Fife Health & Social Care Partnership
Supporting the people of Fife together

MINUTE OF THE FINANCE, PERFORMANCE & SCRUTINY COMMITTEE WEDNESDAY 15TH JANUARY 2025 AT 10.00 AM VIA MICROSOFT TEAMS

Present:	Alastair Grant, NHS Non-Executive Board Member (Chair) John Kemp, NHS Non-Executive Board Member Colin Grieve NHS Non-Executive Board Member Cllr Dave Dempsey Cllr David Alexander
Attending:	Lynne Garvey, Director of Health & Social Care Audrey Valente, Chief Finance Officer Lisa Cooper, Head of Primary & Preventative Care Jillian Torrens, Head of Complex & Critical Care Chris Conroy, Head of Community Care Vanessa Salmond, Head of Corporate Services *In attendance*: Tracy Hogg, Finance Manager HSCP Avril Sweeney, Manager Risk Compliance William Penrice, Service Manager, Performance Management & Quality Assurance Rachel Heagney, Head of Improvement, Transformation & PMO Gillian Muir, Management Support Officer (Minutes)
Apologies for Absence:	Lynn Barker, Director of Nursing Helen Hellewell, Associate Medical Director

No.	Item	ACTION
1.	**WELCOME AND APOLOGIES** Alastair Grant welcomed everyone to the meeting. Apologies were noted as above, and all were reminded of meeting protocols. Those present were asked that, in an effort to keep to timings, all questions and responses should be as succinct as possible. Members were advised that a recording pen would be in use during the meeting to assist with minute taking.	
2.	**DECLARATIONS OF INTEREST** No declarations of interest were noted.	

3.	**MINUTE OF PREVIOUS MEETING – 12TH NOVEMBER 2024** The minutes of the last meeting were agreed as an accurate record of discussion.	
4.	**MATTERS ARISING / ACTION LOG** The action log was reviewed. All actions noted have been actioned and are either complete or in progress.	
5.	**FINANCE**	
5.1	**Finance Update** The Committee considered a report from Audrey Valente, Chief Finance Officer detailing the current financial position (actuals to November 2024) highlighting a projected overspend of £34.8m and noting this was an adverse movement of £8m from the September position. Audrey Valente provided Committee with further detail on the principal areas contributing to the adverse movement noting these to be GP Prescribing, National Care Home Contract Rate, Psychology, Additional Packages, Service Level Agreements, Pay Shortfall and Non-Achieved Savings. Committee also noted the Partnership had released two planned savings due to these not being able to achieve the in- year savings expected. (Reduction in Care Home Beds and Community Services). Committee noted in relation to the savings position the Partnership was now reporting at November to deliver 59% of savings, a value of £23m against the £39m approved in March 2024. Audrey Valente noted the financial position remained challenging and not an improved position. The discussion was opened to Committee members and considerable discussion was had around the projected position and the areas contributing to the adverse movement. Members provided their thoughts and comments. Questions raised included what level of certainty do we have that what we are projecting at the moment is likely to be the outcome of the financial year; what is it that has stopped us achieving the digital sensor technology transforming overnight care and where are we with that particular saving and is it going to deliver next year? <u>Decision</u> The Committee 1. Noted the content of the report including the overall projected financial position for delegated services for 2024-25 financial year as at 30th November 2024 as outlined in Appendices 1-3 of the report.	

	2. Noted steps continue to be taken by Officers to consider options and opportunities to improve the financial position during the remainder of 2024-25 as part of the Financial Recovery Plan process, as outlined in section 8 of the Finance Update Appendix1. 3. Noted the onward submission to the IJB of the financial monitoring position as at November 2024.	
5.2	**FP&S Risk Register – Deep Dive Transformation** The Committee considered a report from Avril Sweeney, Compliance Manager for discussion and assurance that risks are being effectively managed within the IJB's agreed risk appetite and at the appropriate tolerance levels as well as noting as part of the IJB's risk reporting framework the risk was assigned to both Governance Committees. Avril Sweeney drew Committee's attention to appendix 1 highlighting it sets out the risk description, risk scoring and highlights internal and external factors that may impact on the risk as well as providing relevant assurances, performance measures, benefits, and linked risks as appropriate. Committee noted key mitigations for the risk included the Transformation Change Programme aligned to the Strategic Plan, the Medium-term Financial Strategy, and the Workforce Strategy. Committee also noted that regular monitoring and review of the programme takes place through the Programme Management Office Oversight Board and was also reviewed at Senior Leadership Team Strategic Meetings. Avril Sweeney highlighted this was an overarching strategic risk but in addition to the management actions for the whole programme, individual projects would also report into the various Partnership Programme Boards where additional scrutiny would apply and any concerns would be raised and addressed. Committee noted there was confidence that there was a reasonable level of assurance that work was ongoing to support management on the risk and close scrutiny was being applied to delivery actions and monitoring of performance. Committee also noted that it is acknowledged that there are a number of external factors out with the Partnership's sphere of influence and control, but that it was trying to keep these closely monitored. Avril Sweeney highlighted that some of the programmes are still at the planning stage and may require consideration as part of the refresh of the Strategic Plan for 2026 onwards and it maybe that risks and this risk itself may require review or possible merge with other risks as the Strategic plan refresh develops which may impact on the target date and target score going forwards.	

