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

MINUTE OF THE FINANCE, PERFORMANCE & SCRUTINY COMMITTEE TUESDAY 13TH MAY 2025 AT 10.00 AM VIA MICROSOFT TEAMS

Present:
Alastair Grant, NHS Non-Executive Board Member (Chair)
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

In attendance:

Tracy Hogg, Finance Manager HSCP
Avril Sweeney, Manager Risk Compliance
Alan Adamson, Service Manager, Quality Assurance
William Penrice, Service Manager, Performance Management & Quality Assurance
Roy Lawrence, Principal Lead for Organisational Development & Culture
Dafydd McIntosh, Organisational Development & Culture Specialist
Martyn Berrie, Interim Clinical Service Manager
Clare Gibb, External Communications Adviser (Digital)
Gillian Muir, Management Support Officer (Minutes)

Apologies for Absence:
John Kemp, NHS Non-Executive Board Member
Jillian Torrens, Head of Complex & Critical Care
Chris Conroy, Head of Community Care
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 MARCH JANUARY 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	**Finance Update** The Committee considered a report presented by Tracy Hogg, Finance Manager detailing provisional year end outturn as of 31st March 2025 of £34m, noting a favourable movement of £2.973m from the January projected outturn position of £36.9m. Committee noted the main reason for movement was an increase in prescribing of £1.3m offset by additional financial assessment income for care home contributions of £2m and FECV funding and vaccination funding at the end of the year which Scottish Government have allowed to be taken to the bottom line. Tracy Hogg provided Committee with further detail on the main areas of overspend noting these to be GP Prescribing, Mental Health & Psychology, Adult Social Care, Homecare Services and Older People Nursing and Residential. Committee noted in relation to the savings position the Partnership was now reporting at March 2025 to deliver 52% of savings, a value of £20.355m against the £39m approved in March 2024. Committee also noted a reserves balance of £1.72m but no uncommitted balances are available. Tracy Hogg advised that efforts had been made to reduce the overspend position throughout the year, however there was a requirement to implement the risk share agreement which per the Integration Scheme mandates that year end overspends be funded by partners based on the current year allocations to the IJB which is 61% NHS and 39% Fife Council and drew Committee's attention to appendix 2 of the report which provides the detail of the direction. The discussion was opened to Committee members and considerable discussion was had around the financial position and the areas contributing to the overspend. Members provided their thoughts and comments. Questions raised included the RAG status for project lifetime; use of underspends – how can underspends fail to be used; now six weeks into new financial how are things looking?	

	Decision 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 31st March 2025 as outlined in appendices 1-4 of the report. 2. Noted the onward submission to the IJB of the financial monitoring position as at March 2025.	
5.2	**Finance Performance & Scrutiny Risk Register** The Committee considered a report from Avril Sweeney, Compliance Manager provided for discussion and assurance detailing the IJB's strategic risks that may pose a threat to the Partnership in achieving its strategic objectives in relation to financial and performance management. Committee noted that the risk register was last presented to Committee in November 2024 and is scheduled to come twice per year with a deep dive risk review being undertaken in the individual risks four times per year. Committee also noted the risks held on the risk register continue to be managed by the risk owners and were most recently reviewed in April 2025. The risks are presented in order of residual risk score (the score taking into account the management actions that are currently in place as well as timescales and progress with SMART actions). Avril Sweeney drew Committee's attention to six risks with a high residual score and provided Committee with an update on these noting that all six high scoring risks have been subject to a deep dive risk review by the Finance, Performance & Scrutiny Committee and continue to be monitored closely. Committee were reminded that in addition to the risk register there are a number of risks at an operational level within the partner bodies risk systems and these are regularly monitored at the Finance Governance Board and as part of the budget process and actively manged by the relevant service managers and any risks or concerns are being escalated to SLT and to a strategic level if necessary. The discussion was opened to Committee members who provided their comments and feedback on the report. Questions raised included with changes to visas potentially coming into effect for care workers, would this be encapsulated within the workforce section if this did result in any kind of risk/issue? Decision The Committee 1. Noted the contents of the risk register. 2. Discussed the risk register and considered whether any further information was required.	

