organisation. The aim of this is to inform and support areas for improvement at team and organisational levels. The Aberdeenshire-wide results of the iMatter survey are included within the Data Annex document which accompanies this report. This shows that staff experience was positive across most domains in 2024, whilst acknowledging trend data which highlights areas for improvement.

3.5.3 Workforce – Health and Wellbeing

Our Staff Health and Wellbeing Group has recruited 16 staff volunteers to act as service or team based health and wellbeing volunteers. In this role the volunteers champion good health and wellbeing in their teams, support staff and facilitate health and wellbeing events and activities in teams.

NHS Grampian, SamH and Aberdeenshire Council have supported this work with free training and resources, while shared learning and feedback has meant that best practice has been shared within the volunteer pool and beyond through the weekly Wellbeing Wednesday communications.

In March 2025, the group secured £133,500 for the Aberdeenshire Greenways Project from Nestran's People & Places Programme to improve and promote walking routes for staff and patients in 9 of the academy towns as well as active travel improvements at 12 Aberdeenshire Health and Social Care premises. In February, the group secured £4,400 from the NHS Grampian Charity to run 4 staff wellbeing days at Inverurie, Turriff and Stonehaven and HM Prison Grampian Health Centre. Each day will be supported by staff volunteers and the funding will also pay for arts activities for staff through the use of professional local artists.



5. 2024/25 Financial Performance

5.1 2024/25 Financial Year

On <u>20 March 2024</u> the IJB set a balanced budget £415.607 million after recording an overspend position for 2023-24 of £27.1 million against the revenue budget. There was no general reserve held when the IJB entered the new financial year as this had been used to offset the overspend position.



Similar to other public sector organisations, the AHSCP continued to face significant financial challenges over the year and the pressure of rising demand and complexity of need within the health and social care system. Delivery of a balanced budget in 2024-25 was predicated on achieving a wide range of <u>Savings Projects</u> and efficiencies through the <u>Effective Use of Resources</u>. In addition, under the HSCP's Social Care Sustainability Programme Board, chaired by the Chief Social Work Officer, the remit and objectives for the Board were reviewed and refocused in-year in response to the major budgetary challenges faced in relation to adult social care services. This has centred on the delivery of a range of workstreams under two social care redesign projects: Older People and Physical Disability Services, and Adult Services.

Notwithstanding the range of work undertaken, the AHSCP recorded an overspend for the second consecutive year in 2024/25, of over £24 million. This required additional funding support from our partner bodies, with actions agreed and undertaken in line with the IJB's Integration Scheme where an overspend is forecast and additional payments are requested from partners.

A summary position is shown in the table below:

	Revised Budget 2024-25 £'000	Actual to 31-Mar-25 £'000	Variance to 31-Mar-25 £'000	Variance %
Health & Social Care	396,109	419,986	23,877	6.02
Funds	17,200	17,722	522	3.03
Set Aside Budget	38,784	38,784	0	-
2024-25 Position	452,093	476,492	24,399	5.40%

Partners Additional Funding

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NHS Grampian	13,754	
Aberdeenshire Council	10,645	
Total	24,399	

Further detail on the final year end position for 2024/25 can be found in the <u>finance report</u> submitted to the IJB at its meeting on 2nd July 2025. This includes detail of the largest areas of overspend and underspend by service area and by type of spend including reasons for variance.



The <u>IJB Unaudited Annual Accounts for 2024/25</u> also provide a comprehensive overview of the 2024/25 financial situation and year end budget position as presented to the IJB Audit Committee on <u>25 June 2025</u>. The final Audited Account Accounts and associated action plan will be presented to the IJB Audit Committee later this year following audit by the IJB's external auditors.

5.2 2025/26 Recovery Plan and Revenue Budget

The Aberdeenshire IJB agreed a Recovery Plan and its Revenue Budget on 19 March 2025 including the efficiency and savings proposals which form the basis of the new budget, as presented to the IJB at its meeting in February 2025. These are recognised as essential to ensuring the stability of IJB finances from 2025/26 onwards.

Underpinning this, the HSCP must fulfil the duty of Best Value. This describes the arrangements put in place to secure continuous improvements in performance, while maintaining an appropriate balance between quality and cost. In making those arrangements and securing that balance, the HSCP has a duty to have regard to economy, efficiency, effectiveness, equal opportunities requirements and to contribute to the achievement of sustainable development.

It is recognised that many public sector organisations are facing an increasing challenge to balance their budgets in the context of increasing service demand and rising costs and therefore that the resources available to the IJB are limited and constrained by the respective funding positions of both partners. Discussions around any repayment of additional funding to partners continues to be part of the AHSCP's Medium-Term Financial Strategy process which has current and future years' budget contributions as a central element of the strategy, whilst continuing to support the delivery of Best Value over the longer term.

This does nevertheless mean that decisions do have to be made in terms of the level of service that can be delivered in many areas. Work continues under the Social Care Sustainability Programme Board overseeing a range of significant service reviews including in-house care at home services, learning disability day services, care homes and very sheltered housing, with reports and recommendations to be considered by the IJB as these progress.