	The discussion was opened to Committee members where considerable discussion was had around the deep dive review and risks. Members provided their comments and feedback on the report. Questions raised included whether the risk score for digital sensors should be higher than that noted in the report and should we be thinking of widening the wording of that risk – are we being ambitious enough in our transformation programme that we do have something that could get us on a sustainable footing? A query was also raised with regards to the Gannt chart presented within the report. <u>Decision</u> The Committee 1. Discussed the deep dive review and provided comments and suggestions for improvement. 2. Noted the level of assurance provided on this risk.	
6.	**PERFORMANCE**	
6.1	**Performance Report** The Committee considered a report presented by William Penrice, Service Manager, Performance Management & Quality Assurance for assurance and discussion providing an update and overview of progress and performance in relation to the: • National Health and Social Care Outcomes • Health and Social Care – Local Management Information • Health and Social Care – Management Information. Committee noted that along with the regular report, the document contained some updates on efforts to improve the performance approach including a proposal for a new graphic to look at indicators and an outline of how automation would also be built in. Committee also noted the Partnership's intent to deliver the new format report with improved indicator scope in its report of the first period of the new financial year. The discussion was opened to Committee members who thanked officers for their comprehensive report. Members had considerable discussion around the proposed new format and provided their comments and feedback. Questions raised included the data around absence rates – was there a core of long-term sickness or was this regular individual sickness, was there a long-term trend and could anything be done to alleviate the sickness absence. A query was also raised with regards to the uptake of technology enabled care and the eligibility criteria as set by the Scottish Government. Committee noted that in depth reports from HR colleagues within the partner agencies are provided to the Local Partnership Forum covering areas such as causes for absence, absence rates per service, demographic and split between long-term and short-term. HR colleagues are supporting the Partnership in its monitoring of this.	

	Decision The Committee 1. Discussed the report and provided comment on the new format. 2. Took assurance of the contents. 3. Approved for onward submission to the Integration Joint Board.	
7.	**SCRUTINY**	
7.1	**Mainstreaming the Equalities Duty & Equality Outcomes Progress Report** The Committee considered a report presented by Avril Sweeney, Compliance Manager for assurance, discussion, and decision for onward submission to the Integration Joint Board for final approval. Committee noted that in April 2023, the Integration Joint Board approved and published its Mainstreaming the Equalities Duty and Equality Outcomes Progress Report in accordance with the Equalities Act 2010 when it also set out new equality outcomes as part of the Strategic Plan 2023-2026. Avril Sweeney drew Committees attention to appendix 1 of the report noting this provided the latest information on Mainstreaming the Equality Duty as well as a progress update on the five equality outcomes agreed and published in 2023. Committee noted that the Partnership had integrated its approach to the development of the new set of outcomes with the work to develop the Strategic Plan 2023 to 2026 and together with support from the Equality and Human Rights Commission and through the IJB Equality Peer Support Network it was working to ensure continued compliance in this area going forward. Avril Sweeny also drew Committee's attention to the action plan contained within appendix 2 of the report. Committee noted during 2023 and 2024 the Partnership worked to develop and strengthen processes and raise awareness in this area and work through the Strategic Planning Group and the Performance Reporting Framework has helped to ensure the implementation of the equality outcomes. The discussion was opened to Committee members who thanked officers for the comprehensive report. No additional questions were raised. Decision The Committee 1. Took assurance from the work undertaken to mainstream equalities into the exercise of functions and provide an update on progress with achieving the Equality Outcomes set by the IJB in April 2023.	

	2. Discussed the report. 3. Recommended the report be presented to the Integration Joint Board for final review and approval.	
8	**ITEMS FOR NOTING**	
8.1	**Chief Social Work Officer Report 2023-24** The report was provided to Committee for noting. Committee noted that following the reports submission and approval at Fife Council's People and Communities Scrutiny Committee on 14th November 2024 the report was submitted to the Scottish Government as part of the statutory responsibilities of the role of the Chief Social Work Officer. Committee noted the report provides an overview of key aspects of social work provision in Fife and the role and range of functions covered by the Chief Social Work Officer including social work and social care services provided by both the Local Authority and by the Health and Social Care Partnership. <u>Decision</u> The Committee 1. Noted the contents of the report.	
9.	**ITEMS FOR HIGHLIGHTING** Alastair Grant confirmed with the Committee that there were no issues requiring to be highlighted at the Integration Joint Board on 29th January 2025.	
10.	**AOCB** No issues were raised under AOCB.	
11.	**DATE OF NEXT MEETING** • Additional Finance, Performance & Scrutiny Committee Wednesday 12th February 2025 at 10.00 am via MS Teams • Wednesday 12th March 2025 at 10.00 am via MS Teams	