People and Communities Scrutiny Committee – Blended Meeting



Committee Room 2, 5th Floor, Fife House, North Street, Glenrothes

Thursday 25 September 2025 - 10.00 am

<u>AGENDA</u>

| | | Page Nos. |
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| 1. | APOLOGIES FOR ABSENCE | |
| 2. | CHANGE IN MEMBERSHIP – committee to note that Councillor Lynda Holton replaces Councillor Ann Verner as a member of this scrutiny committee. | |
| 3. | DECLARATIONS OF INTEREST – In terms of Section 5 of the Code of Conduct Members of the Committee are asked to declare any interest(s) in particular items on the agenda and the nature of the interest(s) at this stage. | |
| 4. | MINUTE – Minute of People & Communities Scrutiny Committee Meeting of 15 May 2025. | 4 – 6 |
| 5. | CAFE INC - SCRUTINY UPDATE – Report by the Head of Communities and Neighbourhoods | 7 – 13 |
| 6. | FIFE HEALTH AND SOCIAL CARE PARTNERSHIP ANNUAL PERFORMANCE REPORT 2024 TO 2025 – Report by the Director of Health and Social Care. | 14 – 141 |
| 7. | CUSTOMER & ONLINE SERVICES ANNUAL SERVICE REVIEW REPORT 2024/25 – Report by the Head of Customer and Online Services | 142 – 169 |
| 8. | REVISED HOUSING ESTATE MANAGEMENT APPROACH -REVIEW OF HOUSING GARDEN FENCING POLICY – Report by the Head of Housing Services | 170 – 172 |
| 9. | HOUSING SERVICES – ANNUAL ASSURANCE STATEMENT AND ANNUAL SERVICE REVIEW REPORT 2024/25 – Report by the Head of Housing Services | 173 – 212 |
| 10. | 2024-25 REVENUE MONITORING OUTTURN – COMMUNITIES SERVICE – Joint Report by the Executive Director Finance & Corporate Services and the Executive Director - Communities | 213 – 219 |
| 11. | 2025-26 REVENUE MONITORING PROJECTED OUTTURN – COMMUNITIES SERVICE – Joint Report by the Executive Director Finance & Corporate Services and the Executive Director - Communities | 220 – 226 |
| 12. | 2024-25 CAPITAL PLAN OUTTURN – COMMUNITIES – Joint Report by the Executive Director Finance & Corporate Services and the Executive Director - Communities | 227 – 234 |

| 13. | 2025-26 CAPITAL PLAN PROJECTED OUTTURN – COMMUNITIES – Joint Report by the Executive Director Finance & Corporate Services and the Executive Director - Communities | 235 – 241 |
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| 14. | 2024-25 REVENUE BUDGET PROVISIONAL OUT-TURN – HEALTH & SOCIAL CARE – Joint Report by the Executive Director Finance & Corporate Services and Director of Health & Social Care Partnership. | 242 – 249 |
| 15. | 2025-26 REVENUE BUDGET PROJECTED OUT-TURN – HEALTH & SOCIAL CARE – Joint Report by the Executive Director Finance & Corporate Services and Director of Health & Social Care Partnership. | 250 – 256 |
| 16. | 2024-25 CAPITAL PLAN PROVISIONAL OUTTURN – HEALTH & SOCIAL CARE – Joint Report by the Executive Director Finance & Corporate Services and Director of Health & Social Care Partnership. | 257 – 261 |
| 17. | 2025-26 CAPITAL PLAN PROJECTED OUTTURN – HEALTH & SOCIAL CARE – Joint Report by the Executive Director Finance & Corporate Services and Director of Health & Social Care Partnership. | 262 – 266 |
| 18. | PEOPLE AND COMMUNITIES SCRUTINY COMMITTEE FORWARD WORK PROGRAMME - Report by the Executive Director Finance & Corporate Services | 267 – 272 |

Members are reminded that should they have queries on the detail of a report they should, where possible, contact the report authors in advance of the meeting to seek clarification.

Lindsay Thomson Head of Legal and Democratic Services Finance and Corporate Services

Fife House North Street Glenrothes Fife, KY7 5LT

18 September, 2025

If telephoning, please ask for:

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Agendas and papers for all Committee meetings can be accessed on www.fife.gov.uk/committees

BLENDED MEETING NOTICE

This is a formal meeting of the Committee and the required standards of behaviour and discussion are the same as in a face to face meeting. Unless otherwise agreed, Standing Orders will apply to the proceedings and the terms of the Councillors' Code of Conduct will apply in the normal way

For those members who have joined the meeting remotely, if they need to leave the meeting for any reason, they should use the Meeting Chat to advise of this. If a member loses their connection during the meeting, they should make every effort to rejoin the meeting but, if this is not possible, the Committee Officer will note their absence for the remainder of the meeting. If a member must leave the meeting due to a declaration of interest, they should remain out of the meeting until invited back in by the Committee Officer.

If a member wishes to ask a question, speak on any item or move a motion or amendment, they should indicate this by raising their hand at the appropriate time and will then be invited to speak. Those joining remotely should use the "Raise hand" function in Teams.

All decisions taken during this meeting, will be done so by means of a Roll Call vote.

Where items are for noting or where there has been no dissent or contrary view expressed during any debate, either verbally or by the member indicating they wish to speak, the Convener will assume the matter has been agreed.

There will be a short break in proceedings after approximately 90 minutes.

Members joining remotely are reminded to have cameras switched on during meetings and mute microphones when not speaking. During any breaks or adjournments please switch cameras off.

2025 PCS 75

THE FIFE COUNCIL - PEOPLE AND COMMUNITIES SCRUTINY COMMITTEE - BLENDED MEETING

Committee Room 2, 5th Floor, Fife House, North Street, Glenrothes

15 May 2025 10.00 am – 11.45 am

PRESENT: Councillors Gary Holt (Convener), Blair Allan, Lesley Backhouse,

Karen Beaton, Ken Caldwell, Alex Campbell, Altany Craik, Peter Gulline, Jean Hall-Muir, Donald Lothian, Lynn Mowatt,

Sam Steele, Jonny Tepp, Ann Verner, Darren Watt and Jan Wincott.

ATTENDING: Michael Enston, Executive Director - Communities, Paul Vaughan,

Head of Communities and Neighbourhoods Service, Zahida Ramzan, Policy Co-ordinator - Equalities, Community Investment, Communities and Neighbourhoods Service; John Mills, Head of Housing Services,

Rob Bowditch, Service Manager - Public and Environmental Protection, Environmental Health (Public Protection) and

Mhairi Mullen, Service Manger (Housing Management Executive), Income Poverty and Private Housing Service, Housing Services; Laura Lowrie, Service Manager (Strategic Development) Social Work

Services and Michelle Hyslop, Committee Officer, Legal and

Democratic Services.

ALSO ATTENDING: Lee Turnock, Local Senior Officer, Des Donnelly, Group Commander and Andrew Galloway, Group Commander, Scottish Fire and Rescue

Service.

188. CHANGE IN MEMBERSHIP

The committee noted that Councillor Karen Beaton had replaced Councillor Alistair Cameron as a member of the committee and welcomed her to her first meeting of the committee.

The committee thanked Councillor Alistair Cameron for his contribution to the work of the committee during his membership.

189. DECLARATIONS OF INTEREST

Councillors Campbell, Gulline and Lothian made transparency statements in relation to item 7 (para 193) as they were landlords in the private sector, however as there were no decisions being made, they remained in the meeting during this item.

190. MINUTE

The committee considered the minute of the People and Communities Scrutiny Committee Meeting of 13 March 2025.

Decision

The committee agreed to approve the minute.

191. VERBAL UPDATE ON AFFORDABLE HOUSING

2025 PCS 76

The committee considered a verbal update by the Head of Housing Services providing an update on Affordable Housing.

Decision

The committee noted: -

- (1) that an updated briefing note on affordable housing and property acquisitions would be issued to members following the committee meeting;
- (2) that an elected member workshop would be arranged in June 2025 to explore further affordable housing and property acquisitions; and
- (3) that a report would be submitted by Property Services to all area committees detailing any property transactions that were not previously reported at area committee.

192. SCOTTISH FIRE AND RESCUE SERVICE LOCAL PLAN 12 MONTHS PERFORMANCE REPORT

The committee considered a report by the Local Senior Officer, Scottish Fire and Rescue Services proving an update on incident information for the period 1st April 2024 - 31st March 2025.

Decision

The committee: -

- (1) noted the progress of the Scottish Fire and Rescue Service across a range of key performance indicators as detailed in the report;
- (2) noted that a workshop would be arranged with elected members to explore further the upcoming public consultation on Scottish Fire and Rescue Service change plans.

193. TACKLING DAMPNESS AND MOULD IN PRIVATE SECTOR HOUSING – UPDATE

The committee considered a joint report by the Head of Housing Services and the Head of Protective Services providing an update on the actions of Housing Services and Protective Services to implement improvement actions in the private rented sector in relation to dampness, mould and condensation.

Decision

The committee:

- (1) considered the progress made to mitigate the incidence of dampness, condensation and mould more effectively in private sector properties;
- (2) noted the delivery of training and re-alignment of staff; and
- (3) noted the progress made on current caseloads and the improved focus on procedures and communications.

2025 PCS 77

194. EQUALITY AND DIVERSITY OUTCOMES PROGRESS 2023-2025

The committee considered a report by the Head of Communities and Neighbourhoods updating members on the Equality and Diversity outcomes for 2023-2025.

Decision

The committee noted the content of the report.

195. FIFE CORPORATE PARENTING BOARD

The committee considered a report by the Head of Children, Families and Justice Social Work Services providing an update on the work of the Fife Corporate Parenting Board (FCPB) and planned developments to improve the Corporate Parenting agenda across Fife.

Decision

The committee noted: -

- (1) the work of the Corporate Parenting Board to ensure that care experienced young people in Fife are supported, with the best offer from their "corporate parents" in order to reach their full potential; and
- (2) the priority areas identified in the Corporate Parenting Plan for 2024-2027.

197. PEOPLE & COMMUNITIES FORWARD WORK PROGRAMME

The committee considered a report by the Executive Director, Finance and Corporate Services asking members to consider the future workplan for the People and Communities Scrutiny Committee.

Decision

The committee: -

- (1) noted the future workplan of the People and Communities Scrutiny Committee:
- (2) agreed that with reference to para 191 (2) above that a workshop would take place in June 2025 to explore further affordable housing and property transactions; and
- (3) agreed that with reference to para 192 (2) above that a workshop would be arranged with elected members and the Scottish Fire and Rescue Service to discuss change plans; and
- (4) noted that the report on the allotment and growing strategy would be submitted to the Cabinet Committee in June 2025 following discussions and agreement at the Cabinet Committee on 1 May 2025.

People and Communities Scrutiny Committee

25 September 2025

Agenda Item No. 5



Café Inc- Scrutiny Update

Report by: Paul Vaughan, Head of Communities and Neighbourhoods

Wards Affected: All.

Purpose

This report presents updates on the improvements and changes from the scrutiny working group reviewing Café Inc - the council's holiday hunger initiative.

Recommendation(s)

It is recommended that committee

(1) Note the work undertaken to implement the improvements and changes from the scrutiny working group on Cafe Inc-the council's approach to addressing holiday hunger.

Resource Implications

The resource implications will be considered in the development of the next stages of Café Inc. The plan for 2025-26 shows that there should be sufficient budget to maintain service.

Legal & Risk Implications

There is an ongoing risk that the project may require further resource in future years with the increased costs from food inflation.

Impact Assessment

There is no requirement for an impact assessment as this are no policy changes recommended – there is standard wording for this in the guidance. Impact assessment will be incorporated into future changes to Café Inc.

1.0 Background

1.1 The People and Communities Scrutiny Committee agreed to establish a working group to undertake further scrutiny of the Council's Café Inc Holiday Food Programme at its meeting in January 2023. The working group comprised of Councillors Goodall, Robb, Gulline, Verner, MacDougall, Caldwell and Clarke. The working group met on four occasions to review aspects of Café Inc and to discuss improvements and changes. This report updates members on the implementation of these changes into the planning and delivery of Cafe Inc during Easter, Summer and October and Festive Holidays during 2024 and 2025.

2.0 Café Inc Delivery During 2024/25

Winter 2024/25 Voucher Distribution

2.1 Following positive feedback from the 2023 festive period, vouchers were issued during the 2024/25 winter holidays. Distribution methods varied, tailored by local area teams to best meet family's needs. Feedback from area teams highlighted families' appreciation, particularly in rural locations with limited access to support services.

Easter 2025 Planning

2.2 Several venue changes were implemented for Easter 2025 and subsequent, future Café Inc delivery. Notable changes included the adoption of Greyfriars Primary School (St Andrews) and Dalgety Bay Primary School. East Wemyss Primary School was unavailable due to extensive building works; therefore, Café Inc was relocated to a community venue. Venues continued to comprise a mixture of voluntary sector and Fife Council facilities. Menus were developed in partnership with Catering Teams and complied with Scottish Government nutritional standards.

Summer 2025 Planning

2.3 Venues for Summer 2025 were largely static, with the inclusion of Donibristle Primary School (Dalgety Bay). East Wemyss Primary School remained closed for renovations. Local area teams prioritised minimising venue changes to reduce disruption and confusion for families. Sixty-one venues operated over the six-week holiday period, combining voluntary sector and council facilities. Staffing was predominantly provided by third sector partners and the Communities Team, with catering staff operating at 20

venues. Catering costs increased by 7%, from £2.85 to £3.05 per meal, effective from the summer break.

2.4 Meal Provision: Easter and Summer 2024 vs 2025

| Area | Easter 2024 | Easter 2025 | Summer 2024 | Summer 2025 |
|---------------------|-------------|-------------|-------------|-------------|
| Cowdenbeath | 8,907 | 7,703 | 26,961 | 18,552 |
| Dunfermline | 3,745 | 1,579 | 5,885 | 3,890 |
| Glenrothes | 4,580 | 3,770 | 18,390 | 11,405 |
| Kirkcaldy | 5,186 | 5,450 | 15,643 | 17,075 |
| Levenmouth | 5,619 | 6,125 | 21,500 | 15,100 |
| North East Fife | 2,519 | 2,601 | 8,039 | 6,349 |
| South and West Fife | 4,149 | 4,464 | 13,327 | 17,084 |
| Total | 34,705 | 31,692 | 109,745 | 89,455 |

Note: Summer 2024 encompassed seven weeks; Summer 2025 comprised six weeks. Summer 2025 figures are provisional and may be subject to adjustment.

Meal Numbers and Budget

2.5 Meal numbers have appeared to stabilise across most areas, averaging approximately 15,000 meals per week during school holidays. Current budget projections for 2025/26 indicate Café Inc remains within its allocated funding.

3.0 Refreshing the Project Aims and Current Position

Awareness Initiatives

3.1 During Summer 2024, Cozy Kingdom distributed thousands of informational postcards within Café Inc lunch bags to raise awareness of their fuel poverty services. Collaborative efforts between Fife Council officers and NHS staff promoted health screening programmes. Additionally, Fife Council Period Poverty pop-up stalls offered reusable and disposable products at various venues. Several venues also hosted family activities to complement these initiatives throughout the Kingdom.

Upholding Dignity Principles

3.2 Dignity principles remain central to Café Inc's delivery, ensuring families have meal choice and involvement in decision-making. A research project, comprising surveys and focus groups, is planned for completion at the end of the October break to gather feedback from families on service improvements and impact.

Communications Strategy

3.3 The Communications Team engaged extensively with both area catering staff and the community development teams to clarify Café Inc's purpose as a holiday meal replacement for children, young people, and their carer(s). Messaging was disseminated via group call text messages, emails, council webpages, and onsite materials. Information packs, including staff guides, posters, and 'Get Help Fife' leaflets, were distributed during Easter, Summer and will continue in October. This is also made available to third sector partners who support the project.

Responding to Demand

3.4 From Summer 2024, recording sheets were introduced to monitor attendance and meal uptake at venues. This tool enables staff to adjust meal volumes promptly, reducing surpluses and reallocating meals to other busier venues as necessary. The data collected assists in future planning and resource allocation.

4.0 Issues and Options

Ensuring Equal Service Standards

4.1 By the end of Summer 2024, 144,450 meals had been served; this reduced to 121,147 in 2025, representing a decrease of approximately 1,000 meals on average per week. The refocus on project aims has contributed to this reduction, enabling the programme to remain within budget while continuing to provide support to families throughout Fife as a replacement to the school meal during holiday periods.