The aim of these initiatives is to ensure finances are brought back into line with allocated budgets and to support the redesign of services to ensure that the HSCP can address these challenges and sustain services to meet the needs of people who are the most vulnerable in our communities. Monitoring and understanding the cumulative impacts of service changes and redesigns, through engagement with those affected, will be central to our approach. This will also underpin the AHSCP's new Strategic Plan from 2025 onwards, recognising our responsibility to achieve financial stability and sustainability as well as developing the longer-term vision to improve health outcomes for our communities in Aberdeenshire within the resources available.



6. Performance Analysis

The National Core Suite of Integration Indicators provides the framework for all HSCPs in Scotland to benchmark their performance and progress towards delivery of the National Health and Wellbeing Outcomes. Aberdeenshire HSCP's performance against these indicators in 2024/25 is detailed in the Data Annex document which supports this report. A summary analysis of key performance changes and associated improvement activity is outlined below.

Outcome indicators

Indicators 1 to 9 are derived from the <u>National Health and Care Experience Survey</u> undertaken on a biennial basis with the most recent survey in 2023/24. As such there is no updated data for this annual performance report.

The HSCP continues through a variety of approaches to gather and understand the experience of people who access health and social care services, with examples of engagement activity previously outlined, and work ongoing in various specific areas of service to capture lived experience (for example collation of experiential information to support performance reporting against the Medication Assisted Treatment (MAT) standards).

Wider analysis indicates a long-term negative trend in satisfaction levels nationally in relation to social care in terms of the impact on people's quality of life, living independently, choice and control, and support for carers (Source: National Benchmarking Overview Report 2023-24). The increased pressures and demands on unpaid carers are recognised within the very challenging context for social care services today. As previously described, within Aberdeenshire our Carer Practitioner Team has continued to focus efforts on supporting unpaid carers eligible for Self-Directed Support (SDS) budgets (designed to allow individuals who require support to have a greater choice and control over how they are supported) and to support carers to receive support quicker and more consistently, working closely with our commissioned support service VSA.

Organisational/system indicators

Indicators 11 to 20 are based on systems data collated on a national basis however the caveats to this data should be noted including the variations to the reporting periods.



For indicators 12 to 16, current data indicates Aberdeenshire performance remains the same or better than the Scotland position. However, calendar year 2024 data is used instead of financial year as recommended by Public Health Scotland as data is more complete. Completeness levels for NHS Grampian from August 2024 onwards are much lower than previous years therefore figures provided in this update are likely to change as completeness levels increase, and comparison to previous years' performance is not recommended at this stage.

For indicator 17 'Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections' – Aberdeenshire performance has reduced to 74.7% in 2024/25 compared to 78.5% in 2023/24 with the position now being worse than the Scotland average by more than 5%. Some fluctuation may be anticipated with performance in 2022/23 sitting at 71.9%. A summary of inspections undertaken by the Care Inspectorate, Mental Welfare Commission and His Majesty's Inspectorate of Prisons is included within the Data Annex Report, providing further context to this data in particular highlighting several services who received grades of 5 – Very Good from the Care Inspectorate in their most recent inspections. At an operational level, an Early Indicators of Concern Group is in place enabling a holistic approach to identifying and responding to potential risk issues within care services at the earliest stage and including representatives from Adult Support and Protection, Care Home Lead Nurse, Care Inspectorate, Commercial and Procurement Shared Service and Care Management.

For indicator 18 'Percentage of adults with intensive care needs receiving care at home', performance has slightly improved with the Aberdeenshire percentage remaining worse than the Scotland position but within 5%. Aberdeenshire has seen a gradually improving trend against this indicator. Redesign work continues under the Social Care Sustainability Programme to ensure future provision of Home Care is delivered efficiently and within available resource and ensuring support for service users who may have a lack of provision of alternative care due to a rural location or complexity of need.

Ministerial Strategic Group (MSG) for Health and Community Care

This suite of 6 indicators was originally set by the Ministerial Strategic Group for Health and Community Care (MSG) with targets/objectives agreed locally by each HSCP. These provide a focus for performance particularly in relation to unscheduled care and an indication of how well the HSCP is helping to support demand and patient flow across the whole system.

Again, the highlighted data warnings should be considered. Performance comparing current year and the baseline year has not been provided for indicators 1a and 2a as data completeness levels are much lower than previous years. Data for current year for indicators 1a, 2a, 2c, 5a and 5b remains provisional and will be subject to change.



The most significant challenge for Aberdeenshire HSCP's performance can be seen to be in relation to indicator 4 – Delayed Discharge Bed Days. The management of delayed discharges continues to be a key area of performance focus for the HSCP but is reflective of a wider complex system challenge, with increased demand for all services, the increasing frailty of our older people and the challenges of sustainability and availability of social care services, compounded by financial constraints.

This data should also be considered within the demographic context with Aberdeenshire having the highest percentage increase in the 65+ age group of all council areas from 2013 to 2023, a 29% increase compared against a Scottish average of 18% (Source: Mid-2023 population estimates - National Records of Scotland (NRS)).

