

Note of Meeting of

Health and Social Care Forum

Thursday 14 July 2016

Craig Mitchell House, Flemington Road, Glenrothes, KY7 5QF

Present:

Sheila Mitchell Auchmuty and Dovecot Tenants and Residents'

Association

Norma Philpott CARF

Ross Livingstone Circles Network

Fiona SmithCrossroads Fife CentralJohn JonesExpress Group Fife

Jim BettFife Alcohol Support ServiceCarol ReddingtonFife Day Care Services

Marie Boyne Fife Forum

David RossFife Society for the BlindKenny Murphy (Chair)Fife Voluntary ActionJo ClarkFife Voluntary ActionChristine DavisonFife Voluntary Action

Ian RobertsonGlenrothes Area Residents FederationBenjamin McElweeHealth and Social Care Alliance

Frances Howie
Louise Andree
LEAD Scotland
Irene Blackburn
Link Living
Tracy Christie
Scottish Autism

Charlie KirstenThe Richmond Fellowship

Apologies:

Brian Robertson-Fern BRAG Enterprises

Gail Carstairs Enable

Maggie Wright Families in Trauma

Jane Maciver *LINK – East Fife Mental Health Adolescent Befriending*

Project

Gina Allen Parkinson's UK

Bill Baird Royal Voluntary Service



Discussion and reflections with Sandy Riddell, Director of Fife's Health and Social Care Partnership

On behalf of the Health and Social Care forum and FVA, Joanna Clark welcomed Sandy Riddell, Director of the Fife Health and Social Care (H&SC) Partnership to the Forum. Sandy will retire in August this year having been in post since September 2014. He gave an interesting and honest reflection of the past, summarising what has been achieved so far. Listing the 'clunky stuff' that has been the focus of integration. Including; establishing the Integration Scheme, three key committees (Finance, Clinical Governance and Audit and Risk), and the Senior Leadership Team (SLT). During his time in post Sandy agreed that much of his time has been focused on this 'ground work' which will ensure that Fife should have a solid base from which to operate.

He didn't underestimate the challenges going forward. A huge demand on services and a budget that is £15 million in deficit for this year, and the next. The IJB cannot operate a deficit so this amount will be accounted for by the NHS (£11 million) and Fife council (£4 million).

Sandy is optimistic about integration. We are at a 'staging post' right now, with work still to be done and cultures to change, however he believes that Fife has a strong background of partnership working and innovation to build on.

Kenny Murphy thanked Sandy for his contribution. An informal Q&A session followed, the summary of these discussions are below.

(T. = theme and R. = the collective response including Sandy's points and commentary.)

- T. The third sector has been waiting for 'on the ground' decisions to start being discussed as this is where the third sectors strengths will be most beneficial to the people of Fife. R. The forming of the IJB and other Scottish Government legislative requirements has provided the context for the last two years. Sandy emphasised that there has been a lot of work to bring together two large public sector bodies, only recently having had his first meeting in two years with the Chief Executives of NHS Fife and Fife Council. Everyone is still learning in this process, including the Scottish Government.
- T. The third sector is flexible and has a track record in making 'real change'. The sector could support public sector colleagues however it feels like the sector hasn't yet had its opportunity, it's always been left at the side-lines. R. There is a different 'chemistry' in discussions happening just now, and a real appetite at IJB level to understand how decisions affect people in Fife. As strategic decisions make way for operational decisions and so on, hopefully the role of the third sector will become more defined.
- T. Within H&SC there is an increasing focus on and aim to deliver services within a community setting. Will this impact on the third sectors role? R. It will be more important now than ever before for resources to be allocated where they're needed. This will impact on the third sector, positively and negatively which emphasises the importance of the Locality and planning structure. This will have an important role in ensuring that resources are allocated to where they are needed.