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 work has been ongoing to improve performance reporting, and this would be the last report presented in this format with the intent to present the new formatted report in the first period of the new financial year. Lynne Garvey updated Committee on SLT's plans to have a four weekly SLT Performance meeting with partners allowing for greater discussion around performance and to recognise any areas which may not be performing as well etc. Lynne Garvey thanked William Penrice and his team for the work undertaken in gathering data and brining into one accessible platform. The discussion was opened to Committee members who thanked officers for their comprehensive report and looked forward to seeing the new look report when presented. Questions raised included the summary of performance on p44 detailing a decrease in externally commissioned care at home services and an increase in internal –was this as a result on making better use of the internal resource and was this still happening; smoking cessation - whether we as a Partnership can be judged on its performance on that; childhood immunisations - how can the Partnership encourage greater uptake and staff absence levels remain high how can the Partnership get to the bottom of this to see where problems are? Officers provided assurance to Committee that work being undertaken with partners to look at staff absence and in particular noted the investment within Fife Council of an Absence Support Team who are currently supporting Care at Home providing expert advice and guidance on how to manage absence. <u>Decision</u> The Committee 1. Reviewed and discussed the report. 2. Took assurance from the work being undertaken. 3. Noted the progression of the report to the Integration Joint Board.	

6.2	**Monitoring of Directions** The Committee considered a report presented by Vanessa Salmond, Head of Corporate Governance providing an update on the directions that are currently open within the Partnership as of today's date. Committee noted two directions were issued last year regarding the medium-term financial strategy and financial plan for 24/25 and remain open until the audit process concludes. Committee also noted the other two directions listed were only issued in March 2025 following agreement by the IJB regarding 25/26 budget. Discussion was open to Committee and questions raised included when does 24/25 direction cease to be a direction; each direction refers to the provisional financial outturn of the partnership as a whole, as we give each partner a sum of money to spend or they spend a sum of money do partners have an individual outturn position? <u>Decision</u> The Committee 1. Noted the current status of the open Directions as per appendix 1. 2. Took assurance that appropriate governance arrangements are being advanced as per the requirements of the Integration Scheme.	
6.3	**Committee Membership** The Committee considered a report presented by Vanessa Salmond, Head of Corporate Governance to advise Members of changes to the Membership of the Finance, Performance & Scrutiny Committee. Committee noted that following a reshuffle of membership within NHS Board, Colin Grieve will stand down from membership of the Committee with effect from 1 April 2025. David Alexander has agreed to the position of Vice-Chair of the Committee. The discussion was opened to Committee with no further questions being raised. <u>Decision</u> The Committee 1. Noted the member transitions as detailed. 2. Gave their sincere thanks to Colin Grieve for his valued contribution.	

6.4	**Mid-year Workforce Update** The Committee considered a report presented by Roy Lawrence, Principal Lead for Organisational Development & Culture providing a mid-year update on the Partnerships Year 3 Action Plan 2024-25 setting out progress on all actions to provide assurance that the Partnership's performance is having a positive impact across a range of areas related to its ability to Plan for, Attract, Employ, Train and Nurture its existing and future workforce. Committee noted the plan sets out how the Partnership will achieve the initial short and medium-term priorities defined in the Partnership's Workforce Strategy & Plan 2022–25 alongside the in-year priorities for 2024-25 agreed by all Heads of Service, Professional Leads, and senior managers in the Partnership in compiling the report. Committee also noted the Workforce Strategy aligns with NHS Fife's Workforce Plan, Fife Council's Our People Matter Strategy, the Fife Population Health & Wellbeing Strategy, and the Scottish Government's National Workforce Strategy. Representatives from all partners have played a key-role in creating this report and are represented on the Workforce Strategy Group, which oversees the creation and delivery of the Strategy and Annual Workforce Plans. Roy Lawrence drew Committee's attention to appendix 2 'Annex A' which has been submitted to Scottish Government following a request to all NHS Boards and Health & Social Care Partnerships. This was developed in collaboration with SLT and Service Managers to ensure compliance with the instructions and template contained in the Government's Directors letter. The discussion was opened to Committee who thanked Officers for a thoroughly comprehensive report. Members provided their comments and feedback. Questions raised included is there a project plan, a mechanism to chart progress etc; how is this monitored on an ongoing basis given the amount of detail that is there? <u>Decision</u> The Committee: 1. Were assured that the work underway to deliver the Year 3 Action Plan provides a wide range of actions to support the Partnerships workforce in these challenging times, co-designed with partnership staff wherever possible, with particular regard to Equality, Diversity & Inclusion and Wellbeing.	
7.	**TRANSFORMATION**	
7.1	**Reconfiguration of Adamson & St Andrews MIU** The Committee considered a report presented by Lisa Cooper provided for assurance and discussion of the progression of recommendations to the IJB to progress with the North East Fife MIU reconfiguration based upon findings from robust evaluations including	