The national Collaborative Response and Assurance Group (CRAG) was established during 2024/25 to work with Local Authorities and HSCPs with the aim of achieving a sustained reduction in delayed discharges. Within Aberdeenshire, a Delayed Discharge Improvement Group was established and an improvement plan created. The HSCP also worked with the Scottish Government's Rapid Peer Review & Support Team to undertake mapping work around patient pathways following discharge from hospital and agreeing appropriate actions from this within resources available. The AHSCP is also connected to Discharge Without Delay work at both Grampian and national levels.

Local Performance Reporting from 2025 onwards

In addition to the national performance frameworks reported above, at a local level the AHSCP has reported quarterly to the IJB on progress against its Strategic Delivery Plan, providing a high-level overview of all transformational, improvement and review activity, outlining overall progress and enabling exception reporting of any key barriers or delays. This has included reporting on progress with implementation of projects under the AHSCP's Social Care Sustainability Programme, as well as delivery of nationally directed workstreams and policies such as the Medication Assisted Treatment (MAT) Standards and Primary Care Improvement Plan (PCIP). These reports are also presented to local Area Committees on a six-monthly basis augmented by updates on local health and social care issues and priorities specific to each area. An evaluation report will be presented to the Aberdeenshire IJB in September 2025 to conclude and capture learning from the Strategic Delivery Plan during 2022-2025.

Moving forward and subject to approval from the Aberdeenshire IJB, the AHSCP will seek to establish a refreshed performance framework to provide assurance as to progress and delivery of its agreed priorities under its new Strategic Plan. This again will be supported by a Strategic Delivery Plan, reviewed annually and with performance reported to IJB at agreed intervals, providing the detail of key workstreams, agreed objectives and associated measurable outcomes.



References

Aberdeenshire Heath and Social Care Partnership (AHSCP)

Aberdeenshire Health and Social Care Strategic Plan 2020 - 2025.

Aberdeenshire Health and Social Care Equality Outcomes 2020 - 2024

Aberdeenshire Council: Self Directed Support

Carers (Scotland) Act 2016

Carers Scotland - statutory guidance by Scottish Government

The Equality Act 2010

HM Inspectorate of Prisons for Scotland: HMP & YOI Grampian, 3rd June - 7th June 2024

Mental Welfare Commission for Scotland: HMP & YOI Grampian, 25th June 2024

Mid-2023 population estimates - National Records of Scotland (NRS)

Minor Injury Service Patient Experience Survey

National Benchmarking Overview Report 2023-24

National Health and Wellbeing Outcomes.

NHS Grampian's 'Know Who to Turn To',

Prevent Suicide Northeast Scotland - App and Website.

Public Bodies (Joint Working) (Scotland) Act 2014

Link to TEC Room Walkthrough video demonstration: https://www.youtube.com/watch?v=b4-1KHe9nro&feature=youtu.be



APPENDIX 1 Members of the Aberdeenshire Integration Board (IJB) for the period 1 April 2024 to 31 March 2025

Voting Members

Name	Organisation
Dr Collette Backwell (from 18/06/24)	NHS Grampian
Cllr Neil Baillie (from 9/09/24 to 28/05/25)	Aberdeenshire Council
Cllr Ross Cassie (from 28/05/25)	Aberdeenshire Council
Joyce Duncan	NHS Grampian
Cllr Moray Grant	Aberdeenshire Council
Cllr David Keating	Aberdeenshire Council
Cllr Gordon Lang	Aberdeenshire Council
Steven Lindsay	NHS Grampian
Cllr Seamus Logan (until 31/08/24)	Aberdeenshire Council
Cllr Anne Stirling (Vice-Chair from 1/04/24)	Aberdeenshire Council
Dr John Tomlinson (Chair from 1/04/24)	NHS Grampian
Susan Webb	NHS Grampian

Non-Voting Members

Name	Position
Pamela Milliken (until 27/04/25)	Chief Officer



Name	Position
Chris Smith (until 7/04/25)	Chief Finance and Business Officer
Leigh Jolly	Interim Chief Officer (from 28/04/25) and Chief Social Work Officer
Mary Beattie (from 2/12/24)	Interim S95 Officer
Susan Donald (from 2/12/24)	Interim Chief Finance and Business Officer
Rachel Taylor	Primary Care Advisor
June Barnard (from 28/03/2023)	Nursing Lead Advisor
Mr Paul Bachoo	Medical Practitioner – Secondary Care Adviser

Stakeholder Representatives Non-Voting Members

Name	Position
Inez Kirk	Trade Union representative
Martin McKay (Keith Grant sub)	Trade Union representative
David Hekelaar (until 11/12/24)	Third Sector representative
Sue Kinsey	Third Sector representative
Angie Mutch	Service User representative
Fiona Culbert	Carer representative
Carolyne Wood (from 11/12/24)	Carer representative
Fiona Alderson (from 11/12/24)	Third Sector Representative
Victoria Brown (from 11/12/24)	Third Sector Representative