5.0 Conclusions

Project Impact

5.1 Café Inc continues to positively address holiday hunger across Fife, having provided

over 121,000 meals during the Easter and Summer holidays of 2025. The project

effectively supports children, young people, and their carer(s) with the embedding of

the dignity principles and holistic support on offer.

Partnership and Sustainability

5.2 Delivery in partnership with the voluntary sector, catering services, communications,

procurement, sports development, and community teams ensures ongoing support

for families during school holidays. The refocused approach has improved financial

sustainability whilst meeting the needs of families throughout the Kingdom.

Future Evaluation

5.3 Findings from the 2025 research project will be analysed following the conclusion of

October holidays. This will build on data gathered in 2024, enhancing understanding

of Café Inc's impact, user demographics and inform any future changes to the

project.

List of Appendices

1. Scrutiny Working Group – Improvements and Changes

Background Papers

The following papers were relied on in the preparation of this report in terms of the Local

Government (Scotland) Act, 1973:-

Report Contact

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Scrutiny Working Group Improvements and Changes

Reviewing and delivering the objectives and principles of Café Inc

Café Inc aim:

Supporting children, young people and their carers experiencing holiday hunger.

Café Inc Principles

- Universal and free at point of access for children and young people of school age and their carers.
- Based on school meal guidelines and an agreed selection of cold and hot meals.
- Linked where possible to holiday activity provision and to social and welfare support through the developing No Wrong Door approach.
- Cafe Inc provision should be integrated with existing Fife Council and Voluntary Sector provision where possible and appropriate
- Compliant with Health and Safety and supervision guidelines.
- Sustainable.
- Scalable.
- Branded in the same way to ensure consistency across delivery areas
- Linked where possible to holiday activity provision and to social and welfare support through the developing No Wrong Door approach.
- Allowing local resourcing to vary delivery.

Addressing how we deliver a Service of equal standards across Fife

- Continuing consultation with areas to allow a mix of schools, and council and third sector community venues to deliver Café Inc
- Reviewing the balance between venues where the council provides Café Inc and where the voluntary sector provides Café Inc with consideration that high volume areas should be the focus for council delivery and that lower and more distributed volumes should be delivered via community and third sector groups
- Planning ahead for Café Inc delivery on a 24-month basis incorporating annual checks allowing for delivery of the programme funded from the Cafe Inc budget and additional investment from area budgets where agreed locally.
- Promoting venues where other activities were being delivered to support wider benefits along with reducing holiday hunger through access to food.
- Supporting employment and training opportunities through longer-term planning for Café Inc and helping tackle recruitment difficulties.
- Improving communication and marketing of café Inc with better use of communication through schools, local marketing and venue identification.
- Reviewing approach to mitigating holiday hunger at Christmas Holidays.

Improving the quality and choice of meals served through Café Inc. and improving procurement of food for Café Inc.

- The procurement impact of Café Inc should support the council's community wealth building strategy and further exploration should be made of using local suppliers and producers
- A continuation of a mix of hot and cold meals should be served with further development of training for the production and serving of food in venues and

exploration of the investment requirements for equipment to allow safe production and serving of food in communities.

- The quality of food provided should conform to the quality standards for school meals and that voluntary sector organisations involved in Café inc delivery should be encouraged to work to these standards as far as possible
- Menu planning should include the inclusion of drinks for hot, cold, sit-in and takeaway delivery.
- Area budgets can be used to locally enhance menu choices
- Staggered timing of the delivery of Café Inc in communities to be examined alongside alternative delivery approaches including mobile delivery using council vans.
- A lead officer in each area should be nominated to support coordination and delivery.

Evaluation and monitoring of Café Inc

- Including data on food wastage from Café Inc should be considered as part of monitoring and evaluation
- Continuing the survey of those using Café Inc and exploring how more interaction at venues can be used to assist in evaluating Café Inc along with the online surveys
- Assessing unmet need in areas and the gathering of information to show gaps in provision is considered
- Engaging with children and young people in understanding why they do or do not use Café Inc, the benefits they gain from Café Inc and the improvements they would like to see for holiday hunger and holiday provision, and what additional services should be accessible at Café Inc.

People & Communities Scrutiny Committee

25 September 2024

Agenda Item No. 6



Fife Health and Social Care Partnership Annual Performance Report 2024 to 2025

Report by: Lynne Garvey, Director of Health and Social Care

Wards Affected: All.

Purpose

The Annual Performance Report is provided to the People and Communities Scrutiny Committee to provide assurance 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.

Recommendation(s)

The Committee is asked to:

- (1) Note the content of the report and take assurance the Partnership is meeting the legislative requirements highlighted above.
- (2) Comment on the progress made by the Health and Social Care Partnership over the latest reporting timescale 2024 to 2025.

Resource Implications

Not applicable.

Legal & Risk Implications

The Public Bodies (Joint Working) (Scotland) Act 2014 provides the legislative framework for the integration of health and social care services in Scotland. To ensure that performance is open and accountable, Section 42 of the Act obliges integration joint boards to prepare and publish an annual performance report setting out an assessment of performance in planning and carrying out the integration functions for which they are responsible.

Fife Integration Joint Board/Fife Health and Social Care Partnership is required to publish a performance report covering performance over the reporting year no later than four months after the end of that reporting year. Reporting years begin on 1 April annually. For example, a performance report covering the period April 2024 to March 2025 is required to be published no later than the end of July 2025.

This Annual Performance Report ensures that the Partnership meets this legislative requirement.

Further information is available here:

https://www.legislation.gov.uk/ssi/2014/326/contents/made.

Impact Assessment

An Equality Impact Assessment is not required for this report because the Annual Performance Report is retrospective, it does not include proposed changes to policies/services or require review of strategic decisions.

Consultation

No formal consultations have been carried out in the preparation of this report. All of the information provided was collected through discussions with key stakeholders.

1.0 Background

1.1 The Strategic Plan for Fife sets out the vision and future direction of health and social care services in Fife. This includes how the nine National Health and Wellbeing Outcomes for Health and Social Care will be delivered locally along with the six Public Health Priorities for Scotland.

The Annual Performance Report is structured using the nine national health and wellbeing outcomes to emphasise the links between the national indicators and local performance. This approach also enables comparison of performance across multiple years, and across different health and social care partnerships.

The main body of the report focuses on performance during 2024 to 2025, and includes updates and examples of improvements and achievements completed during this timescale. Managers across the Partnership provided narrative, graphs and photographs for their services and teams; these have been combined into 41 separate performance updates/examples.

1.2 The purpose of the Annual Performance Report is to provide a balanced assessment of the Partnership's performance over the period 2024 to 2025 This includes areas of best practice, specific achievements, and performance appraisal in accordance with the national indicators

The required content of annual performance reports is set out in the Public Bodies (Joint Working) (Content of Performance Reports) (Scotland) Regulations 2014 which is available here: https://www.legislation.gov.uk/ssi/2014/326/regulation/3/made.

The Scottish Government have also produced statutory guidance which includes a useful high-level checklist that can be tailored to local requirements. A table is included below which highlights the relevant section and pages in this year's report.

| Guidance | Relevant Page Numbers |
|--|--|
| Consider the support required from LIST analysts to produce the report | Appendix 3 Pages 101-105 |
| Consider the application of the Framework for Community Health and Social Care Integrated Services | Applies to all sections |
| Ensure that the report provides an assessment of the strategic plan | Our Performance Pages 10, and 27-85 |
| Ensure that an assessment of performance in relation to the national health and wellbeing outcomes is included in the report | Our Performance Pages 10, and 27-85 |
| Ensure that the report includes the integration authority's performance against the national indicators (including a comparison between the reporting year and the five preceding reporting years) | Appendix 3 Pages 101-105 |
| Consider the use of wider data, supplementary to the integration indicators, to evaluate progress against the strategic plan | Our Performance Pages 10, and 27-85 |
| Ensure that the annual performance report contains information about the number of significant decisions that have been made outside of strategic planning and the reasons for such decisions | In Fife, all significant decisions are made within the strategic planning process (See Appendix 1 Governance, pages 94-98) |
| Ensure that detail is included on reasons for any review of the strategic plan conducted within the reporting period, whether this resulted in any changes and a description of changes | The Strategic Plan will be reviewed/refreshed in 2026 |
| Ensure the report includes the required information for each locality | Locality Planning Pages 12-16 and 32-34 |
| Ensure the report includes the required detail on any inspections carried out during the reporting year | Inspection of Services Pages 86-87 |
| Reflect on the output from the performance report, evaluating steps to rectify where ambitions are not being met and/or consolidate areas of success | Conclusion Page 93 |
| Consider the publication approach (range of publication formats, potential launch events or presentations, promotion strategy, etc.) | The final report has been circulated to key stakeholders (by email) and published on the Partnership's website (see link below). |

| | An update for Partnership employees has been included in the Director's Weekly Staff Briefing (see link below) |
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|--|--|

The Partnership's Annual Performance Reports are published on the website here: https://www.fifehealthandsocialcare.org/about-us/publications/.

The Director's Weekly Briefing is available here: https://sway.cloud.microsoft/oYD4EDrGSrDq1pl2?ref=email

2.0 Issues and Options

2.1 Not applicable.

3.0 Conclusions

- 3.1 The Annual Performance Report is provided to the People and Communities Scrutiny Committee to provide assurance 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.
- 3.2 The Committee is asked to consider and comment on the progress made by the Health and Social Care Partnership over the latest reporting timescale 2024 to 2025.

List of Appendices

- 1. Annual Performance Report 2024-2025.
- 2. Annual Performance Report 2024-2025 (Easy Read Version).

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www.fifehealthandsocialcare.org



Annual Performance Report 2024-2025





Supporting the people of Fife together



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A message from our Chair

It is a privilege to introduce this year's Annual Report as the newly appointed Chair of the Fife Integration Joint Board. I would like to begin by acknowledging the exceptional leadership of my predecessor Arlene Wood, whose dedication and steady guidance helped steer us through the last three years. Her commitment has laid a strong foundation upon which we continue to build.

We also warmly welcome Lynne into her new role as Director of the Fife Health and Social Care Partnership. Lynne brings a wealth of experience and a fresh perspective to the team at a time when strategic leadership is more vital than ever.

This year has not been without its challenges. The continued local impact of national funding constraints, coupled with the enduring legacy of higher inflation, and the demand for services has placed sustained pressure on our financial position. We have been required to make difficult decisions to ensure services remain resilient.

Workforce challenges have also persisted. Like many across the sector, we face ongoing difficulties in recruiting, retaining, and developing a skilled, motivated, and future-focused workforce. Addressing these issues remains a key priority, and we are committed to creating a culture that supports and values those delivering care and support.

Despite these headwinds, there is much to be proud of. We have made tangible progress in implementing Fife Health and Social Care Partnership's equality outcomes, reaffirming our commitment to inclusive and equitable service delivery. Our integrated working with partners has continued to strengthen, enhancing the coordination and effectiveness of the support we provide to individuals and communities across Fife.

As we look ahead, we do so with a clear sense of purpose and collective responsibility. This report reflects not only the challenges we have faced but also the resilience, innovation, and dedication of our teams and partners.

Together, we will continue to evolve and respond to the needs of those we serve, building a health and social care system that is fit for the future.



David RossChair, Fife Integration Joint Board

Foreword

I am delighted to take on the role of Director of the Fife Health and Social Care Partnership and Chief Officer of the Integration Joint Board. It is a great privilege to step into this position, and I do so fully aware that I am following in the footsteps of two exceptional leaders, Nicky Connor and Fiona Mckay, whose commitment and vision have helped shape the Fife Health and Social Care Partnership into what it is today. Their legacy is deeply appreciated.

Over the past year, we have experienced several senior leadership changes, with more to come later this year. During this time of transition, I want to offer clear assurance that there is a strong commitment to stability, progress, and continuity. Our leadership team—present and emerging—is fully focused on maintaining high standards, providing consistent direction, and ensuring the organisation continues to be well led.

Like many across health and social care, we have faced significant challenges over the past year. The implementation of our Savings Recovery Plan was essential to addressing financial pressures while continuing to deliver high-quality, person-centred care. I would like to extend heartfelt thanks to all our staff who have pulled together, showing resilience, creativity, and a deep sense of shared purpose.

Our workforce remains our most valuable asset. Supporting their health and wellbeing is a key priority. We are committed to ensuring they have the resources and backing needed to deliver the very best care across Fife's communities. The success of our leadership programme and collaborative efforts to recruit and develop the workforce of the future are powerful examples of what we can achieve when we invest in our people.

There is much to be proud of. We've made meaningful progress in advancing our health and social care community model—empowering people to take an active role in improving their own health and wellbeing, reducing illness through healthier lifestyles, and accessing care through more local, community-based services. Our focus on reducing delayed discharges and helping people return home or to a homely setting as quickly as possible is delivering real results.

Our achievements are the result of collective effort. We have an amazing workforce, and we simply could not do what we do without them. Their dedication is at the heart of the difference we make every day in the lives of the people of Fife.

Finally, thank you to the people of Fife for continuing to engage with us. Their voices help shape our services to ensure they meet the needs, both now and into the future. Together, we are building a sustainable, responsive, and compassionate system of care.



Lynne GarveyDirector of Fife Health and Social Care Partnership
Chief Officer, Fife Integration Joint Board

Introduction and Background

The Public Bodies (Joint Working) (Scotland) Act 2014 provides the legislative framework for the integration of health and social care services in Scotland. Every Integration Joint Board in Scotland has to have a Strategic Plan that sets out the vision and future direction of their health and social care services. This includes how the nine National Health and Wellbeing Outcomes for Health and Social Care will be delivered locally. Strategic Plans are reviewed regularly to make sure that they are still relevant to the needs of the area and the people who live there.

Fife Integration Joint Board is responsible for the strategic planning, resourcing, and the operational oversight of a wide range of health and social care services. Over the last year we have worked collaboratively with partners and individuals across Fife to progress the implementation of our Strategic Plan 2023 to 2026, and to deliver the essential, extensive, and transformational improvements set out in our Year Two Delivery Plan. Fife's Strategic Plan can be found here: www.fifehealthandsocialcare.org.

To ensure that performance is open and accountable, Section 42 of the Public Bodies (Joint Working) Scotland Act requires integration joint boards to prepare and publish an annual performance report setting out an assessment of performance in planning and carrying out the integration functions for which they are responsible. You can find copies of our Annual Performance Reports here: www.fifehealthandsocialcare.org.

This Annual Performance Report is structured using the nine national health and wellbeing outcomes to emphasise the links between the national indicators and local performance. This approach also enables comparison of performance across multiple years, and across different health and social care partnerships. The Report highlights some of the improvements and innovations that we have delivered over the last year. It acknowledges the exceptional effort, expertise, and commitment of our employees who strive every day to make a difference, and to positively support you, the people of Fife, to live independent and healthier lives.



Demographics

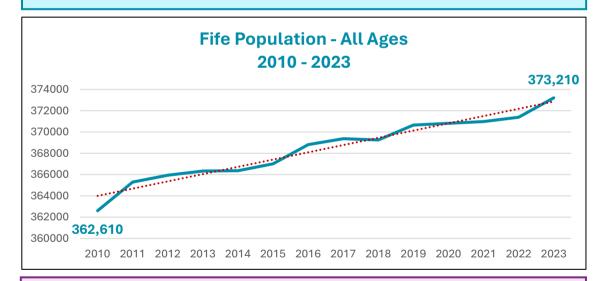


Fife has a population of **373,210**

This is an increase of 2,390 people (0.6%) since 2020. (National Records of Scotland, 2024).

By 2043 Fife's population is expected to decrease to 364,164.

However, only younger age groups are expected to decrease, older age groups will see an increase in numbers.

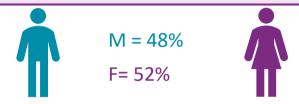


Fife, like Scotland, has experienced a number of decades of steady growth in its population. However, fewer children, fewer working-age adults and more older people (particularly the very old) will have implications for service demand and the cost of providing future public services across Fife.

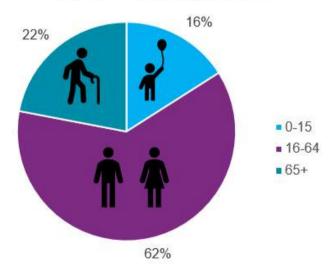
With a life expectancy of 77 years, men in Fife are estimated to live 59 years in relatively good health.

