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

MINUTE OF THE FINANCE, PERFORMANCE & SCRUTINY COMMITTEE
WEDNESDAY 16TH JULY 2025 AT 2.00PM VIA MICROSOFT TEAMS

Present:	Alastair Grant, NHS Non-Executive Board Member (Chair) John Kemp, 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 Vanessa Salmond, Head of Corporate Services Chris Conroy, Head of Community Care Jillian Torrens, Head of Complex & Critical Care *In attendance*: Tracy Hogg, Finance Manager HSCP Roy Lawrence, Head of Culture, Engagement & Communities Dafydd McIntosh, Organisational Development & Culture Specialist 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 – 13TH MAY 2025** 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	**Revised Budget Direction** The Committee considered a report presented by Audrey Valente, Chief Finance Officer detailing revised budget directions for approval and issue to Fife Council and NHS Fife as a result of a change in the funding position from both partners. Committee noted that following IJB's approval of the 2025-26 Revenue Budget further constructive discussion had been had with the Executive Director of Finance & Corporate Services, Fife Council and the Director of Finance, NHS Fife whereby agreement had been given from both partners to provide additional contributions to the Partnership totalling £14m. These additional contributions have been allocated across service areas as detailed within the appendices of the report. Committee noted that the report recognises the additional funding available by partners and asks the Committee to approve the increased budget and associated directions. The discussion was opened to Committee members and considerable discussion was had around the revised directions and additional monies received. Questions raised included is Committee being asked to approve the additional spend or has that been used to fill in the gaps of what we had previously budgeted but didn't have the £14m for and we are being asked to approve a set of directions which has a new budget of £755m but in subsequent paper the budget goes up again to £763m – could we be agreeing directions that are £763m rather than £755m and are we going to do that in subsequent time or doesn't that matter? Decision The Committee: 1. Approved the issue of the Directions 2025.005 and 2025.006 which supersede Directions previously issued. 2. Agreed to close Directions 2025.001 and 2025.002.	
5.2	**Finance Update** The Committee considered a revised report presented by Tracy Hogg, Finance Manager detailing the projected outturn position as at 31st May 2025 of the delegated and managed services noting the forecast is currently projecting an overspend of £5.221m. Tracy Hogg took Committee through a detailed explanation of the amendments to the revised report.	

Committee noted the areas of overspends:

- GP Prescribing ~ £1m
- SLA Budget ~ £3.5m
- Mental Health and Psychology ~ £1.9m
- Care at Home ~ £1.5m
- Internal Care Homes ~ £750k

These are partially offset by underspends in:

- Supported Living and Community Support Services ~ (£2.6m)
- Learning Disabilities (£0.958m) all due to vacant posts.

Committee noted the savings approved by the IJB for 2025-26 total £29.424m. £27.447m are currently on track to be delivered which equates to 93% delivery. Committee's attention was drawn to appendix 3 where further detail of savings is shown and includes additional narrative captured through the PRU process to provide assurance to Committee in relation to progress.

Committee also noted a reserves balance of £1.712m brought forward from last year and as part of the updated budget direction £0.782m was to be transferred to reserves available for use and a request to the IJB will follow as part of the recovery plan to draw down and utilise the £0.782m to reduce the projected overspend.

Tracy Hogg advised recovery actions as per the Integration Scheme states that any in-year overspend requires recovery actions to be put in place to bring the position back to breakeven and recovery actions are currently being discussed by SLT and a plan is being developed which will be presented to a future Committee.

Tracy Hogg also advised that during 2024-25 funding of £200m was made available by Scottish Government in relation to Agenda for Change cost pressures associated with the reduction in working week, review of B5-6 nursing roles and protected learning time. Fife received in excess of £15m, and this funding was allocated on a non-recurring basis while the scale and implementation of the reforms were better understood. The IJB received £0.011m of this funding in 2024-25 with the balance allocated to NHS Fife. It is essential that all costs are recognised and recompensed in 2025-26 to ensure the financial sustainability of the IJB. Discussions are ongoing with the Director of Finance NHS Fife in relation to this funding and it is anticipated that agreed receipt of this funding will form part of the recovery plan.

There continues to be continued close monitoring of the projected outturn position and Officers will ensure robust scrutiny of any spend throughout the financial year to ensure effective financial management of the resources available to the IJB. Delivery of savings is a key priority, and these will also continue to be monitored and scrutinised.

