



Health and Social Care Forum Minutes

Thursday 03 July 2014

Craig Mitchell House, Flemington Road, Glenrothes

Present: Kenny Murphy (Chair), Jo Clark, Stephen Adamson, Michaela Lumley: Fife Voluntary Action, Wendy Barbour: Fife Employment Access Trust, Laura Crombie: Clued-up Project, George Cuthill: Fife Alcohol Support Service, Jo Hobbett: The Ecology Centre, John Jones: Express Group, Jane Maciver: LINK – East Fife Mental Health Adolescent Befriending Project, Fiona MacKay: Age Concern Glenrothes, Ewan Masson: Dunfermline Advocacy Initiative, Carol Reddington: Fife Day Care Services, David Sharratt: Citizens Advice and Rights Fife, Charlie Kirsten: The Richmond Fellowship Scotland, Sylwia Nadolny: LinkLiving, Elaine Fox: ENERGI, Nicola Glen, Fife Society for the Blind, Anne Buchanan, Alzheimer Scotland

In attendance: Stephen Moore: Interim Director for Health and Social Care, Mark McGeachie: Joint Improvement Team, Christine Davison (minutes): Fife Voluntary Action

Apologies: Alison Brown: Furniture Plus, Grahame Blair: Barony Housing Association, Debbie Finlayson: British Red Cross, Duncan Mitchell: Fife Employment Access Trust, John McKendrick: Fife Elderly Forum, Caroline MacKenzie: First For Fife, Aiveen Ryan: Generations Working Together Network, Bill Baird: Royal Voluntary Service

Welcome and Introductions

Kenny (Chair) opened the Forum by discussing Fife Voluntary Actions (FVA) proposals for how the Forum might work and evolve as its members grows and develops collectively. Kenny will chair the Forum in the first instance until the members decide to elect a chair.

Integration will obviously be a key topic at this moment in time; however this will not be the sole purpose of the Forum. It should be a place to share best practice and knowledge, to enable FVA to engage with the members; to provide opportunities to debate themes and potentially agree collective responses and a means to choose representatives to sit on Strategic Groups and Partnerships. Often the third sector finds itself being led by the public sector agenda. It is expected that over time the Forum will find its own voice and help to drive policy and future agendas.

Kenny reported there is increasing acknowledgment of the contribution the third sector brings to the Health and Social Care agenda. This recognition has, in part, derived from the Reshaping Care for Older People programme (RCOP); the third sector was responsible for the Community Capacity Building element of Fife Plan and was the only partner to be externally evaluated, in fact FVA's report to the Health and Social Care Partnership PMG (Partnership Management Group) led to our Partners being required to report in the same manner.



Integration is a game changer and an opportunity for the sector to become more involved in public service delivery. The sector brings a unique voice and skill set to the table; including agility, considerable experience of co-production, partnership working and monitoring, evaluating and reporting on impacts. These key strengths are acknowledged by everyone as essential to the challenges posed by current budget and demographic challenges.

Stephen Moore arrives to the meeting, 10.30am. Members introduced themselves.

Stephen Moore, Interim Director of H&SC - Presentation on Integration in Fife. [See attached]

Stephen set out the legislative context driving Integration. The Public Bodies (Joint Working) (Scotland) Act 2014 is now law and has set a fixed timetable for integration. A new legal entity will be established in Fife which will become responsible for specific functions as set out in the Act on 1st April 2015. Essentially what was formally Social Work as delivered by the Council and Adult Health Services as delivered by NHS Fife for more details see <http://www.scotland.gov.uk/Publications/2014/05/5284>

The Shadow Integrated Health and Social Care Partnership Board was established in June 2013 to lead the change so that Fife was ready for Scottish Government legislation in 2014. Membership includes representation from the third sector (Kenny Murphy), the private sector (Janice Cameron) and public reference group (Doreen Bell). None of these members have a vote on the board but all members of the board can speak equally.

They appointed Stephen Moore (Fife Council's Executive Director of Social Work and Lead for Health) as Interim Director of Health and Social Care on 1 May 2013. His contract ends in September 2014, when he retires.

A Work Plan is in progress focussing on key themes:

- Integrated budgets and financial planning
- Communications
- Workforce and HR implications
- Governance and Accountability
- Joint Commissioning Strategy

The appointment of a Director of Health and Social Care Sandy Riddell was announced recently, he takes up his post on 1st September 2014. The Health and Social Care Partnership will officially take over in April 2015 and will presumably confirm Sandy Riddell's appointment. The new partnership and legal entity will be responsible for developing an Integration plan, acceptable to the Scottish Government, which will be activated by 1st April 2016, at the very latest.

A consultation on draft Regulations is taking place at the moment, due to be completed by August 2014. The consultation is open to all if any organisation wishes to respond. (See links below)

<http://www.scotland.gov.uk/Publications/2014/05/5284/1>
<http://www.scotland.gov.uk/Publications/2014/05/5284/2>



While acknowledging the pressures on budgets and some of the major challenges involved in integration, Stephen was positive about the huge opportunity to work more effectively going forward, renewing Scotland's services in the context of the Christie Commission Report.¹ He stated that we all need to keep our eyes on the big prize, a universal service, served by a culture of honesty that acknowledges where things are not working and ensuring partners come together to redesign processes (e.g. models of care) so that Fife can continue to improve the quality of its service and be able to respond to peoples' needs.

Stephen finished his presentation. Kenny opened the floor to members of the Forum for a Q&A session.