Women are expected to have a longer life expectancy (81 years) and slightly lower healthy life expectancy (55 years).

(National Records of Scotland, 2024).



Population Percentages (2023)



(All data from National Records of Scotland, 2024)

Strategic Plan for Fife 2023 to 2026

Fife Integration Joint Board sets out its vision and future direction for Fife's health and social care services in the 'Strategic Plan for Fife (2023 to 2026), This includes how the nine national Health and Wellbeing Outcomes for Health and Social Care will be delivered locally, along with the six Public Health Priorities for Scotland. The IJB's long term vision is 'to enable the people of Fife to live independent and healthier lives'.

The Strategic Plan has five strategic themes:











These priorities provide a framework for all of the work that we do to support people and communities across Fife. This includes our collaborations with other health and social care providers, particularly our partners in the third and independent sector, and the many thousands of carers who work hard to make a difference every single day. This table links the Partnership's strategic themes to the national Health and Wellbeing Outcomes and the examples provided in this report.

| Strategic Theme | National Health and Wellbeing Outcomes | Relevant Examples in this Annual Performance Report |
|-----------------|--|---|
| Local | 1, 2, 3, 4, 5, 7, 8, 9 | 1, 2, 5, 7, 13, 14, 16, 20, 23, 24, 30, 34, 36, 37, 39, 41 |
| Sustainable | 1, 2, 3, 4, 5, 7 ,9 | 1, 8, 10, 13, 14, 16, 18, 21, 27, 29, 30, 37, 38, 39, 40, 41 |
| Wellbeing | 1, 2, 3, 4, 5, 6, 7, 8, 9 | 1, 2, 4, 6, 7, 8, 10, 13, 14, 15, 16, 22, 23, 24, 25, 26, 30, 35, 39, 41 |
| Outcomes | 1, 2, 3, 4, 5, 6, 7, 8, 9 | 1, 2, 3, 4, 7, 8, 10, 11, 12, 13, 14, 16, 20, 21, 22, 25, 28, 30, 34, 39, 41 |
| Integration | 1, 2, 3, 4, 5, 6, 7, 8, 9 | 1, 2, 3, 4, 7, 8, 9, 12, 13, 14, 16, 17, 19, 20, 24, 30, 31, 32, 33, 34, 36, 37, 39, 40, 41 |

The Strategic Plan is supported by annual delivery plans which provide a framework for the programme of work that is planned and delivered each year. Our Year Two Annual Report was approved by the IJB in March 2025. This report includes an overview of our performance towards the implementation of the Strategic Plan and an update on all of the 77 actions planned for 2024. Overall, the Partnership is making good progress in challenging times, and is on track to implement the strategic priorities set out in the Strategic Plan within expected timescales. There have been some significant changes, both nationally and locally, over the last few years, particularly financial pressures and workforce availability. Therefore, some of the activities that were originally planned have evolved to address new requirements, or they have been replaced with more effective alternatives.

More information on the national outcomes and public health priorities is included in Appendix 2 of this report.

The Strategic Plan for Fife (2023 to 2026), the Delivery Plans and the Annual Reports are all available on our website here: www.fifehealthandsocialcare.org/about-us/publications/.





Locality Planning

The Public Bodies (Joint Working) (Scotland) Act 2014 (the Act) puts in place the legislative framework to integrate health and social care services in Scotland. Section 29(3)(a) of the Act requires integration authorities to work within localities and in Fife we have established seven locality groups which are aligned to the Fife Council local area committees. A focus on locality working is one of our five key themes within the strategic plan. To demonstrate commitment and leadership to locality planning there is a member of Senior Leadership Team (SLT) assigned to support each locality group. There is also a commitment to present an Annual Report to the seven Fife Council Area Committees, proving an overview of locality planning and any joint areas of interest.

The purpose of locality planning is for relevant service providers across different sectors, at all levels (clinical and non-clinical) to come together with people and communities who use services to improve health and wellbeing outcomes. The overarching goals of localities are to:

Promote healthy lifestyle choices and self-management of long-term conditions

Support people to live healthy well independent lives while living in their own home for as long as possible

Reducing the number of avoidable emergency admissions to hospital and minimise the time people are delayed in hospital

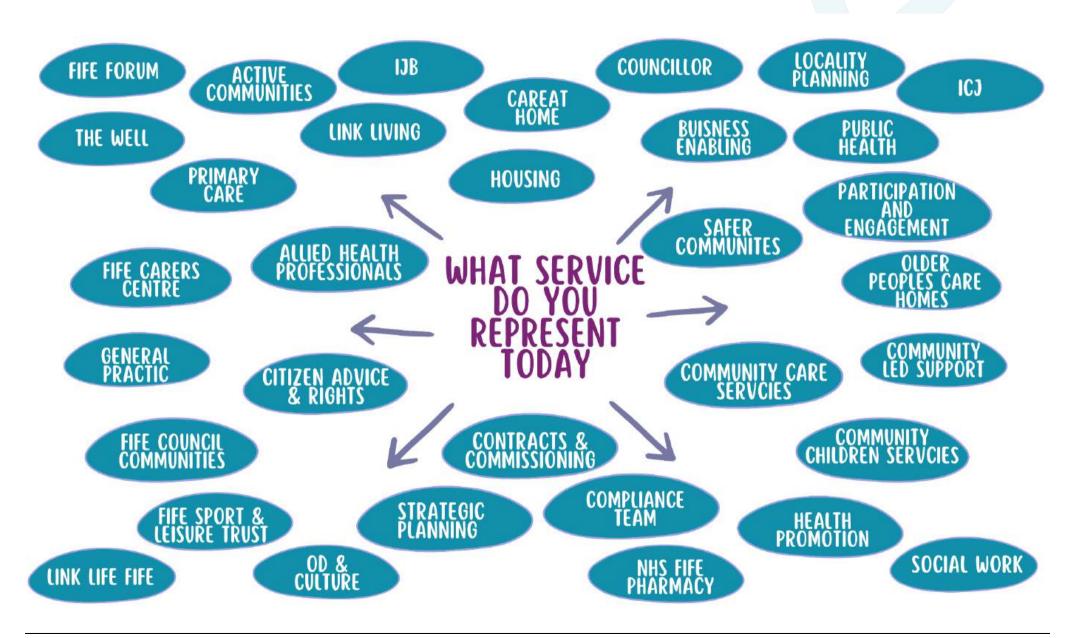
Efficiently and effectively manage resources available to deliver Best Value

Support staff to continuously improve information and support and care that they deliver

Support unpaid carers, to reduce the impact of their caring role on their own health and wellbeing

For more information please contact: hscplocalityplanning@fife.gov.uk.

Who is involved in Locality Planning?



"Making a difference in our communities" - key developments during 2024 to 2025

Locality Planning has gone from strength to strength. Critical to the success has been the collaborative/systems working approach. This has enabled locality groups to play a powerful role in making integration a success across Fife. By applying the insights, experience, and resources the partnership has been able to improve local networks, develop robust, productive professional relationships and improve outcomes. The diagram below highlights areas of work undertaken by locality planning groups in 2024 to 2025.



Highlights from 2024 to 2025

- **Falls Prevention**: A new pathway between Mobile Emergency Care Service and Fife Cares (community safety) led to a 120% increase in referrals, expanding to a Fife-wide service.
- **Unpaid Carers Support**: Over £350k allocated to projects benefiting unpaid carers, with the impact of round one projects currently under evaluation.
- KY **Clubs**: New clubs in Levenmouth, Kirkcaldy, and Cowdenbeath support individuals affected by drugs and alcohol, providing access to vital services.
- Mental Health Response Car: Levenmouth Area Committee funded a Mental Health Response Car to assist emergency services with mental health calls, funded through to June 2025.
- Homelessness Support: The "Ending Homelessness Together" board funded a link worker post in Kirkcaldy, engaging over 80 individuals at risk of homelessness.
- Home First Initiative weekly Primary Care Verification: The Home First test of change, concluded in October 2024, due to the success it is now part of "business as usual."
- Mental Health Training: Glenrothes locality group provided mental health training and resources to support the local workforce.
- Power of Attorney Campaign: A campaign encourages and supports individuals to set up a Power of Attorney.
- **Community-Led Support Service**: Partnered with the Acute Hospital "Waiting Well" initiative, ensuring all patient letters included local support information "The Well".
- **Life Curve Project**: Kirkcaldy Locality Group promoted "ageing well" with the Fife Voluntary Action and Fife Council Housing test of change, showing positive feedback and data outcomes.
- Moving More (physical activity): The Cowdenbeath Locality Planning Group awarded funding to Fife Sports and Leisure Trust to subsidise the cost of attending health classes. This initiative led to a 70% increase in class attendance, encouraging more people to engage in physical activity.

KY Clubs – Bringing services together to support people affected by substance use.

The informal café-style layout and relaxed atmosphere allows people to get a bite to eat, a warm drink and to access food and other provisions. Workers in recovery from substance use host the event and provide support during the café and offer community-based support for people at all levels of need. Other services on offer are:

- Same day access and prescribing for Opiate Replacement Therapy from NHS Fife Addictions Service.
- Blood Borne Viruses (BBV)/sexual health testing and treatment.
- Housing support.
- Specialized family support.
- Wound care.
- Community based mental health support.

Success and roll out:

- Over 60 people have accessed Opiate Replacement Therapy and have started their recovery journey.
- On average, more than 20 people attend each week.
- Two more one stops were developed led by the Fife Alcohol and Drug Partnership Support Team and the Locality Team in Kirkcaldy locality and Cowdenbeath locality where there are higher rates of harm than in Fife overall.
- ADAPT has developed in partnership with women with lived and living experience a one stop shop for women in Methil.

Awards

Leading Women in Care Awards 2025

Alyson Vale, Abbotsford Care (Glenrothes) Ltd won the Leading Women in Care Award.





Baby Friendly Gold Award from UNICEF

NHS Fife Maternity, Neonatal and Community Children's Services have achieved gold standard status.





Health Care Support Worker Award at the Scottish Health Awards Karli Whittle, Dietetic Assistant in the Eating Disorder Advanced Intervention Team won the Support Worker Award.





Scottish Charity Awards 2024Fife Young Carers won **Charity of the Year**

Further information is available here: https://scvo.scot/scottish-charity-awards/previous-winners/winners

Scottish Care Home Awards 2024

Carol Davidson, Bandrum Nursing Home won the Emerging Talent Award.



The Care Home Team at Leven Beach Care Home was a finalist for the **Palliative** and End of Life Care Practise Award.

Benore Care Home was a finalist for the Care Home Service of the Year Award.

Further information on the Scottish Care Awards 2024, and all of the finalists, is available here: https://scottishcare.org/care-home-awards-2024/

Scottish Care at Home Awards 2024

Fife's Care at Home Collaborative was a finalist for the Care Innovation Award.

Further information on the Scottish Care at Home Awards 2024, and all of the finalists, is available here:

https://scottishcare.org/care-at-home-and-housing-support-awards-2024/

National Association of Care Catering Awards Ceremony

The Meals on Wheels Team were runners up at the National Association of Care Catering Awards Ceremony



Professional Achievements

Lynn Barker, Director of Nursing became an



Roy Lawrence, Principal Lead for Organisational Development and Culture becomes a **Chartered Fellow of the Institute of Personnel and Development**



Dr Stephen Fenning, Dr Steinnun Boyce and Dr Joanna Bowden were made Fellows of the Royal College of Physicians of Edinburgh



NHS Fife 2024 Staff Awards

The **Service Improvement and Innovation Award** was won by Sexual Health Fife.



The **Team of the Year (Primary Care) Award** was won by the Community Palliative Care Team – Outreach.



Equality Outcomes

Fife Health and Social Care Partnership is committed to promoting dignity, equality and independence for the people of Fife. As part of the development work for our Strategic Plan we reviewed and updated our equality outcomes. These are our equality outcomes for 2023 to 2026.

- 1. Improved collection and use of equality data, including protected characteristics, to support service planning and delivery, and promote mainstreaming of equality rights.
- 2. Individuals with lived experience of inequality and exclusion will have more opportunities to get involved and share their views, concerns, and suggestions for improvement across the Partnership.
- 3. Increased collaboration with communities and partners that have experience and expertise working with groups that have a protected characteristic, leading to improved health outcomes for individuals, their families and carers.
- 4. Greater diversity and an inclusive workforce culture, with employees from all backgrounds and cultures reporting that they feel increasingly valued.
- 5. Improved understanding and better relations between individuals and groups who share a protected characteristic, and those who do not.

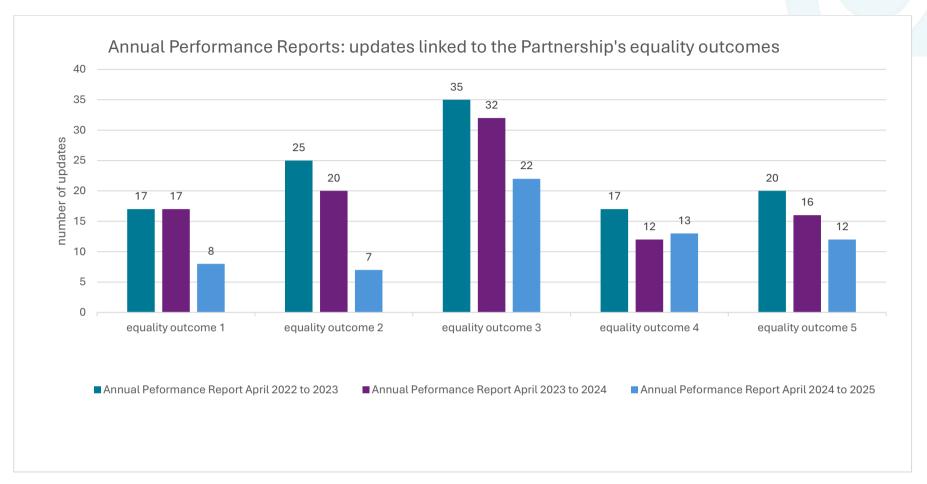


During 2024 a SWAY was developed and circulated to employees via the Director's Briefing to provide support for colleagues who complete Equality Impact Assessments during the development of key policies and strategies, and during strategic planning and decision making. In the last quarter of 2024, a dedicated area for equalities was developed on the Partnership's Website. This area includes all of the Equality Impact Assessments that have been published as well as information about equality, diversity and inclusion. Further information is available here: https://www.fifehealthandsocialcare.org/abour-us/equalities/.

Fife Integration Joint Board published its 'Mainstreaming the Equality Duty and Equality Outcomes Progress Report' in January 2025. This includes updates on the progress made towards achieving the equality outcomes listed above. The full document is available here:

https://www.fifehealthandsocialcare.org/about-us/publications/.

Many of the updates in the Partnership's Annual Performance Reports are linked to the implementation of the Partnership's equality outcomes. This graph highlights the number of updates that support each equality outcome over the last three years. Some updates support more than one equality outcome.



Examples of progress towards the Partnership's equality outcomes that have been included in our Annual Performance Reports.

Our Performance

This section of the Annual Performance Report provides an assessment of our performance over the last year in relation to the National Health and Wellbeing Outcomes for Health and Social Care. Further information on the national health and wellbeing outcomes is available here: www.gov.scot/publications/national-health-wellbeing-outcomes-framework.

In this Report, each of the nine national outcomes is linked to the relevant national integration indicator(s) and includes Fife's performance information for the financial years 2023 to 2024, and 2024 to 2025. The national integration indicators are reported in the Scottish Health and Care Experience Survey commissioned by the Scottish Government. The Survey is run every two years and is sent out by post to a random sample of people who are registered with a General Practitioner (GP) in Scotland. It asks people about their experiences of accessing and using health and social care services. The information collected enables comparisons with different Health and Social Care Partnerships across Scotland, and across different years. Further information on the national integration indicators, including Fife's performance over the last five years is included in Appendix 3.

The performance information for each outcome is supported with some examples and updates on our key activities and achievements over the last year. Some of these updates may be relevant to more than one outcome, they have been grouped under the most relevant national outcome.



Outcome 1: Health and wellbeing are improved

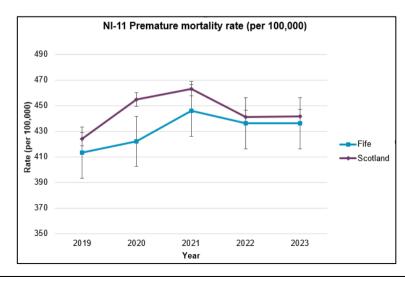
People are able to look after and improve their own health and wellbeing and live in good health for longer.