	participation and engagement work and a clinically led options appraisal. Committee noted that the proposal supports key strategic priorities of the Integrated Joint Board, including the Home First and Primary Care strategies, aligns with the national Transforming Urgent Care Programme directed by the Centre for Sustainable Delivery, and contributes to NHS Fife's Population Health and Wellbeing Strategy - Priority 2: Quality of Care and promotes alternative models of care in line with the IJB's Strategic Plan (2023–2026) and the Medium-Term Financial Strategy (2024–2027). Lisa Cooper provided background to the proposal and drew Committee's attention to the details of the robust options appraisal undertaken found in appendices 1 and 2. Committee noted that there are financial savings that can be realised through this new reconfiguration though nominal in comparison to the size of budgets being managed. Lisa Cooper also drew Committee's attention to 3.3.2 Workforce which articulates the risk and models of care and also to appendix 4 an analytical survey which shows how activity is currently managed but also provides assurance around the recommendations and the activity that is being manged can be safely absorbed in the St Andrews model of Care. The discussion was opened to Committee members with considerable discussion being had. Questions raised included what are Committee being asked to approve; would like to hear arguments from wider IJB members particularly those within the Cupar Ward; public transport – how will the public traveling by bus get from the bus station out to St Andrews Hospital; there is a need for greater public education as to how to start process of contacting NHS for help i.e promotion of 111. <u>Decision</u> The Committee: 1. Noted the content of the report. 2. Discussed at length. 3. Recommended the report progresses to the IJB for final decision.	
8.	**STRATEGIES**	
8.1	**Commissioning Strategy Annual Report – May 2025** The Committee considered a report from Alan Adamson, Service Manager, Quality Assurance providing assurance that the Commissioning Strategy 2023-26 is being effectively delivered in line with the Commissioning Strategy Vision and Principles and provides an overview of progress within the delivery actions within the strategy and as first year annual report submitted covers year 1 and year 2.	

	Committee noted that the Commissioning Strategy is identified as one of Fife's Health & Social Care Partnerships enabling strategies within the Strategic Plan 2023-2026 and details its approach to the commissioning of social care services in Fife. Committee also noted the Commissioning Strategy is supported by a working group made up of a number of key representatives across the partnership including Fife Voluntary Action and Scottish Care and meets quarterly to look at the delivery plan on the strategy and take forward any necessary actions. That working group has supported the development of this annual report. The discussion was opened to Committee members who thanked Officers for a comprehensive and informative report providing members assurance of the work being delivered. No further questions or comments were raised. <u>Decision</u> The Committee: 1. Were assured that the Commissioning Strategy 2023 – 2026 is being effectively delivered in line with the Commissioning Strategy Vision and Principles.	
9	**ITEMS FOR NOTING**	
9.1	**Annual Governance Statement / Workplan** The Committee considered a report presented by Vanessa Salmond, Head of Corporate Governance, setting out an overview of the work of the Fife IJB Finance, Performance & Scrutiny Committee and providing assurance to the IJB that adequate governance arrangements relating to the Finance, Performance & Scrutiny Committee are in place allowing the IJB to discharge its duties in line with the Good Governance Framework. Committee noted the Annual Governance Statement was in addition to the IJB receiving a Chairs Assurance Report and minute of each meeting, both ensuring effective scrutiny. The discussion was opened to Committee members who provided their comments and feedback on the report. No further questions were raised. <u>Decision</u> The Committee: 1. Were assured that adequate and effective governance arrangements were in place in the areas under the remit of the Finance, Performance & Scrutiny Committee during 2024-25 to satisfy the IJB.	

10.	**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 May 2025.	
11.	**AOCB** No issues were raised under AOCB.	
12.	**DATE OF NEXT MEETING** • Wednesday 16th July 2025 at 2.00 pm via MS Teams	