Q&A

Where does the third sector fit in and do we have an influence on Joint Commissioning?

Summary of Stephen's response: The third sector has an equal voice within the partnership and brings a unique perspective and expertise, most notably its flexibility and accomplishment in measuring outcomes, core to the overall plan. The board are looking to agree 7 localities in Fife which will reflect the strong identity in these areas. Each area will have an individual H&SC plan which is unique to that locality. Each area structure will have an influence on local planning but the board will have the final decision. The needs of each locality are different and the plan will reflect those population needs in order to provide consistent quality and the sector needs to participate in developing these plans and influencing commissioning going forward.

Will each area have the same budget, and if so how will that work where everyone is competing for a share of the pot?

Summary of Stephen's response: No, the budget will be defined by demand. The board will plan ahead and move resources around to where they are most needed. Discussion followed on the political implications of varying budgets.

Kenny reported that Fife has a good amount of data which can be used to forecast future need and demand. He was part of the Joint Commissioning Strategy Group which produced a report which will help counter individual politicking. A point was raised that the sector is also able to add to the need and demand forecast. Kenny acknowledged that there were a number of challenges for information sharing (including that between the Council and the NHS) which will influence the redesign of services.

Stephen concluded that tough decisions needed to be made but that they needed to be for the right reasons, that a cultural change was required but his past experience in Children's services gave him confidence that people will come together to make a difference, acknowledging that it is about one service, one budget and the winners should be all of us if we plan accordingly.

¹ Commission on the Future Delivery of Public Services:
<http://www.scotland.gov.uk/Resource/Doc/352649/0118638.pdf>



Is there a need for a new professional worker?

Summary of Stephen's response: Yes. Nurses could also take on traditional social work tasks – a shocking 40% of older people admitted to hospital suffered from malnutrition. More district nurses could, by the nature of their relationship, help prevent this from happening. Skills required by workers will be reflected by the need in the community. A huge proportion of the workforce working now is over 50, they will leave and new people will come in with new ideas and new ways of working. Stephen expressed his view that we need more district nurses however staffing increases in one area will mean a decrease in another. We need to plan our workforce now – where will we be in 5 years

Bureaucratic targets often result in easy path choices with the hard to reach communities (often the most in need) losing out, how can this be combatted and is it necessary to communicate the effect of integration to the public?

Summary of Stephen's response: It is a difficult message. We have no more money and less money in the future. We need to focus on the positives. We don't need to do a huge effort with the public; it's about leading by example. Kenny always makes the point at every meeting that the third sector justifies its (often tiny) budgets consistently unlike other partners. The historic shift in emphasis towards targets is acknowledged; that the entire infrastructure is built around targets not outcomes is being tackled with a focus on Outcome measurement. It's now about what difference we make. No-one wants another Mid Staffordshire.

Discussion followed on conversations with Link officers about Service Level Agreements, the focus on numbers and the importance that Self Directed Support (SDS) could potentially have and the importance of soft outcomes, despite their lack of political credibility. Kenny reported that he has only had discussions about outcomes at shadow board meetings, not outputs or targets. There has been no talk about numbers.

Given that the Forum is to potentially represent the sector, given your experience, what is your advice on how the sector can be best heard at the table?

Summary of Stephen's response: This will involve taking the fear away from middle managers and taking an active part in local area plans. 7 new locality managers will likely be appointed. It is important to influence and this can come from all levels of H&SC. You present a strong voice for the person. You turn up to things and your voice is heard. Competition is real between organisations and this is strong in the voluntary sector but you must have a joined up voice and be visible.

The Q&A session ended and the group thanked Stephen Moore for his time. Before leaving Stephen advised the Forum to meet with Sandy Riddell (the newly appointed Director for Health and Social Care) early to influence and involve the voluntary sector.



Health & Social Care Forum Discussions

Kenny advised that he is scheduled to meet with Sandy Riddell before he officially takes up his post. He asked the Forum to consider what the messages are that they would like to get across to Sandy and bring them to the next meeting.

Action: Members: To bring thoughts to next meeting or e-mail them to Christine.

It was agreed that the Forum should meet regularly, once a month to start with; those who were not able to attend this meeting or later ones, may be able to attend others. Suitable dates would need to be suggested and made available to the members to ensure good participation levels.

Action: Christine Davison: To send out Doodle Poll to the Forum membership with dates up to the end of the year.

General positive comment were put forward that there is potential for the Forum. If members can agree on things around Health and Social Care or promote a specialism this will strengthen their voice and helps to tackle preconceptions around the voluntary sector. Further discussion was necessary on the role and remit of the Forum.

Fife voluntary Action invites suggestions for the role and remit to be sent to Christine Davison: Christine@fifevoluntaryaction.org.uk

Action Fife Voluntary Action: To draft a suggested role and remit for the Forum

Kenny Murphy will chair the first few Forums but it is expected that a member will volunteer or be elected to the role of chair. FVA will not lead the Forum but will set agendas (with membership input), provide meeting space and administration support to the Forum.

Clarity is made around Kenny's position on the shadow board and his voting powers. There are three members of the shadow board that attend but have no voting rights: Kenny Murphy for the Voluntary Sector, Janice Cameron the private sector, and Doreen Bell the Public Reference Group. Circulation of the presentation was requested.

Action Christine Davison: Circulate Stephen Moore's presentation and links to consultations with minutes of the Forum.

Feedback was requested on the Forum from those that attended.

Action Christine Davison: Distribute Survey Money for feedback on the Forum