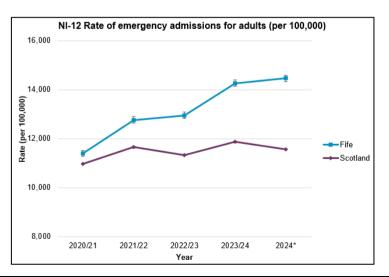
| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|---|-------------|--------|----------|
| NI - 1 | Percentage of adults able to look after their health very well or quite well. | 2023/2024 | 91.4% | 90.7% |
| NI - 11 | Premature Mortality Rate per 100,000 persons. | 2023 | 436 | 442 |
| NI - 12 | Emergency admission rate (per 100,000 population). | 2024 | 14,460 | 11,559 |

NI – 1 Fife is broadly the same as Scotland for *Percentage of adults able to look after their health very well*. In the most recent period (2023/24), Fife's figure was 91.4%, slightly above Scotland at 90.7%

NI - 11 Fife has tended to have a lower rate of premature mortality than Scotland, though this gap has narrowed in recent years. The most recent data shows Fife with a rate of 436 per 100,000, compared to Scotland with a rate of 442 per 100,000, in 2023.

NI – 12 Fife has a consistently higher rate than Scotland for emergency admissions. The rate has generally been increasing in Fife in recent years.





1. Fife Loves Life - Fife Child Healthy Weight Service

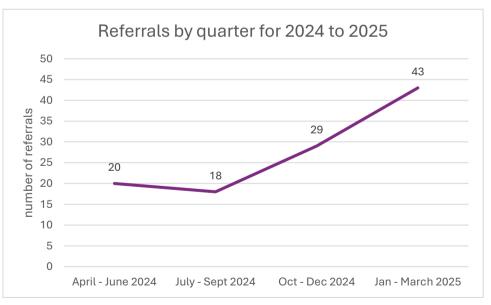
The Fife Loves Life Team supports families to eat well and be physically active.

The Child Healthy Weight Service was established in 2022 with East Region T2 diabetes prevention programme Scottish Government Funding. It supports Public Health Strategy Priority 6: 'A Scotland where we eat well, have a healthy weight and are physically active' and Fife Children's Service priorities within the Children's Services Plan for 2023 to 2026 promoting wellbeing specifically healthy weight and activity.

Overall overweight/obesity rates have remained at a similar level for the past decade, but rates appear to be decreasing in least deprived and increasing in most deprived areas. From the recent data report:

"the proportion of children in the healthy weight category was 76.5% in 2023 to 2024, which is comparable to the proportion in the five years prior to the COVID-19 pandemic (76% - 77%)".

The child healthy weight service continues to support families to eat well and be physically active by providing family focused sessions to support being active as a family and working together to make small healthy behavioural changes. The Child Healthy Weight Service is a team of experienced support workers, dietitian's, physiotherapists and psychologists. We offer self-referral, which aims to remove barriers and improve access to the Fife Child Healthy Weight Service. We have seen a steady increase in referrals over the last year.



The self-referral form can be accessed via our website and completed online, by parents/guardians, and submitted directly to the Child Healthy Weight Service: https://www.nhsfife.org/services/all-services/nutrition-and-clinical-dietetics/infant-children-young-people/child-healthy-weight-service-fife-loves-life/.

Fife Child Healthy Weight Service - referrals by quarter for 2024 to 2025

The NHS Fife Child Healthy Weight Team created a free health and wellbeing app for families across Fife. The Fife Loves Life app was developed in 2022 with lots of information to support children, young people and their families.

Child Healthy Weight psychologists have designed a range of topic specific optional workshops for parents/carers and young people to attend as part of their Child Healthy Weight programme. These can now be accessed via Access Therapies Fife website: https://www.accesstherapiesfife.scot.nhs.uk/how-can-we-help-you/teenager-and-child-groups/child-healthy-workshops/

These workshops cover a spectrum of topics including:

- Selective Eating
- Healthy Choice
- Parenting Tweens
- Emotional Eating
- Best Me, and
- Making Change.

Service users can now access and book onto a workshop via the Access Therapies website. These psychology-led workshops have been implemented and tailored for both parents/carers and young individuals and can be delivered either face to face or online. They cover information and techniques to overcome a range of difficulties seen as barriers to making changes to eating and activity habits and support the promotion of positive mental health.

Early intervention and prevention are vital to establish key messages regarding weight management. In 2024 training was provided to all health visitors across Fife on key nutrients and weight management in pregnancy and the impact of maternal body mass index (BMI), gestational weight gain and breastfeeding on childhood obesity. This training also highlighted the need for good conversations re topics such as weight stigma as well as raising awareness of the Child Healthy Weight Service. This was evaluated very well and is about to be rolled out to Nurture Centres across Fife.

All children and young people who take part in the programme are offered support from Child Healthy Weight Physiotherapy. This may cover assessments for a range of physical issues impacting on fitness and general exercise ability, through to more general support with fitness and building activity into everyday life. 80% of the children we see report an increased level of activity at the end of their active phase within the program.

We work in collaboration with Fife Sport and Leisure to help families access to gym and swim passes, for those eligible, at all leisure centres throughout Fife. In this way we hope the increased level of activity is maintained.



Not all families wish to engage with Child Healthy Weight Service, so the NHS Fife Child Healthy Weight Toolkit has been developed which is a professional guidance document designed to promote consistent, successful use of the local child healthy weight care pathway and support professionals to have conversations with families around diet, activity and other healthy living changes. It aims to enable a consistent set of first line evidence-based messages for young people, children and their families from all services and partner agencies.

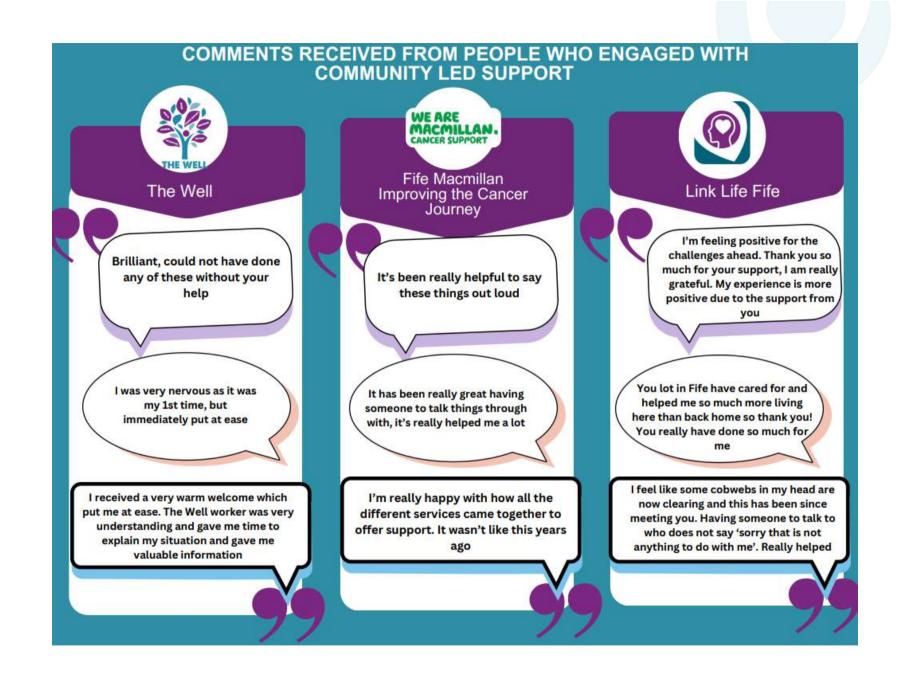
Professionals using the Toolkit are offered training by a Dietician from the NHS Fife Child Healthy Weight Service. This supports best use of the document and allows further discussion regarding how those working with families can engage them in making changes which support lifelong health. We provide ongoing training to a variety of health professionals in the NHS Fife Health and Social Care Partnership, including medical staff, physiotherapists, occupational therapists, health visitors, dental and school nurses and Active Schools.

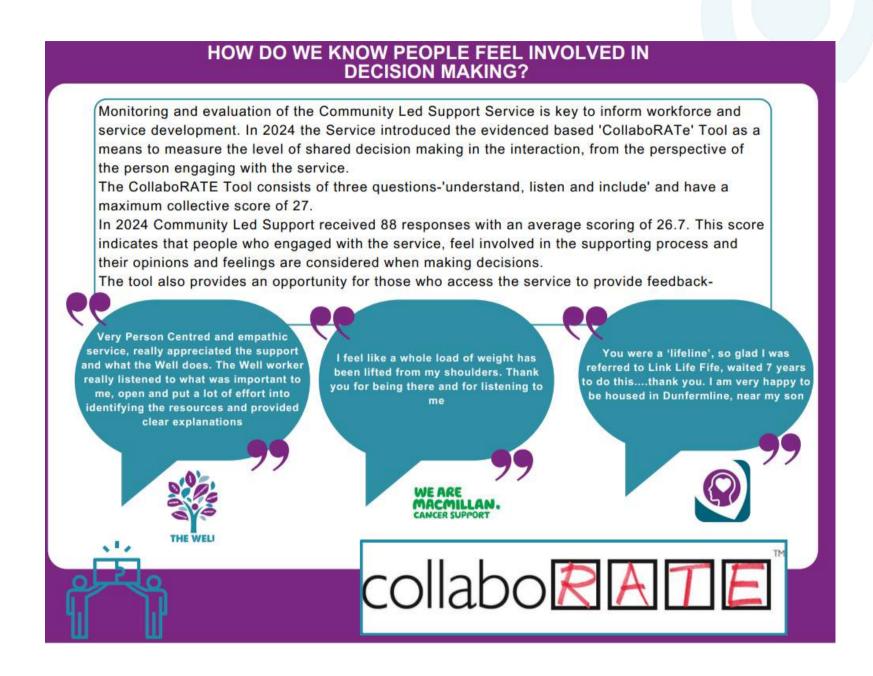
In collaboration with Fife Sport and Leisure Trust and Active Schools, a family fun day was held at Lochore Meadows on Tuesday 23rd July. It involved food sensory activities, wellbeing exercises and physical activity games. The day was deemed a great success, raising the profile of the Child Healthy Weight Service, Fife Sport and Leisure Trust and Active Schools to children and families in Fife.



2. Community Led Support







3. Major Trauma Coordination

In 2024, the Fife Major Trauma Service received 68 referrals. 81% of referrals received were for patients who had sustained major trauma (Injury Severity Score greater than 15) and 19% were for patients who sustained trauma not classified as major trauma. The mean caseload number for the service was 60, the median caseload number was 60 (range 54 to 72), and the mode was 54.

The Fife Major Trauma Service Team carried out their first Major Trauma Rehabilitation Plan Roadshow event in September 2024 at the Victoria Hospital in Kirkcaldy. This education event was hosted and facilitated by the Major Trauma Service Team and included a range of learning activities including presentations and interactive work. The event was aimed at major trauma link therapists and therapists in Fife who frequently complete Rehabilitation Plans. The event provided attendees with the opportunity to:

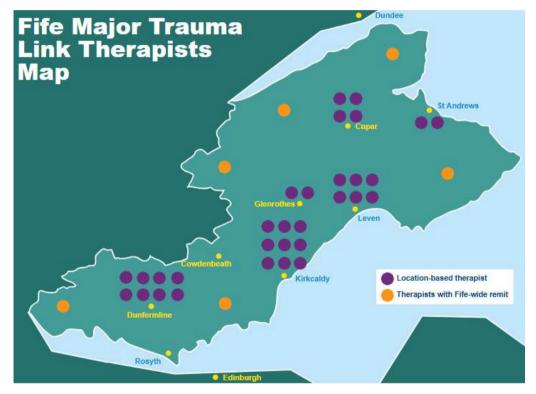
- Hear more about the Scottish Trauma Network and the South East Trauma Network.
- Meet members of the Major Trauma Service Team.
- Learn more about the Rehabilitation Plan (purpose and use in practice).
- Share learning with other therapists involved in the completion of Rehabilitation Plans.
- Participate in a Continuing Professional Development (CPD) activity which meets Health and Care Professions Council CPC Standards 2, 3 and 4.

The event is part of an ongoing quality improvement project with the Fife Major Trauma Service, and preliminary data following the event has been positive and encouraging. A total of 16 therapists, working in services across NHS Fife and the Fife Health and Social Care Partnership, from a range of professions including physiotherapy, occupational therapy and speech and language therapy attended the event. The results showed 38% fewer prompts were required to request Rehabilitation Plans be completed, and 50% fewer corrections were required on the Rehabilitation Plans after the event, when compared with data collected three months prior to the event. Feedback from attendees at the event was very positive and another event is planned for April 2025.



Feedback from attendees at the Major Trauma Rehabilitation Plan Roadshow

The Fife Major Trauma Service Team submitted an abstract to the NHS Scotland Event 2024, entitled 'NHS Fife Major Trauma Service: A Bespoke Model of Service Delivery', which was accepted under the Integrated Care category. Two of our Major Trauma Co-ordinators were invited to participate in a facilitated poster presentation to delegates, providing an opportunity to share innovation and quality improvement work undertaken by the Fife Major Trauma Service, with colleagues across NHS Scotland.



Map showing network of Major Trauma Link Therapists across Fife

You can find more information here: https://my.ltb.io/index.html#/showcase/nhs-scotland-eposters.

4. Intravenous antibiotic treatments at home for patients with diagnosis of Osteomyelitis: Collaborative working with Hospital at Home and Community Nursing Teams

Osteomyelitis is a painful bone infection. It usually goes away if treated early with antibiotics, however it can cause serious long-term problems if it's not treated. There have been 20 patients diagnosed with Osteomyelitis who have been referred to Hospital at Home (H@H) over the last year, 12 of these patients were jointly cared for between the H@H and District Nursing Teams. This has resulted in increased capacity and clinical assessment time for H@H staff for approximately 30 new assessments or 108 hours of patient reviews and intervention by H@H over this time.

This initiative has given staff positive direction and focus and facilitated greater communication and collaborative working across services. There has been positive impact on patients being able to remain at home and avoid hospital admission for task of intravenous (IV) antibiotic treatment.

Patient feedback is being captured in patient questionnaires. Capacity is being released for Hospital at Home Teams to provide more acute clinical assessments and care which maintains individuals at home and provide the early intervention required. By sharing this workload with District Nursing, the District Nurses have enhanced their general nursing skills and ability to support a wider range of patient care activities at home. There is continuous learning from each patient case and as District Nursing Teams complete necessary training this collaborative working will roll out across Fife with all Hospital at Home (H@H) District Nursing Teams, providing an equitable service Fife Wide.

This development has proved successful with the initial implementation to the District Nurses in the Dunfermline and South West Villages and is now being rolled out further.

5. Adult and Older Adult Social Work Locality Teams

Adult and Older Adult Social Work Locality Teams Services are provided across twelve teams, six covering Older Adults (over 65) and six covering Adults (from age 16 to 65). Each of the teams are led by a social work qualified Team Manager and consist of senior practitioners, social workers, and social work assistants. There are three social work qualified Service Managers that lead locality teams. The Principal Social Work Officer provides professional advice and guidance to the teams and professional supervision to all Service Managers. Between 1st April 2024 and 31st March 2025, 263 Personal Outcomes Support Assessments (POSAs) were completed by the Adults Service and 230 by the Older People Service (total 793).



6. Understanding and responding to children and young people at risk of suicide

A multiagency group with representation from Barnardo's, Fife Child and Adolescent Mental Health Service (CAMHS), Child Protection Committee, Children and Families and Justice Social Work, Education Service, Educational Psychology, Health Promotion Service and School Nursing Service worked together collaboratively to update the Our Minds Matter Understanding and Responding to Children and Young People at Risk of Suicide Guidance.

This guidance is for all staff in statutory and voluntary agencies that are working with and supporting children and young people in Fife.

The guidance is available as an online document which can be accessed here: https://www.nhsfife.org/services/all-services/health-promotion-service/suicide-prevention-in-fife/understanding-and-responding-to-children-and-young-people-at-risk-of-suicide/.

An accompanying case study document was also produced and can be accessed from the above link. The purpose of this second document is to support staff to reflect on how they would respond to disclosures of suicidal thoughts or action by young people, and consider their response, as a practitioner or service.