	The discussion was opened to Committee members and considerable discussion was had around the budget and financial position. Questions raised included ignoring the £14m the £5m is a whole year projection based on the situation at the end of month 2; what is the budgetary control process before you commit to more staff doing more in areas that are in overspend; what is the process for deciding when we are content that service is provided and when it's not; on page 46 the table of the £14m there is reference to an accounting transaction adjustment to resource transfer – does the fact that it's an accounting transaction does it mean that somehow balanced up somewhere else in all of that; on the same table miscellaneous income figure of £4.5m – what is that; mental health and psychology on page 48 states savings will remain under review and alternatives sought if required – if there are other savings which can be made then why aren't these being made anyway; service level agreements – do we just accept what we are being charged or do we look at the figures from our point of view? Decision The Committee 1. Noted the content of the report including the overall projected financial position for delegated services for 2025-26 financial year as at 31st May 2025 as outlined in appendices 1-4 of the report. 2. Noted that steps continue to be taken by officers to consider options and opportunities to improve the financial position during the remainder of 2025-26. 3. Noted the onward submission to the IJB of the financial monitoring position as at May 2025 and the onward submission of the direction to NHS Fife for approval by IJB.	
5.3	**Finance Performance & Scrutiny Strategic Risk Register Deep Dive Review Report - Governance** The Committee considered a report from Audrey Valente, Chief Finance Officer provided 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 is assigned to this Committee. Audrey Valente drew Committee's attention to appendix 1 highlighting this sets out the risk description, risk scoring and highlights internal and external factors that may impact on this risk as well as providing relevant assurances, performance measures, benefits and linked risks as appropriate. Committee noted key mitigations for this risk include the Integration Scheme, Governance manual and governance arrangements, Monitoring of Directions and Risk Management arrangements. Regular management reporting to Committee and the IJB ensures appropriate scrutiny. This is then supplemented by the work of internal and external audit teams who provide reports highlighting good practice and providing recommendations for improvement.	

	Committee noted there is confidence there is a reasonable level of assurance that work is ongoing to support management on this risk and close scrutiny is being applied to delivery actions and monitoring of performance. Audrey Valente advised that additionally, in the internal audit annual report for 2024/25, the auditors have concluded that: • The IJB has adequate and effective governance, risk management and internal controls in place. The discussion was opened to Committee members who were appreciative to hear the outcome of the internal audit review. Committee provided their comments and feedback on the report. Questions were raised around the SMART actions in that these don't appear to be smart in terms of specific measurables and risk score will the two actions get us to the target risk score? Decision 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	**Annual Performance Report** The Committee considered a report presented by Audrey Valente, Chief Finance Officer for discussion and assurance. Committee noted this is a requirement of the Scottish Government and is due for submission by end of July 2025. Audrey Valente advised that the report is structured around the nine health and wellbeing outcomes and includes an overview of the current situation in Fife including population trends, changes to life expectancy and some of the increased challenges including increased demand for services and reduced financial resources as the cost-of-living crisis continues to impact on national and local budgets. Committee noted that the report includes 41 case studies/service updates which showcase some of the innovations and improvements the Partnership has introduced over the last year, and a summary of internal and external awards received by colleagues and teams across the partnership is also included. An easy read version has been created and is available in appendix 2 and a shorter version has also been produced for members of the public. Committee also noted that some updates are still awaited, therefore not all information is included in the draft version of the report but will be included in the final report to the IJB.	