- T. What advice would you give to the third sector, in light of the capacity issues of Fife wide organisations having to cover seven localities? R. The third sector has influence and has effected change. The third sector needs to be smart about localities as they form. They need to be included at the table, actively making decisions with partners and not just waiting to hear what the results will be.
- T. What are the best selling points the third sector has? R. "Richness" and "flexibility" (the sector can move and adapt quickly). Of note is that the third sector is not as visible to the NHS as it could be. There is much the NHS could learn from the third sector, and vice versa. The sector needs to continuously sell itself so partners know what the sectors strengths are.
- T. Given there are differences between *health* and *wellbeing* is there a risk that wellbeing could get lost under '*health*'? R. There is potential for wellbeing to get absorbed into health with the risk of wellbeing becoming medicalised. Community hubs could play a role in this as a single point of entry for the public, offering joined up services. If community hubs are built appropriately they could help link health to wellbeing. This will also develop further as localities become more defined.
- T. As the population ages, how far does self-management have a role within integration and is this realistic? R. Personal responsibility is on the table and up for discussion. People are making choices that impact on the current system. It is frustrating when we hear changes are packaged as 'cuts' and offering services of lower quality, but there is a push towards greater public education and awareness. It would be beneficial if positive messages came from everywhere, the media could play an important role in emphasising this message. We collectively need to change the way we sell this.
- T. GP appointments are being taken up, largely by the aging population. Younger generations, including those working and with children are having to access A&E services to be seen R. This issue is complex. The review of the GP contract is underway. Sandy referred to an occasion during a meeting when a GP stated that GPs weren't paid enough to do what was being discussed. During a follow-up conversation the GP said that they hadn't delivered this service for over 20 years' and were fearful at the prospect of having to do something that they were out of practice and training to deliver. People need supported in this transition to ensure they have the skills and knowledge to do their jobs in this new environment.
- T. What is Fife doing well in comparison to the rest of Scotland? R. The single shared portal trial has been a success. Another trial at the front door of the Victoria Hospital that supported people back home was successful and delivered good outcomes. Successful pieces of work have usually involved earlier intervention in the pathway and/or involved partnership working.
- T. Is there movement from the Scottish Government to align national indicators with agendas? R. Work on this is on-going. Targets can sometimes be political and don't always work towards the best service for the individual, reporting needs to move towards what is best for the individual.
- T. Going forward it's not going to be business as usual, all partners will need to go through
 the commissioning process to secure resources to deliver services. R. There needs to be a
 predictable, robust network of services. There is currently a lack of a real visible strategy or



commissioning process to work towards so what is needed is not yet clear. Some funding has been short-term and this doesn't work towards building the kind of robust, secure network needed to deliver safe and efficient services. A traditional mindset exists and the third sector is still at risk of being allocated the 'crumbs' rather than being a fully involved partner.

Kenny thanked Sandy for his time to contribute to discussions.

Integration Update

- The three IJB sub-committees have started to meet. These are 'finance', 'clinical governance' and 'audit and risk'.
- The Public and Engagement Strategic Plan has been approved by the IJB, and the first
 meeting of the Participation and Engagement Network took place on Monday 11 July. The
 meeting discussed the purpose of the group and work going forward which will feed into
 and down from the IJB.
- A single complaints process was agreed.
- The recent review of day care services in Fife was presented to the IJB. Kenny reported that due to a lack of the third sector involvement, he could not give his support to the review at the meeting. It was agreed at the IJB that the third sector should be fully involved in the next stages of the review.
- A new scheduling tool for front-line care staff has been developed as a trial. The app will focus on logistics and safety. There has been good feedback on the app so far.
- The IJB discussed the GP clusters and how they will fit into the seven localities.
- The group discussed equality impact assessments and the differences of reporting to funders between the public and third sectors.

Member Updates

John Jones attends the Mental Health Strategic Implementation Group (SIG), he is looking to contact mental health organisations to get their views. John also his expressed frustration at works being done at New Volunteer House and the disruption to organisations, staff and services.

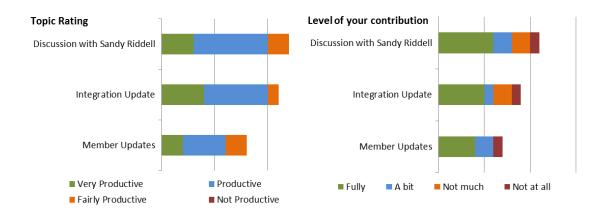
Norma echoed similar feelings to John and informed the group that CARF will be publicly closing their services for two weeks and will operate a reduced service in Kirkcaldy for a short time.

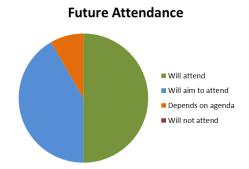
Irene updated the group that Link Living will host a re-launch of West Bridge Mill on Friday 15 July 2016, and welcomed members to come along.

Christine informed the group of a Scottish Government publication on <u>Self-Directed Support</u>. The report covers statistics over the first year of SDS and covers the whole of Scotland with information going down to Local Authority level.



Feedback





50% of attendees said they would attend the next Forum with the other 50% saying they would aim to attend or would send another member of staff depending on the agenda. Attendees found the updates from Sandy and Kenny helpful and would like more time built into future Forums to network.