The webpages were published on in October 2024 and the latest analytics taken as of February 2025, show over 1,700 visits to the guidance pages.















Outcome 2: Living in the community for longer

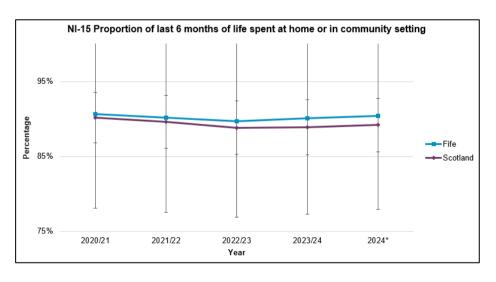
People, including those with disabilities or long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community.

| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|---|-------------|-------|----------|
| NI – 2* | Percentage of adults supported at home who agreed that they are supported to live as independently as possible. | 2023/2024 | 70.0% | 72.4% |
| NI – 3* | Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided. | 2023/2024 | 51.0% | 59.6% |
| NI - 15 | Proportion of last 6 months of life spent at home or in a community setting. | 2024 | 90.5% | 89.2% |

NI – 15 Both Fife and Scotland are very similar for *Percentage of last 6 months of life spent at home or in a community setting*. For the most recent data, 2024, Fife is slightly higher than Scotland (90.5% to 89.2% respectively).

*Please note results for indicators 2 and 3 for 2023/2024 are not comparable to previous years due to changes in survey wording.

Also results for 2019/2020 and 2021/2022 for indicators 2 and 3 are comparable to each other, but not directly comparable to figures in previous years due to changes in survey wording and methodology



7. Development of Moving More for Health and Wellbeing Training

Being active and moving more has lots of positive benefits for health and wellbeing. Staff from across the Health and Social Care Partnership can play a key role in raising awareness of the health benefits of physical activity. To explore this topic Health Promotion and Active Communities led a workshop for the Partnership's Community Led Support Workers in April 2024. This workshop aimed to raise awareness of the health benefits of physical activity, and to discuss opportunities for physical activity in Fife. It also looked at what counts as physical activity and some of the common misconceptions around this. The feedback from participants that attended the workshop was very positive:

Session was helpful Inclusive informed Rethink what physical activity is day to day Very informative Good level of interaction Informal - to the right level Networking Great interactive session

Participants also reported that the training was impacting positively on their practice and how they think about physical activity.

'I think the training was great to help people realise that physical activity and exercise isn't always what people think and can be more basic everyday tasks as well. The training helped me have more knowledge in my own role to link people in with support that promotes their physical health and wellbeing.' The Well Link Worker.

'It was good to highlight the importance of physical exercise, no matter how big or small.' Community Link Worker.

The workshop has now been adapted and a new training session called Moving More for Health and Wellbeing has been developed. This course is available as part of the Health Promotion Prevention and Early Intervention Programme; you can find out more here: https://health-promotion-training.co.uk/

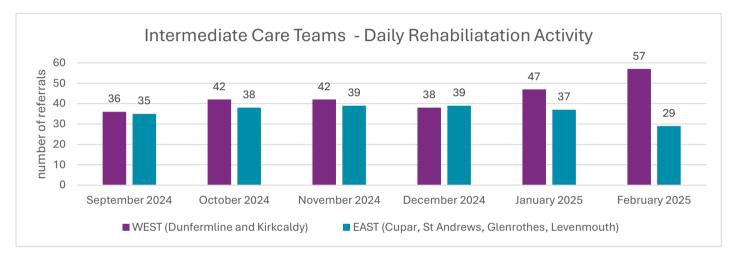
The training will support participants to understand the benefits of movement and physical activity for health and wellbeing, and provide information and knowledge to enable them to support people to be more active. It will allow participants to:

- reflect on the ways we are active and explore perceptions of physical activity.
- raise awareness of the health benefits of physical activity and how moving more can benefit health and wellbeing.
- identify barriers to physical activity and ways of overcoming these.
- explore ways of bringing movement and activity into our day and raising it with the people we support.
- signpost opportunities, services and training in Fife to support physical activity.

Increasing knowledge of staff around physical activity, and increasing awareness of local opportunities for activity was identified as a priority in the Partnership's Locality Plan in Dunfermline and South West Fife localities. An action was agreed by both groups to incorporate the Moving More training session. In Dunfermline a taster session was delivered to the Core Group in March 2025, and in South West Fife a short life working group has been established to support the delivery of targeted training sessions to teams and services across the locality area. This will be taken forward as part of the 2025 Local Action Plan.

8. Fife Intermediate Care Teams: Daily Rehabilitation Activity supporting early discharge and prevention of admission to acute and community hospitals

The key achievements of the daily rehabilitation function of the Intermediate Care Teams are that the Teams achieve consistently high caseloads. Within the West of Fife, the Intermediate Care Teams saw a significant increase in February 2025. The Intermediate Care Teams in the East of Fife have remained more consistent. All Teams have worked extremely hard to ensure there are minimal delays in the flow of patients through the systems including working cross boundaries.





Number of referrals to the Intermediate Care Teams from Victoria Hospital, Kirkcaldy

In regard to supporting discharges from Victoria Hospital, Kirkcaldy within a 24hr period, the Intermediate Care Teams performed to a high standard in achieving this ambition. Over the last 12-month period only 13% of referrals to Fife Intermediate Care Teams were not achieved within the 24hr period due to team capacity. Out of those cases not achieved in the 24-hour period the majority were out with the control of the Intermediate Care Teams.

9. Compass

Compass is a Fife Alcohol and Drug Partnership commissioned service providing a holistic, intensive care management social work service for individuals affected by long-term alcohol and drug use. The service launched in September 2023 and has received 129 referrals between 1st April 2024 and 31st March 2025, with most cases currently allocated and active. Despite full staffing, the service is at capacity with a waiting list. The Team is co-located with the NHS Addictions Service, and works closely with the hospital liaison teams, third sector, housing and health colleagues. The focus on collaboration supports a "team around the person" approach which helps to deliver more personalised experiences and improve outcomes for people supported by the service. The Compass Team are regular attenders at local support groups for people who use substances across Fife and have received multiple messages of positive feedback for adults with lived experience and their families over the 18 months. Going forward, the Team will incorporate critical information from substance use risk assessments, formulation, and information based on the SURE (Substance Use Recovery Evaluation) structured assessment tool and develop a programme of audit activity to support quality assurance oversight.

10. Development and recruitment of Rehabilitation Assistant Practitioner (AP) Band 4 posts for Fife Intermediate Care Teams

The development of Band 4 Assistant Practitioner roles across our Intermediate Care Teams will enhance the current capacity and skill base within the teams to allow patients to flow through the whole system in a timelier manner, impacting positively on the pressures faced in acute and community hospital inpatient services by effecting earlier safe discharge and preventing unnecessary admissions. This in turn assures the home first approach and patients receiving their rehabilitation needs met within their own homes. During 2024 to 2025 we have:

- Secured budget for the new posts through realignment.
- No additional funding was required.
- Amended the existing Rehab Assistant Practitioner job description and achieved approval for this.
- Progressed vacancy management documentation through approval stages to advert.
- Identified suitable applicants.
- Interviews were held in May 2025.



11. Integrated Working

The Adults Social Work Team in Cowdenbeath has been working with an individual who lives alone. The service user has been diagnosed later in life with autism and can display behaviours that often appear aggressive and threatening to a level that made it difficult to identify the correct support services for him. The allocated social worker has been visiting the person twice weekly to support with shopping and welfare. She was joined weekly by a nurse from the Learning Disability Team which enabled them a much deeper understanding through an ecological framework which resulted in understanding the service user's cultural and societal influences. These experiences throughout the adult's life course led to an improved understanding of how the adult copes and understands the world.

Using this relationship based approached the Team have been able to build a relationship and really understand how to communicate with the individual and understand their communication and behaviours enabling the creation of a robust plan for support. This has also resulted in the individual becoming



more relaxed in the presence of others reducing what others may have perceived as threatening and aggressive behaviours while increasing and utilising the service user's skills. This has allowed much deeper insight to ensure any future support is person centred with a view to promote the service users' skills, independence and communication with others.

Outcome 3: Positive experiences of services

People who use health and social care services have positive experiences of those services, and have their dignity respected.

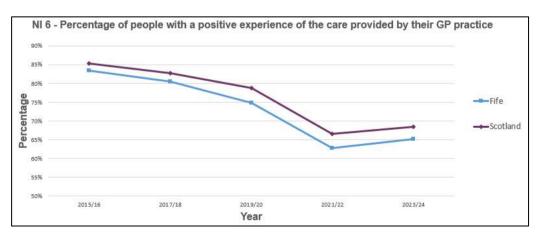
| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|--|-------------|-------|----------|
| NI – 4* | Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated. | 2023/2024 | 53.0% | 61.4% |
| NI – 5* | Total % of adults receiving any care or support who rated it as excellent or good. | 2023/2024 | 63.0% | 70% |
| NI - 6 | Percentage of people with positive experience of the care provided by their GP practice. | 2023/2024 | 65.1% | 68.5% |
| NI - 17 | Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections. | 2024/2025 | 73.5% | 81.9% |

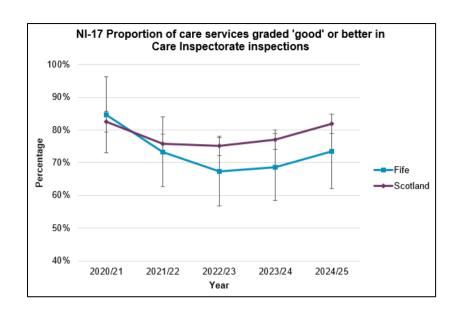
NI - 6 Fife tends to be slightly lower than Scotland for the Percentage of people with a positive experience of the care provided by their GP practice. In 2023/24, the Fife figure was 65.1%, compared to 68.5% in Scotland.

NI – 17 From being graded roughly the same as Scotland in 2019/2020, Fife is now below Scotland for the Percentage of care services rated good or better by the Care Inspectorate. In 2024/2025, the Fife figure was 73.5%, compared to Scotland at 81.9%.

*Please note results for indicators 4 and 5 for 2023/2024 are not comparable to previous years due to changes in survey wording.

Also results for 2019/2020 and 2021/2022 for indicators 4 and 5 are comparable to each other, but not directly comparable to figures in previous years due to changes in survey wording and methodology





12. What Matters to You?

We celebrated What Matters to You Day in June 2024 as a follow up to the sessions delivered by Tommy Whitelaw, Lead for Person Centred Voices, that we had organised across Fife for staff. During these sessions, staff were asked what matters to them and from this we designed a poster capturing their feedback. We visited several health and social care work bases on WMTY day to deliver these posters.

As a follow on from the wider staff sessions, we worked with Napier House Care Home to implement WMTY, encouraging more person-centred conversations, and developing individualised WMTY boards. This worked so well and had such positive responses from staff, residents and their families, that The Health and Social Care Alliance commissioned a film to highlight the success and difference made through a small change.

Further information is available here: www.alliance-scotland.org.uk.

What Matters to YOU?

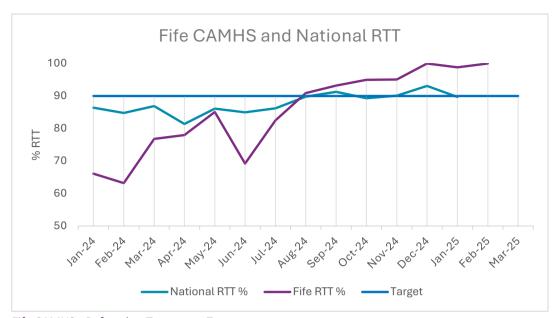


13. CAMHS Referral to Treatment Target (RTT)

Our main aim over the past year has been to meet the Referral to Treatment Target (RTT), to see children and young people as soon as possible without compromising on the quality-of-care children and young people receive in Child and Adolescent Mental Health Services (CAMHS). To achieve this, we have implemented lots of different improvements including:

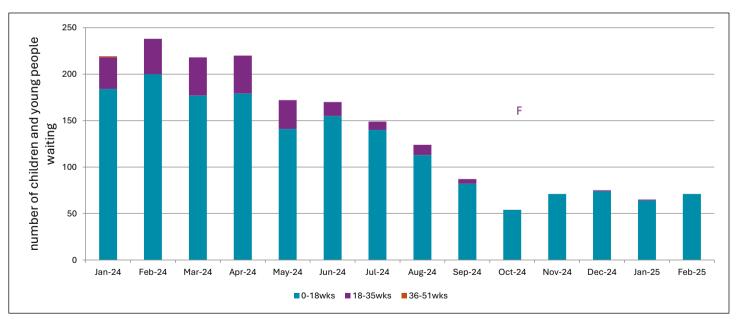
- Offering evening appointments to see children and young people sooner.
- Phoning families coming along for their first appointment to help make sure that children and young people are brought to appointments, and letting families easily change their appointment if needed.
- A solid system for looking at referrals and working out the right support for the child or young person.
- Where CAMHS is not the right service, sending therapeutic letters to families providing reasoning, acknowledging their concerns and direct signposting to appropriate supports to ensure children and young people are offered the right support.
- Where it isn't clear from the information in the referral if CAMHS is the right service, offering a Primary Assessment of Need Appointment (PANA) to provide face to face assessment to work out the most appropriate support.
- Overall, referrals to CAMHS continue to decline, possibly reflecting the early intervention work in the wider landscape and the broader scope of services in schools/community to support children and young people with their mental health.
- Making sure that each clinician has a job plan with the number of new/review clinical appointments each week:
- "Review" appointments are therapeutic interventions/treatment sessions offered following "New" appointments (initial assessment).
- Supporting clinicians to help make sure that the children and young people are discharged at the right time so new children and young people can be seen.
- Improved training opportunities to ensure skills are developed and maintained.
- Support from other CAMHS Teams into Care Experienced Teams to cover vacancies and help manage and contain risk as young people often arrive in crisis with complex issues.
- Early intervention training for the wider workforce to provide skills around manging risk, containment and responding helpfully to children and young people.
- Our group programme for parents/carers is in development to allow sharing of information and strategies that families can use together when
 managing periods of distress, recognising their responsibility in maintaining their own mental health and wellbeing and being able to support others
 around them.

The Scottish Government Referral to Treatment Target (RTT) is that 90% of children and young people should start treatment within 18 of referral to CAMHS. Over the last year Fife CAMHS met the RTT for seven consecutive months.



Fife CAMHS - Referral to Treatment Target

The waiting list for CAMHS has reduced significantly since January 2024, with almost all children and young people waiting less than 18 weeks since June 2024.



Fife CAMHS – number of children and young people waiting for treatment

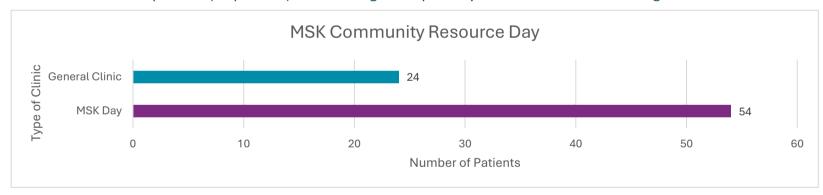
14. MSK Community Resource Day

We have piloted a new approach to musculoskeletal (MSK) interventions within Podiatry and Physiotherapy Services which will support timelier access to services that support early intervention to reduce the impact of the condition on patients' wellbeing. To support patient engagement and outcomes the pilot tested a community-based approach by incorporating various services and resources that promote and support activity, mobility and healthy living.

The following stakeholders were involved at the event, and patients were free to visit each service as required:

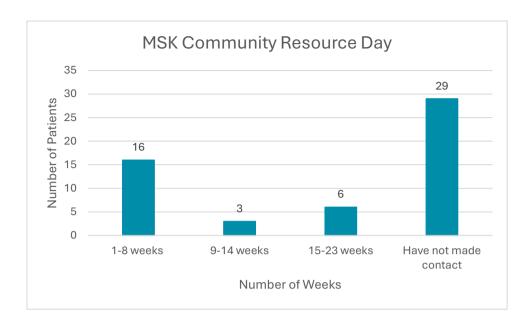
- Fife Community Occupational Therapy
- Fife Sports and Leisure Trust
- Health Promotion
- Occupational Health
- The Wells
- Versus Arthritis

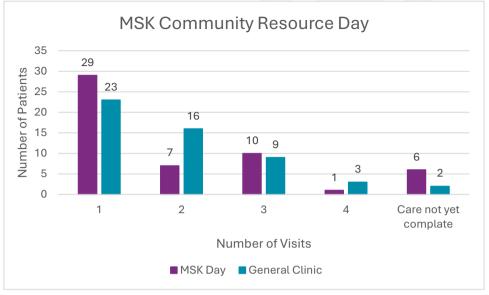
The first pilot session was held in June 2024, and it was very successful. For example, The Podiatry Team were able to see 58 new patients on the day, this is much higher than the number of new patients (24 patients) seen in the general podiatry clinic with the same staffing resource.