	The discussion was opened to Committee members who provided additional comments and feedback on the report which Officers will take on Board when the final report is submitted to the IJB for approval. No further questions were raised. <u>Decision</u> The Committee 1. Reviewed the Annual Performance Report 2024 to 2025, highlight any changes required, and provided agreement that the report should progress to the Integration Joint Board. 2. Were assured that Fife Health and Social Care Partnership is meeting its legislative requirements under Section 42 (Integration authority: performance report) of the Public Bodies (Joint Working) (Scotland) Act 2014.	
7.	**SCRUTINY**	
7.1	**Whistleblowing Annual Report** Committee considered a report presented by Roy Lawrence, Head of Culture, Engagement and Communities for oversight, assurance and decision and noting the report covers period 2024-2025 using the format endorsed by Audit and Assurance Committee and Auditors during the first year the report was presented and is a collaborative piece of work with partner organisations and stakeholders. Committee noted the report covers the five key themes and actions that partners are taking to support the workforce and demonstrates a collaborative approach designed to provide the Local Partnership Forum and the IJB with assurance that employer partners are both confident in their individual policies, procedures and practice related to whistleblowing and are working closely together to consider ways in which they can further integrate practice in this area to support the collective workforce. The discussion was opened to Committee members who provided comments and feedback on the report. Questions raised included what was the percentage of people who responded to the iMatter survey; are whistleblowers happy/confident to speak out and are we ensuring we are not being overwhelmed by anonymous malicious complaints? <u>Decision</u> The Committee: 1. Discussed the Annual Whistleblowing Report 2024-25. 2. Noted the Whistleblowing activity in the Partnership over the reporting period and share any thoughts about the findings. 3. Noted the improved performance within iMatter results and increased training uptake across partners. 4. Were assured that the HSCP, NHS Fife, Fife Council and Trade Union and Staff Side are working together to continually improve Whistleblowing work in support of the Partnership.	

	5. Approved the report should progress to the IJB.	
7.2	**Terms of Reference (Annual Review)** Committee considered a report presented by Vanessa Salmond, Head of Corporate Governance for discussion and approval noting that in terms of maintaining a continued focus on governance arrangements, Committee Terms of Reference require to be reviewed on an annual basis to ensure they remain fit-for-purpose. Committee noted that the contents of the Terms of Reference as detailed in appendix 1 should provide assurance to the IJB that Finance Performance and Scrutiny Committee is fulfilling all its statutory requirements on the adequacy and effectiveness of systems of internal control and assurance. Vanessa Salmond drew Committee's attention to p220 of the papers section 3.3 - Assessment and the bullet points therein which highlight areas within the current Committee Terms of Reference whereby no business was transacted throughout 2024/25. These were highlighted during the recent process of preparing the Committee Annual Governance Statement. Clarity and Committee's views were sought in relation to the bullet point • Report to the IJB on resources required to carry out Performance Reviews and related processes. - (item 13 in Remit of Terms of Reference): did this require more clarity / definition around performance review and related processes? What would Committee be expecting to happen? The discussion was opened to Committee members and considerable discussion and debate took place around the statement. Committee agreed the item should remain on the Terms or Reference Remit for now and be re-considered when governance is reviewed again later in the year. Committee also felt that further examination was required to item 4 in the Remit of The Terms of Reference – monitor and scrutinise the use of all resources available to the IJB in relation to the tie up between what the Partnership spends and what it receives not being the same. <u>Decision</u> The Committee: 1. Discussed and reviewed the current Terms of Reference at Appendix 1. 2. Agreed any required amendments to the Committee Terms of Reference.	

7.3	**Review of Short Stay Bed Base in Local Authority Care Homes for Older People** Committee considered a report presented by Chris Conroy, Head of Primary and Preventative Care for discussion and agreement onward submission to the IJB. Committee were provided with an overview of the report and noted that following a review of how the Partnership uses short stay beds in its local authority care homes it was seeking approval to modify the current operating model to better align with interdependent workstreams, resource availability, the needs of the Fife population and reflect the skill-set of its care home workforce with the proposal itself having been developed on intelligence of need across Fife. Committee noted that it is proposed the changes outlined in the report will impact positively on the whole system, make best use of resources, create efficiency savings and improve service delivery both in terms of community access and hospital flow. Committee also noted that the proposed model outlined in table 2 within the report will support equitable access to Community and Hospital Teams working in Social Work and Acute and Primary Care settings. The new model will be aligned to the Home First Strategy and the Prevention & Early Intervention Strategy 2024-27. The model also makes best use of available resources and will generate efficiency savings through fully utilising the capacity within local authority care homes. Significant efficiency savings and potential income can be achieved. After staffing and other costs have been offset against this, the new model can realise at least £280k in efficiency savings as detailed in appendix 1. If the proposed model is agreed, a number of key actions will be taken to ensure that the model is as successful as it can be. The discussion was opened to Committee members and considerable discussion was had on the proposal. Members also provided their comments and feedback on the report. Committee commended Officers on the thought that had gone into the proposal and commented that if the STAR beds are underused it is important to reconfigure to get the best use of the beds across all the different uses and the fact that it could free up space potentially for reinstating some other respite space could only be beneficial. Questions raised included are there ever occasions where having only 12 beds will result in people being delayed from discharge from hospital because there are only 12 or is that something that has been factored in and not likely to happen; has this report and the next report been considered together due to the potential interaction between potential patients either in community hospitals or assessment beds and have the totality been looked at?	