Number of new patients seen in general clinic vs. MSK Day with the same staffing resource

Four Podiatry sessions were held throughout the day, with best practice advice given on a range of foot conditions and stretching and strengthening programmes which patients can begin to engage in which will help support and strengthen the lower limb. Footwear advice was also offered. Patients were then advised to implement the advice and contact details provided to arrange an appointment for 8 weeks' time should the person still be impacted by the condition.





Time between attendance at Community Resource Day and face to face consultation

Patient journey through Podiatry – Community Resource Day vs. General Clinic

Building on the success of the first Community Resource Day, a future session is being considered to support waiting times, with adjustments made in line with feedback from staff involved and the feedback received from patients. This will include more focus on one-to-one discussion, whilst still supporting early intervention and self-management. We are also planning sessions in other localities to reduce travel time for patients.

15. Mental Health Officer (MHO) Team

During 2024 to 20255 the Adults Service supervised 195 Local Authority Welfare Guardianship orders and 746 private Welfare Guardianships. To ensure good practice is embedded the service has updated Fife Council Supervision of Proxy Guidance to reflect the Mental Welfare Commission for Scotland's best practice guidance and is developing a governance and oversight group to ensure effective and ongoing monitoring. Feedback from service users on our use of "Just Checking" and "Near Me" to support increased independence has been positive. Key challenges experienced by the service include managing transitions between services and securing appropriate resources for individuals with complex needs. An ongoing commitment to collaboration between Children and Families and Adult Services aims to address this through a "team around the person" approach, building on learning from the national Getting it Right for Everyone (GIRFE) pathfinder work. Improving service user and carer feedback will be central to all practice developments and this is a priority for all services in the coming year.

The dedicated Mental Health Officer (MHO) Team take forward MHO functions in line with the Adults With Incapacity Act (Scotland) Act 2000 (AWI) and the Mental Health Care and Treatment (Scotland) Act 2003. The demand for MHO services is significant and rising, with increasing requests for assessments and a notable rise in emergency and short-term detentions and out of hours detentions where MHOs are not present, all of which pose challenges to the service. Fife have experienced an increase in private AWI Guardianships, with the resulting increased requirement for MHO services placing demand on the team. The MHO Team is strengthening relationships with other social work teams, offering shadowing opportunities, and engagement with new staff to enhance understanding of MHO role and to encourage training. Despite pressures, the MHO Team demonstrates key strengths in performance and professionalism, consistently meeting statutory timescales and handling high demand with a skilled and dedicated workforce. The introduction of Social Work Assistants (SWAs) has enhanced the Team's capacity by supporting practical tasks, enabling MHOs to focus on statutory duties and improving discharge planning. Strong partnerships with NHS Mental Health Services and increased collaboration with other teams have further strengthened service delivery and communication.

Outcome 4: Quality of life is maintained and/or improved

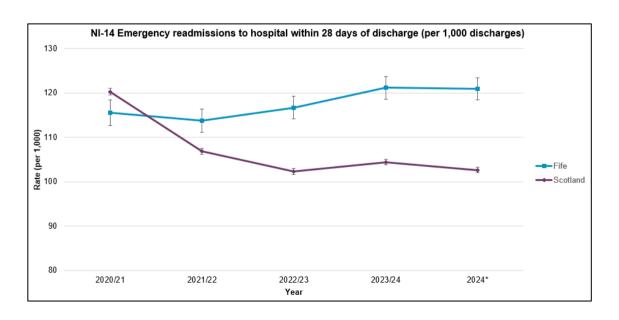
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|--|-------------|-------|----------|
| NI – 7* | Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life | 2023/2024 | 67.0% | 69.8% |
| NI - 14 | Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges) | 2024 | 122 | 103 |

NI – 14 Fife has a consistently higher rate than Scotland for emergency readmissions within 28 days. The rate has increased slightly in Fife in the recent years, though has stayed the same in the most recent data, while the rate in Scotland has tended to fall.

*Please note results for indicator 7 for 2023/2024 are not comparable to previous years due to changes in survey wording.

Also results for 2019/2020 and 2021/2022 for indicator 7 are comparable to each other, but not directly comparable to figures in previous years due to changes in survey wording and methodology



16. CAMHS Parent/Carer Consultation Group

Following the necessary NHS Fife approval, we launched our Child and Adolescent Mental health Services (CAMHS) Parent/Carer Consultation Group in February 2025. The overall purpose of the group is to involve parents and carers in shaping the service, to help us provide the best care for children and young people. The group is an opportunity for parents and carers to share their ideas on how we can do things better in CAMHS. It is also an opportunity for us to get input from parents and carers about how we deliver our services. Communication within the group will be over email, meeting face-to-face or getting together virtually.

Parents and carers can sign up to the group using a QR code, which is displayed on posters in CAMHS waiting areas and in a leaflet sent out with all appointment letters. We are also writing to parents and carers of all children and young people currently being seen in CAMHS, inviting them to become members of the group. Once parents/carers sign up, they are sent a welcome email, which includes the group's Terms of Reference. This document outlines the purpose, aims, governance, and roles and responsibilities of the group.

Once all invitation letters have been sent out, we plan to start engaging with the group. We have already had some ideas suggested, which will be taken to CAMHS management team initially, and then put forward to group members for discussion.



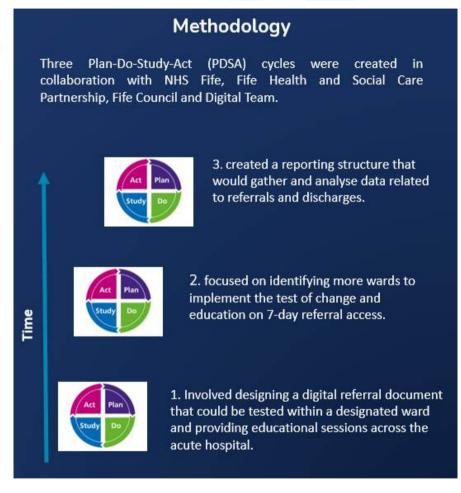
17. Streamlining Patient Transitions: A Digital Referral Initiative

The transition from hospital to home is a critical phase in patient care, often fraught with challenges that can lead to readmissions and compromised patient outcomes. This initiative explored the benefits of implementing a digital referral process within an Integrated Health and Social Care Partnership Discharge Hub aimed at streamlining communication and coordination among healthcare providers, patients, and community resources.

Over the course of the following 12 months, as we expanded our efforts to include additional wards, we observed noteworthy trends in referral patterns. Our analysis indicated a marked increase in the number of referrals received during the weekends, particularly between the hours of 4pm and 8am. This data highlights the significance of weekend referrals as a crucial component of our overall referral process.

Quantitative and qualitative findings demonstrated a notable enhancement in both the accuracy and 24-hour/7-day per week referrals. Staff feedback highlighted increased efficiency, attributed to the digital process. This shift has also provided us with valuable data indicating a rise in our activity levels. Future research will focus on expanding this initiative to encompass the front entrance of the acute hospital and community wards.

"This streamlined process for digital referrals has allowed patients in our ward to be assessed without any unnecessary delay".

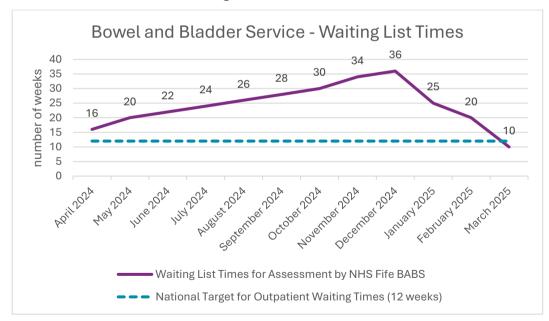


18. Service Improvement

Since initiating our Quality Improvement (QI) methodology, we have made significant strides in reviewing and enhancing our referral process for bladder and bowel services. Our primary goal was to address the extensive 36-week waiting list for patients.

- In September 2024 we initiated a process review to identify any bottlenecks and inefficiencies.
- Our first Plan, Do, Study, Act (PDSA) cycle that involved referral criteria implementation commenced in November 2024. We successfully implemented revised referral criteria, resulting in a more streamlined process that also prioritised urgent cases. For example, after 12 weeks the waiting list for palliative patients had improved to 20 weeks.
- Our second PDSA cycle involved education and training sessions that included collaborating with wider professionals.
- Our third PDSA cycle was to increase the weekly clinics offering online, telephone and face-to-face consultations when appropriate. To date our efforts have effectively reduced the waiting list from 36 weeks to 10 weeks, significantly improving access to necessary care.

The Scottish Government Health Care Standards state that 95% of all patients, should receive their outpatient appointment within 12 weeks of referral. Our Test of Change has successfully seen a reduction from 36 weeks waiting list time to 10 weeks in line with Scottish Government Health Care Standards.



NHS Fife Bladder and Bowel Services – waiting list times for non-housebound community patients



Bladder and Bowel Services

We will continue to monitor and evaluate the impact of these changes, ensuring sustained improvements and responsiveness to individuals needs that will see a reduction to 5 weeks by August 2025.

19. Mental Health Awareness at Work: Health & Social Care Forum

Fife Health Promotion Service, Workplace Team offer free and confidential workforce health safety and wellbeing advice and guidance to reduce health inequalities which in Scotland, are widest in the working age population.

The Health and Social Care Forum identified a training need, and the Workplace Team assisted the Forum to develop an appropriate training session. Thirteen colleagues form local organisations attended the session. This is some of the feedback from attendees:

- 73% (8) said the presentation was 'very good' and 27% (3) said it was 'good'.
- 64% (7) said the activities were 'very good' and 36% (4) said they were 'good'.

" (Awareness of) how my own professional and personal behaviours/habits blurred my own lines/thoughts".

"Good balance between presentation and group work"

" Good awareness and information

Mental Health Awareness at Work

Fife Voluntary Action Health & Social Care Forum



Fife Health & Social Care Partnership

Workplace Team

By the end of this course participants will be able to:

- Define mental health, mental wellbeing and mental illness
- Understand stigma and discrimination
- · Review the mental health continuum
- Realise that the workplace can contribute to/ impact on mental health
- Explore positive steps to mental wellbeing
- Consider the manager/supervisors role in supporting a mentally healthy workplace.

Date: Thursday 12th December 2024

Times: 10:00am 'til 12:00noon

Venue: Fife Voluntary Action Caledonia House,

Glenrothes KY6 2AL



This course would suit managers/supervisors who are interested in exploring mental health & wellbeing and finding out how both can be supported at work.

Book your space to attend by visiting Fife Voluntary Action's <u>Training Portal</u>

20. Building Bridges, Staff Support Project

Fife Health Promotion Service, Workplace Team offer free and confidential workforce health safety and wellbeing advice and guidance to reduce health inequalities which in Scotland, are widest in the working age population. In Fife, we will come together collaboratively and in partnership to support our communities, so they become safe, compassionate, inclusive, and free of stigma.

This initiative was a request from the established Fife Locations of Concern group – bringing together a consortium of professionals working to reduce suicide incidents at public locations. We worked together to develop a Staff Support SWAY and Pathway - tailored to support bridge operatives who witness a high frequency of adverse events at work. We also supported prevention and early intervention through signposting to local and national resources and support.

These are some of the comments received:

"This looks good - really useful resource."

"I think the Pause to Process (pathway) document looks good - the flow is clear, which will be really helpful."

wnich will be really helpful."

You can access the Sway here: https://sway.cloud.microsoft/6fMgwWA55KDfGBAi?ref=Link.



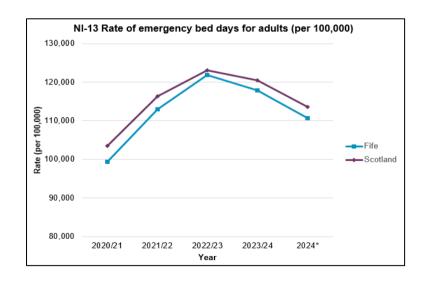
Outcome 5: Health inequalities are reduced

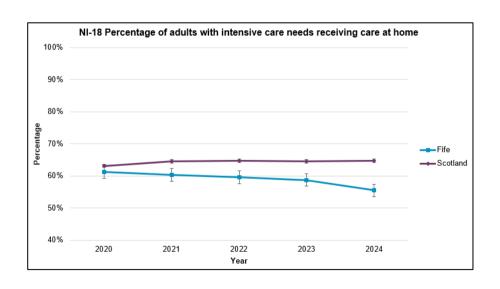
Health and social care services contribute to reducing health inequalities.

| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|---|-------------|---------|----------|
| NI - 13 | Emergency bed day rate (per 100,000 population) | 2024 | 110,688 | 113,627 |
| NI - 18 | Percentage of adults with intensive care needs receiving care at home | 2024 | 55.5% | 64.7% |

NI – 13 Fife has a consistently lower rate than Scotland for emergency bed days. The rate has decreased in Fife in the last two years.

NI – 18 Fife has tended to have a slightly lower rate of adults with intensive needs receiving care at home compared to Scotland, and the gap has been widening in recent years. In 2024, the Fife figure was 55.5% compared to 64.7% in Scotland.





21. Mainstreaming Equalities

In April 2023, Fife Integration Joint Board approved and published its Mainstreaming the Equality Duty and Equality Outcomes Progress Report in accordance with the Equality Act 2010. This report included the new equality outcomes as part of the Strategic Plan 2023 to 2026. To continue to meet the obligations of the Act, Fife Integration Joint Board must comply with a number of specific duties including:

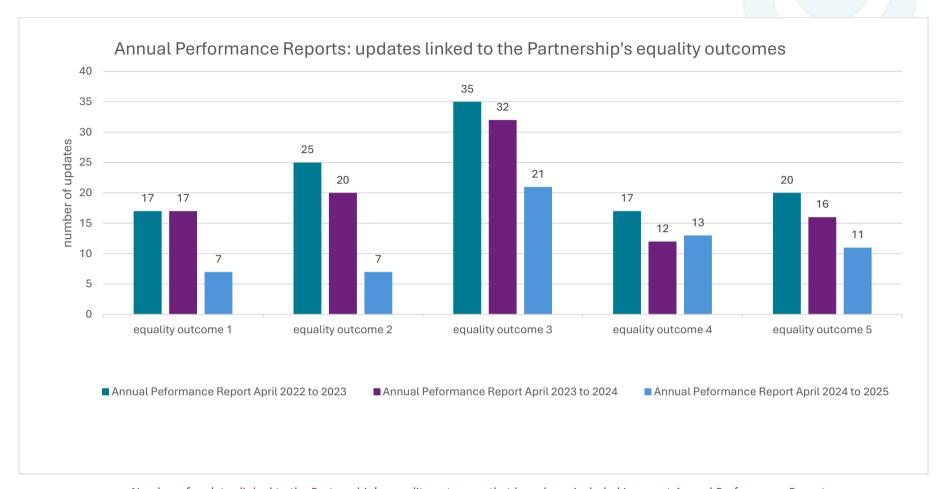
- Publish a report on the mainstreaming the equality duty at least every 2 years.
- Publish a report on the progress made to achieve the equality outcomes at least every 2 years.

The IJB published the Mainstreaming the Equality Duty and Equality Outcomes Progress Report in January 2025, you can find the report here: https://www.fifehealthandsocialcare.org/about-us/publications/.

During 2024 a SWAY was developed and circulated to employees via the Director's Briefing to provide support for colleagues who complete Equality Impact Assessments for key policies, strategies and for decision making.

In the last quarter of 2024, a dedicated area for equalities was developed on the Partnership website. This includes lots of information about equalities, all the published Equality Impact Assessments as well as information about equality, diversity and inclusion: https://www.fifehealthandsocialcare.org/abour-us/equalities/.

Many of the updates in the Partnership's Annual Performance Reports are linked to the implementation of the Partnership's equality outcomes. This graph highlights the number of updates for each equality outcome.



Number of updates linked to the Partnership's equality outcomes that have been included in recent Annual Performance Reports

22. Gypsy and Traveller Education Team (GATE) Practical Cooking Development Programme

The Gypsy and Traveller Education Team (GATE) have been working with teenage girls from the travelling community to provide training and support for a Practical Cooking Development programme. This has included Royal Environmental Health Institute of Scotland (REHIS) Food Hygiene training sessions and building capacity within GATE to deliver practical cooking sessions within the traveller community. Key achievements this year include:

- 5 pupils from GATE passed their REHIS Certificate.
- GATE staff advised that pupils had requested further engagement with food hygiene facilitators on related food work and committed to completing practical cooking training.
- GATE staff agreed to complete competency and become REHIS food presenters, this enables staff to run further practical cooking session moving forward.







23. #ConnectionsCreateHope

Suicide Prevention Awareness Week took place 9th to 15th September 2024. Fife's Health Promotion Service collaborated with partners including Scottish Recovery Network, Samaritans, NHS Fife, Fife Council, Fife Voluntary Action, Andy's Man Club and Families in Trauma and Recovery to support Suicide Prevention Week.





The 2024 campaign #ConnectionsCreateHope took a different approach, focussing on upstream activity to encourage prevention and early intervention. The campaign encouraged people to get involved

and support suicide prevention by carrying out small, simple actions which could make a difference to someone and prevent them from escalating to crisis and distress.

There was also a focus on promoting and raising awareness of peer support. An animated film was produced to explain and support the campaign; you can view the film here:

https://www.youtube.com/watch?v=N5NukA8mgcE&t=8s.

An evaluation report for the campaign was produced and the following key points were highlighted:

Campaign social media posts:

- 936 post impressions (how many times posts were seen).
- 41 post engagements (how many times posts were interacted with).
- 25 post reactions (how many times posts were liked/reacted to).

The Scottish Recovery Network hosted a peer support event, highlighting the importance of peer support in recovery. Fife Voluntary Action were also influential in making this event a local success with 24 people attending the event which took place in September 2024.

Scottish Recovery Network provided this quote:

"The Creating Hope event in Cupar really showed how much willingness and enthusiasm there is in the community to work with mental health services to provide support for those affected by suicide".

73 participants took part in a comprehensive range of mental health awareness training which was delivered across the week in collaboration with partners, through the Health Promotion Training Programme.

Walk and Talk sessions were hosted by partners as part of the campaign activities with the invitation extended to anyone within Fife's communities with no booking process required. Four walks were facilitated and 27 people attended.

24. Food Champion Partnership success

Parents need to understand the impact eating well has on children's health and wellbeing and have the skills to access and prepare nutritious food with any budget. Community partners who work with parents needs to understand the key healthy eating messages and have the skills and confidence to share them in a way promotes healthy behaviours.

Over the last year we have increased our capacity to deliver Food Champion Training and to strengthen the Food Champion Network. The Health Promotion Service, in partnership with Fife Council Community Learning and Development provide Fife Food Champion Training. This includes three days training and includes Royal Environmental Health Institute of Scotland (REHIS) food hygiene, elementary food and health, and how to cook with groups. We have also delivered training to community partners through the Prevention and Early Intervention Training Programme. This included sessions in Touch and Cowdenbeath, with a session in Glenrothes in January plus three bespoke sessions for key groups Fife Young Carers, Rosyth Eats and Westfield Nurture Centre.

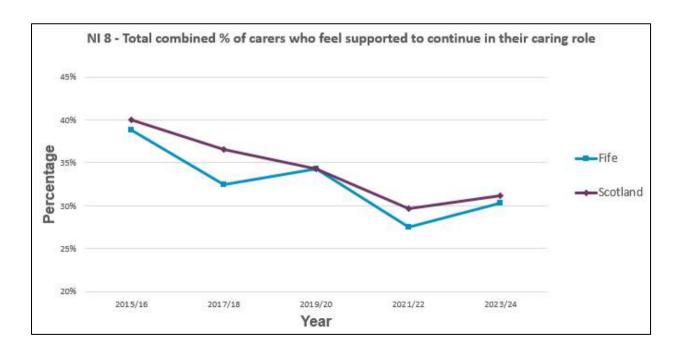


Outcome 6: Carers are supported

People who provide unpaid care are supported to look after their own health and well-being, including to reduce any negative impact of their caring role on their own health and well-being.

| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|---|-------------|-------|----------|
| NI - 8 | Percentage of carers who feel supported to continue in their caring role. | | 30.3% | 31.2% |

NI - 8 Fife shows more variation than Scotland for Total combined % carers who feel supported to continue in their caring role, and is usually slightly lower. In 2023/2024, Fife was lower at 30.3%, with Scotland at 31.2%.



25. Carers Community Chest Fund

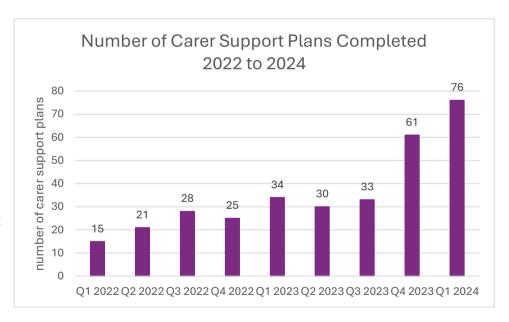
The Carers Community Chest is a recent example of how we are extending the reach, scale and scope of the support available to unpaid carers to meet our carers strategy's main intent. The Carers Community Chest fund is supporting 54 projects in the year with over £400,000 of funding in total. In doing so each of these projects is able to establish new supports in local areas and open the door to hundreds, if not thousands, of carers, giving them the chance to live a positive life alongside their caring role.

Each project has short term funding available to establish itself. In each instance the project will have to secure longer term resources to be able to ensure it continues to have a positive impact in its local area.



26. Carers Support Plans

Fife Health and Social Care Partnership work in partnership with a wide range of third sector commissioned partners to identify and support carers in line with the Carers (Scotland) Act 2016. It is because of this wide range of accessible points for a carer that the Partnership is unable at present to report on the total number of carers supported or the number of Carers Support Plans completed. We are developing ways to collect this information across the wide range of third sector commissioned partners to better understand the impact and quality of our support to carers. The graph below shows the number of Adult Carer Support Plans completed within the Partnership reflecting an increase in Support Plans completed which we attribute to the introduction of 10 Social Work Assistants whose role it is to identify and reach out to unpaid carers.



Number of Carer Support Plans completed - 2022 - 2024

Outcome 7: People are safe

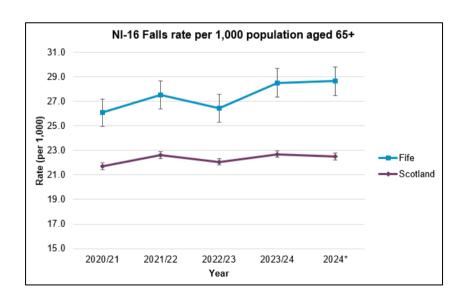
People using health and social care services are safe from harm.

| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|--|-------------|-------|----------|
| NI - 9 | Percentage of adults supported at home who agreed they felt safe | 2023/2024 | 69.1% | 72.7% |
| NI – 16 | Falls rate per 1,000 population (65+) | 2024 | 28.7 | 22.5 |

NI – 16 Fife has a consistently higher falls rate than Scotland as a whole, and follows a very similar trajectory. In the most recent year (2024), the rate per 1,000 in Fife was 28.7, compared to 22.5 in Scotland.

*Please note results for indicator 9 for 2023/2024 are not comparable to previous years due to changes in survey wording.

Also results for 2019/2020 and 2021/2022 for indicator 9 are comparable to each other, but not directly comparable to figures in previous years due to changes in survey wording and methodology



27. Analogue to Digital Transition

We are delighted to confirm that Home Care Associated Services have been awarded the Gold Level One Digital Telecare Implementation Award in recognition of the progress they have made on their analogue to digital telecare transition project.

To achieve Gold Level One status, a Telecare Service Provider must have implemented a fully operational digital alarm receiving centre solution as well as rolling out a live digital telecare service to at least 20% of service users. This is the third major milestone in the analogue to digital transition and lays the foundation for the future of digital telecare.

Fife Health and Social Care Partnership is an integrated care system, working in partnership with NHS Fife, Fife Council, independent care organisations, and voluntary organisations. Their mission is to improve the health and wellbeing of people living in Fife. The Partnership currently has 7,192 community alarm users and covers 66 sheltered housing complexes throughout the region. They offer their services in-house, from mobile assistants and mobile emergency carers to community alarm operators. As part of their analogue to digital telecare transition project, Fife was the first local authority area to go live with a digital Alarm Receiving Centre (ARC) in Scotland. They aim to transition all of their community alarm service users to digital and offer a fully digital service by December 2025.



28. Adult Support and Protection Biennial Report

The purpose of the Biennial Report is to provide assurance in relation to the Adult Support and Protection Committee's work towards supporting the application of the Adult Support and Protection (Scotland) Act 2007 (the Act) and our shared vision to ensure that all adults at risk feel safe, supported, and protected from harm. The Biennial Report provides a degree of statistical data in respect of the characteristics of adults at risk of harm. The report contains a summary of local activity over 2022 to 2024 and how the functions of the Adult Support and Protection Committee were maintained during the coronavirus pandemic, the challenges faced, our response to these and sets out priorities for the future.

Fife Adult Support and Protection Committee (ASPC) has a shared vision that all adults at risk feel safe, supported and protected from harm. The Committee is a statutory body established under section 42 of the Act. The ASPC is the primary strategic planning mechanism for inter-agency adult support and protection work in Fife. The Committee is made up of senior representatives of key agencies who work together to effectively discharge its obligations in respect of policy and practice in adult support and protection matters. Fife's ASPC reports on its work and progress and is accountable to the Chief Officer Public Safety Group. The report highlights our Communication and Engagement Strategy which builds on already impressive work to listen to the voices of those with lived experience and involve those we aim to protect in service design and delivery. The strategy has seen an intensive media campaign aimed at increasing awareness of the types of harm that adults can be at risk from and encouraging reporting. Working in partnership with Kingdom FM the ASPC has initiated quarterly radio campaigns supported by Kingdom FM's social media pages. Whilst the overall impact of such campaigns is hard to assess the hard data of follow up social media hits indicate that the results are on a par with any major local commercial camp. The report contains a range of statistics which the ASPC use as part of their evaluation of trends and to validate our improvement journey. The report looks forward to the current reporting period and the ASPC has recently signed off the committee improvement plan for 2025 to 2027.

Adult Support and Protection Locality Social Work Services lead the coordination and response to all adult support and protection (ASP) activities. During 2024 to 2025, ASP referrals in Fife rose by 26% (from 4,435 to 5,580). These referrals involved 3,173 adults. Multiple factors could contribute to the increase in referrals, including economic challenges, the impact of COVID-19, social care sector issues, awareness campaigns, and improved identification of harm. Partnership working under ASP remains a strength, with awareness raising activity, and shared learning from significant events. Fife took a multi-agency approach to enhancing our ability to consider system learning by commissioning training from Social Care Institute for Excellence (SCiE) for key partners in our ASPC. This work has resulted in improved mutual understanding of role and responsibility, shared decision-making platforms, and reflects the values of all partners in the ASP process.

Case Study

Social Work received a concern report from a partner agency highlighting concern that an adult had provided an inconsistent account of the reason for a physical injury. Due to the adults' physical needs a welfare check was initiated to ensure the adults care needs were being met. The Adults West Locality Team undertook a welfare check and utilised professional curiosity which resulted instantly recognising that the adult was fearful and in need of immediate support to seek refuge from their partner. The Team identified instantly through the adult's behaviour and non-verbal presentation that they were experiencing fear and distress. The Team supported the adult to seek immediate safety by supporting to a place of safety. The Team coordinated an immediate safety plan with multiple partner agencies to ensure the adult was safe and supported. The Team continues to coordinate and collaborate with key agencies a holistic risk assessment and safety plan to support the adult to live free from harm and to ensure their human rights are upheld. The adult described the Team as "life savers," when they arrived to undertake a welfare check at the adult's home.

29. Adult and Older People Social Work Contact Centre

The Adult and Older People Social Work Contact Centre provides a single point of access for new Social Work Service inquiries from both service users and professionals. From 1st April 2024 to 31st March 2025, 2380 referrals were made to the Social Work Contact Centre, the vast majority relating to referrals for assessment of need with significant and increasing contacts relating to Adult Support and Protection (ASP). The Contact Centre plays a key role in promoting early intervention and supporting independence through collaboration with The Well, which offers light-touch support and information to help people connect with local resources. Over the next year the Social Work Contact Centre will be developing a bespoke audit tool and service user engagement approach to assist us in understanding the impact of our interventions at the front door to social work services.

30. Scottish Mental Health First Aid for Fife's Charitable Organisations

Fife Health Promotion Service, Workplace Team offer free and confidential workforce health safety and wellbeing advice and guidance to reduce health inequalities which in Scotland, are widest in the working age population.

The Workplace Team developed a training course to meet the needs of local charities. Twenty-one colleagues from five organisations attended the session. This is some of the feedback from attendees:

- 100% (21) said the course content, presentations and facilitation were 'very good'.
- 71% (15) delegates said the course was extremely valuable to their job with 24% (5) saying very valuable and 5% (1) saying valuable no one noted the course as of little value.

"I loved how the facilitators used participants experiences to enrich the course – they did this very well."

"Very thorough, very understanding, very collaborative".

" Safe space to learn and share".

Scotland's Mental Health First Aid*

A TWO DAY, FREE TO ATTEND course which raises awareness of mental health and wellbeing issues and provides participants with basic crisis first aid skills training.

By the end of this course participants will have:

- An increased knowledge about mental health issues in Scotland
- Increased their skills and confidence in recognising the signs of mental health problems or suicidal thoughts
- The ability to provide initial help and guidance towards appropriate professional help
- · Explored issues around recovery.

Date(s): 28th & 29th January 2025

Times: 09:00 - 16:30

Venue: Room 3/4

Rothes Halls Glenrothes

KY7 5NX

*---



Fife Health & Social Care

*This course would suit anyone who is interested in developing their knowledge and skills in supporting someone with a mental health problem or suicidal thoughts.

*Course content includes sessions on attitudes, recovery, substance use, suicide, listening skills, self harm, depression, anxiety and psychosis.

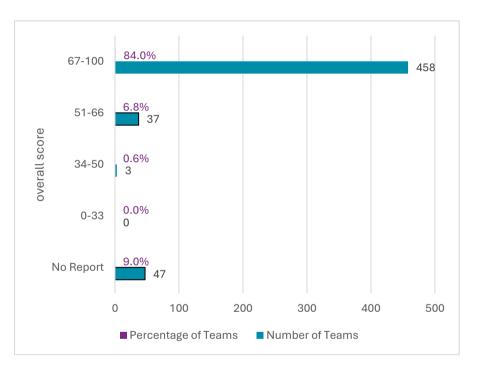
Outcome 8: Employees are supported and engaged in their work

People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.

31. iMatter 2024

We have continued to score higher than national averages in our iMatter results, this included achieving our first score of 90 for the statement 'My direct line manager is sufficiently approachable". In addition, 84% of teams overall scores were in the highest category, (scoring between 67-100) which is our best result for the Partnership on record. Our overall Employee Engagement Index score increased to 78, matching our highest pre-COVID-19 score.

| EEI Threshold | (67-100) | (51-66) | (34-50) | (0-33) | No report | Total |
|---------------------|----------|---------|---------|--------|-----------|-------|
| Number of Teams | 458 | 37 | 3 | 0 | 47 | 545 |
| Percentage of Teams | 84.0% | 6.8% | 0.6% | 0.0% | 9% | 100% |



Fife Health and Social Care Partnership – iMatter scores 2024

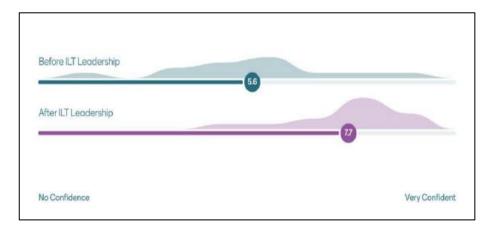
32. Integrated Leadership Team: Leadership Programme

We were pleased to have our 2nd cohort complete this leadership course with monthly sessions from September 2024 to February 2025. We had 15 leaders from across the Partnership complete this course which uses Insights Discovery, a psychometric tool, to support leaders to have a greater awareness of themselves and their team members to improve effective working and adaptability.