	Officers reminded Committee that the community hospital paper was agreed by the IJB in 2024 and that this proposal was part of the implementation of the community hospital transformation and is one of the pathways that will mitigate the risk that there will be a reduction in community hospital beds. <u>Decision</u> The Committee: 1. Discussed and reviewed the reconfiguration of local authority short stay residential care home beds to better meet demand, current policy context and budget position; and increase assessment bed provision within Fife HSCP ran local authority residential care homes 2. Highlight any changes required. 3. Provided agreement that the report should progress to the Integration Joint Board.	
8.	**STRATEGIES**	
8.1	**Home First Update – Community Hospitals Transformation** Committee considered a report from Chris Conroy, Head of Primary and Preventive Care for assurance and updated detail on progress with regards to the transformation of community hospitals as previously agreed by the IJB in 2024. Committee noted that the community hospital transformation programme aims to transform the community hospital in-patient services by redesigning the community beds provision in Fife whilst enhancing rehabilitation and wider care services that are ultimately delivered in a homely environment or close to home across Fife and whilst doing so will reduce the community hospital footprint as detailed in appendix 1. Chris Conroy highlighted the report provides an update on the detailed plans on the delivery of the programme and Committee noted the reduction of beds will commence in September 2025 with full reduction by January 2026. Committee noted that the overall savings attributed to this would be £1m for this financial year, £2m for full year 2026/27. Projections for 2026/27 are inclusive of approx £800k investment into new models of care of which some of that will be commencing this year but won't impact on the savings projection. Committee were provided with assurance that a clear governance structure and robust communication and engagement plan is in place. The discussion was opened to Committee members and considerable discussion took place around the transformation programme. Members provided their comments and feedback on the report.	

	Questions raised included what is attributed to make this saving; are these transfers and not so much savings; in terms of people how may are we talking about and the refurbishment of Cameron what is the plan and is £100k sufficient? <u>Decision</u> The Committee: 1. Were assured that a clear plan to deliver the ambitions of the Community Hospital Transformation Programme is in place in line with agreement to progress by IJB in March 2024.	
8.2	**Fife Alcohol & Drug Partnership Strategy (Annual Report and Scottish Government Survey 24-25)** Committee considered a report from Lynda Reid-Fowler, Policy Co-ordinator, Fife Alcohol and Drug Partnership for discussion and decision. Committee noted that the documents submitted provide a comprehensive overview of the drug and alcohol service delivery aligned with the Fife ADP Strategy from 24-27and highlight key achievements and on-going challenges and areas for improvement particularly in light of Fife's higher than average substance related mortality rates. Submission supports national planning and funding decisions and informs the ADP workplan 25-26. Committee were asked to approve the submission of the Annual Report and completed Scottish Government survey for the period of April 2024-March 2025. The discussion was opened to Committee members who thanked Officers for a comprehensive and positive report and also acknowledged the good work being undertaken by the Addictions Team. Comments and feedback were given with a query raised in relation to the format of the report and whether this was dictated by Government? A comment was also provided in relation to the figures being reported on drug related deaths in Fife going up in the timeframe covered within the report and down for the rest of Scotland and the need for the IJB / ADP to be ready to explain that good things are being done, meeting all MAT standards etc but still have an issue with drug related deaths. <u>Decision</u> The Committee: 1. Discussed the Alcohol and Drug Partnership (ADP) Annual Report and Scottish Government ADP Survey and indicated any amendments required. 2. Supported the Alcohol and Drug Partnership (ADP) Annual Report and Survey submission to the Integration Joint Board.	

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 30th July 2025.	
10.	**AOCB** Lynne Garvey on behalf of the Committee and SLT thanked Alastair Grant for his Chairmanship of the Finance, Performance Committee over the past two years and wished him all the best.	
11.	**DATE OF NEXT MEETING** • Wednesday 17th September 2025 at 10.00 am via MS Teams	