As part of the evaluation of the course, we asked participants to sum up their experience of being on this course in one word:

In response to rating their confidence on a scale of 1-10 as a leader within the Partnership, participants confidence increased, on averaged, from 5.6 to 7.7.







Participant confidence scores

ILT Leadership Programme participants

During a debrief with Lynne Garvey, Director of Health and Social Care, and Roy Lawrence, Principal Lead for Organisational Development and Culture, Lynne took the opportunity to present participants with their certificates and congratulate them on completing the course.

33. Insights Discovery Development Sessions

The power of using Insights Discovery Psychometric Tool as part of the ILT Leadership Programme, has generated wider interest across the Partnership. We have supported 129 staff to understand themselves and others better, to improve their leadership skills and to be able to work more effectively in their teams using the knowledge gained from Insights Discovery.



34. Equality, Diversity, Inclusion: Interim Plan and Action Plan

Between April 2024 and March 2025, Fife Health and Social Care Partnership made significant progress in promoting Equality, Diversity, and Inclusion (EDI) to create a more inclusive and supportive working environment. The introduction of the EDI Action Plan 2024 to 2027 provided a clear framework for driving positive change. To support its implementation, an interim work plan was introduced, focusing on strengthening communication, increasing staff involvement, and gathering feedback. In collaboration with the Fife Centre for Equalities, training sessions were delivered, equipping 30 facilitators with the skills to lead interactive EDI activities.

Staff engagement was a key aspect of this initiative. EDI sessions were held at various locations across Fife, with 476 employees taking part. Their insights, collected through surveys and consultations, played a vital role in shaping future actions, ensuring that employee perspectives influenced decision-making. Progress was closely monitored, contributing to the Partnership's achievement of Bronze Level in the Equality Pathfinders Recognition Scheme, with ambitions to reach Silver and Gold.

To further embed EDI principles, the Partnership's Equality Network (PEN) was launched as a staff-led initiative, providing a space for employees, students, and volunteers to share experiences, offer support, and contribute to policy development. This network has been instrumental in fostering inclusivity across health and social care services.

One of the key events supporting workplace neurodiversity was the Neurodiversity Natter, held at Fife Voluntary Action in Kirkcaldy. Organised in partnership with the Fife Centre for Equalities and PEN, the event brought together 56 participants to explore ways of making workplaces more accommodating for neurodiverse employees. Key recommendations included creating sensory-friendly workspaces with quiet zones and adjustable lighting, enhancing communication through clear and patient dialogue, and offering targeted training and mentorship. These insights were shared with the EDI Steering Group to inform future policy development.

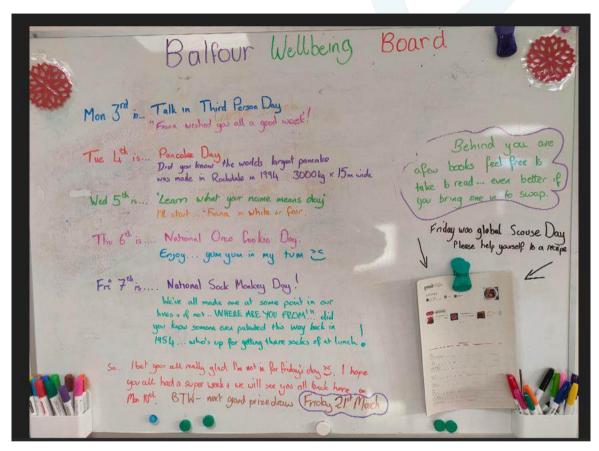
Through these initiatives, Fife HSCP has reinforced its commitment to fostering a workplace where diversity is embraced, employee voices are valued, and inclusive practices continue to evolve to meet workforce needs.



35. Wellbeing Champions within the Integrated Community Teams Portfolio

In October 2024, nine staff from the Integrated Community Teams Portfolio were supported by managers to participate in the NHS Fife Wellbeing Champions Course. This course offers a designed programme of support to help provide participants the evidence from neuroscience, translated into simple, well-tested skills and practical ideas to support their own wellbeing at home and at work, with the specific aim of empowering them to support the wellbeing of their colleagues. The vision for supporting this attendance was then to embed Wellbeing Champions across all sectors of our Intermediate Care Teams Portfolio which includes community hospital in-patient therapy, community setting therapy and Hospital at Home capturing a workforce of over 300 staff. The establishment of biannual meetings with the Champions and Team Managers across the services promotes sharing of ideas and good practice.

This is a sample of the Wellbeing Board that was implemented within the Cameron Hospital Inpatient Therapy Team by their Wellbeing Champion.



36. HENRY

Our workforce requires the skills to engage with parents on the topic of healthy eating, being active, sleep and dental health.

The HENRY approach is a unique and holistic approach of working with families underpinned by the evidence on risk and protective factors for whole-family nutrition, healthy weight and child development. HENRY integrates proven behaviour change models into a supportive and effective approach that increases parental confidence and their ability to provide a healthy start and healthy childhood for their child. The HENRY approach brings together support for parenting efficacy, family emotional wellbeing and behaviour change with information about nutrition, physical activity, oral health and more. Parents and children supported by HENRY become a healthier weight and make statistically significant lifestyle changes which independent clinical trials show are sustained at follow-up. You can find out more about HENRY here: https://www.henry.org.uk.

Over the last year we have increased staff confidence and knowledge on engagement techniques and clear messaging around key topics (healthy eating, being active, sleep and dental health) through training on the HENRY approach. The training was managed by the Partnership's Health Promotion Service and delivered through the Health Promotion Prevention and Early Intervention Training Programme. We now have six colleagues who are qualified trainers, and we have provided training sessions to multiple groups across Fife including:

- early years officers
- community partners
- health visitors
- dieticians
- principal teachers
- nurture teachers.

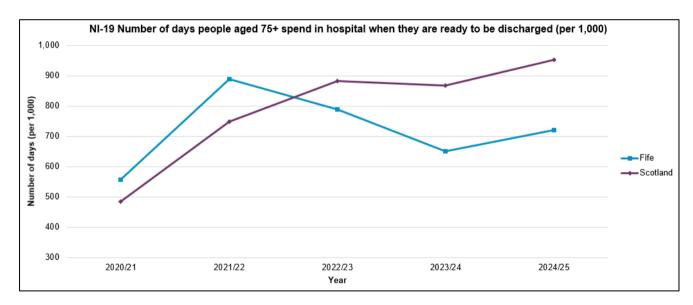


Outcome 9: Resources are used effectively

Resources are used effectively and efficiently in the provision of health and social care services.

| Indicator | Title | Latest Data | Fife | Scotland |
|-----------|---|-------------|------|----------|
| NI - 19 | Number of days people spend in hospital when they are ready to be discharged (per 1,000 population) | 2024/2025 | 720 | 952 |

NI - 19 Fife has a lower rate of days spend in hospital when ready for discharge (age 75+) per 1,000. This was 720 in 2024/2025, compared to 952 in Scotland. However, this is an increase from the previous year in both Fife and Scotland.



37. Climate Change Duties

The Climate Change (Duties of Public Bodies: Reporting Requirements) (Scotland) Order 2015 came into force in November 2015, requiring all public bodies classed as "major players" to submit a climate change report to the Scottish Government by 30 November each year. Integration Joint Boards were first included in the annual reporting exercise in 2016/17. Fife Integration Joint Board (IJB) submitted their climate change report in November 2024. This submission is an opportunity to review climate change action within the IJB and promote continuous improvement. In this report the IJB sets out its top priorities for improvement for the year ahead and these priorities in the 2024 submission were:

- In conjunction with community planning partners continue to support the delivery of Climate Fife (Sustainable Energy and Climate Change Action Plan) 2020 to 2030 and the Climate Fife 2024 Strategy and Action Plan and continue to work closely with partners on the development of the Anchors Strategic Plan.
- Continue to support and promote awareness raising of climate change issues for staff working in the Fife health and Social Care Partnership, making use of accessible training, and learning opportunities offered by partner bodies and others.
- Continue the integrated work of partner bodies which is strengthened by the Partnership's Climate Change Group that convened this year and identify opportunities to work more efficiently and sustainably.
- Monitor actions and outcomes aligned to the delivery of the Strategic Plan 2023 to 2026, including those within the supporting strategies, which promote co-benefits with climate change strategies.
- Continue to review the information received in reports and business cases, in relation to climate change impacts, and highlight the benefits or positive impacts on climate change strategies.

A review of the environmental/climate change impacts highlighted within reports submitted to committees during the period September 2023 to August 2024 showed 42 extracts. This is a substantial increase compared to 13 extracts in the previous year and highlights that there is an increased awareness of climate change across the Partnership.

To ensure compliance with our statutory duties and to monitor progress of our priorities Lisa Cooper, Head of Primary and Preventative Care Service now leads on climate change and chairs the Partnership's Climate Change Group which has representation from partner organisations.

Next steps for the Climate Change Group include:

- Develop and monitor a workplan for duties associated with climate change.
- Work to raise staff awareness of responsibilities in relation to climate change through the development of a communication and engagement plan.
- Identify and promote available training. Dates have been arranged for Carbon Literacy training for Partnership employees in October/November 2025.



38. Learning and Development

The Health and Social Care Partnership is committed to continuous learning and development across all services. For example, the Adults and Older People Social Work Teams hold monthly protected learning days for staff. This year, 20 social work staff completed post-qualifying courses such as Adult Support and Protection (ASP), Dementia Postgraduate, Leadership and Management, MHO, Practice Educator, and Advanced Social Work courses. The introduction of a new supervision approach, which prioritises learning and development, has been well received. Additionally, the service provided placements for 13 social work students in 2024 to 2025, three of whom joined the workforce in permanent roles.

39. Risk Management

Since April 2024 the Integration Joint Board Strategic Risk Register, which was reviewed in line with the Strategic Plan 2023 to 2026, remains current. Work will continue to ensure the Risk Register remains as up to date as possible, taking into account external factors, financial planning and progress on the delivery of the Strategic Plan.

The delivery plan supporting the Risk Management Policy and Strategy was originally agreed in March 2023. The plan has a total of ten actions and seven of these are now completed, although further improvement work on two of these is continuing. Of the three outstanding actions we are aiming to complete these in 2025 to 2026.

Relevant key performance indicators are aligned to SMART control actions on all strategic risks to provide assurance that these are effective and improving the management of these risks. A deep dive risk review process has been developed and agreed by the governance committees. This aims to provide members with assurance that risks are being effectively managed within the agreed risk appetite and tolerance levels. Currently ten of the thirteen strategic risks have undergone a deep dive risk review, and a review of the process has highlighted that there has been improved understanding and learning through this process.

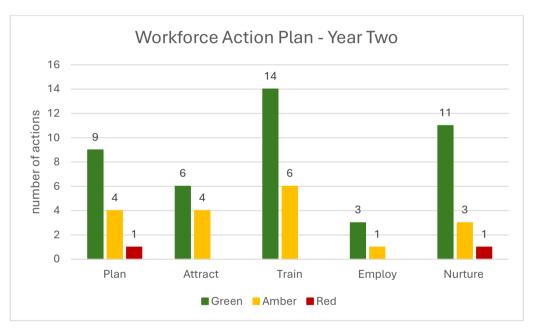
In May 2024, following consultation across the Partnership, including sessions at the portfolio Quality Matters Assurance Groups, members approved the following documents supporting the IJB Risk Management Policy and Strategy:

- IJB Risk Reporting Framework
- Risk Management Process and guidance
- Risk Management Training Resources

The Operational Risk Working Group is currently looking at the development of further training resources linked with a feedback loop for staff to highlight areas where additional support is required. In addition, a Risk Maturity Model has been developed with engagement through the Partnership's Extended Leadership Development Session in February 2024 and a base line assessment will be presented to Committee in 2025 to 2026.

40. Workforce Strategy: Year Two

The Workforce Action Plan for Year Two is structured around the Scottish Government's 'Five Pillars', demonstrating how the work done over 2023 to 2024 aligns with these key areas of workforce improvement. These actions are also set alongside new workforce priorities, our Year Three Workforce Action Plan 2024 to 2025. These were identified by the Partnership's Operational, Professional and Business Enabling services in collaboration with NHS Fife and Fife Council key workforce partners, our third and independent sectors, our Trade Unions and staff-side leaders and Fife College, through our Workforce Strategy Group and a huge range of meetings and individual conversations with key stakeholders over the course of 2024. This summary provides an overview of the priority actions agreed in November 2023 and the progress to date.



Workforce Action Plan - progress on the actions planned for 2024

The actions completed have achieved an overall rating of 67% with the remaining 33% carrying forward to Year Three.

Career events

Events to attract people to explore careers in the Partnership saw many people attend throughout the year.

In December 2024, NHS Fife Medical Education and the Organisational Development and Culture Team, welcomed 65 pupils in S4 to S6 from Fife secondary schools who have an interest in becoming doctors. The events took place in December 2024 at the education hubs in Queen Margaret Hospital and Cameron Hospital. The aim of the day was to increase awareness of medicine as a potential career option for young people from Fife schools where widening access may apply.

'It was fantastic to inspire these young folk to consider a career in medicine and all the sessions worked really well towards that. The pupils came up with some really interesting questions for the Q&A sessions, and all of the staff involved were very enthusiastic and encouraging. The feedback from the pupils confirmed that they left the event significantly more likely to apply for medicine. Hopefully this can become a regular annual event going forward." Consultant Physician.



In March 2025, over 70 pupils in S2 and S3 from Fife high schools enjoyed a half day at the Education Centre, Queen Margaret Hospital, in Dunfermline. where they had first-hand experience of what it is like to work in the NHS and the Health and Social Care Partnership to support them to consider a future career or influence their subject choices for further study or employment. The event aims to attract and inspire young people about a career within health and social care whether that is to understand the career pathways that exist for school leavers or an insight into careers that require further education.

The Fife Care Academy with Fife College is a model tasked to provide a coordinated approach to the benefit for the Partnership to counter supply and demand concerns as well as sourcing a range of funding options only available via the college sector, creating a level playing field across the integrated partners. In November 2024 and March 2025, the Academy hosted care specific career events with both events combined drawing 500 people to meet over 30 different independent and third sector employers. Social work and social care leads in Fife Council and nursing services in NHS Fife attended as well. These events will be an annual feature now.

The Care Academy with Fife College continues to grow in strength with a number of opportunities to access learning in ways that reflect the employer's needs and the workforce ambitions. This year there have been significant investment made available to our workforce including:

- 150 funded places made available on the Professional Development Award in Technology Enabled Care (TEC).
- The HNC Social Services course, delivered online and recognised as a registered qualification by the SSSC for practitioners.
- Over 60 public funded places on the SVQ 2 advanced certificate programme to support our regulated workforce and apprentices gain a qualification recognised by the SSSC.

The Assistant Principal, Fife College commented, "The collaboration between Fife Health and Social Care Partnership and Fife College has led to the creation of the Fife Care Academy. As a collaborative, we feed in info from industry and work together to shape the courses we offer that best suit sector need. Since inception, the Care Academy has introduced newly funded models of learning that suit the ever-changing demographic of learners and reflects the changing needs in the sector including evening, blended and online learning".





Kings Trust

In November 2024, seven young people from across Fife celebrated completing a four-week health and social care programme with The King's Trust and the Fife Health and Social Care Partnership. The Get into Health and Social Care Programme aims to supports young people, aged 16 to 30, get into jobs, education, and training, with a focus on the health and social care sector. The programme helps young people to build their confidence, teamwork and other key employability skills, as well as more sector specific skills including team building, a skills and values workshop, a wellbeing and resilience workshop, interview support and mock interviews, a Child and Adolescent mental Health Services (CAMHS) mental health workshop, and a variety of industry work placements for each young person.

This is the fourth iteration of the programme running in Fife, which began in 2022, with 30 young people being supported in that time. Of those young people, roughly 80% have gone onto get a job or go into further education off the back of the programme.

The Youth Development Lead at The King's Trust, said: "I'm incredibly proud of the hard work this group of young people have put into completing this programme and how far they have come over the four weeks. It has been a great pleasure to work with our incredible delivery partner, the Fife Health and Social Care Partnership, who have been excellent from the very first programme. These programmes are so beneficial for young people in Fife, and we wouldn't be able to do it with them."

Lynne Garvey, Director of Fife Health and Social Care Partnership said: "I would like to congratulate everyone involved in this fantastic initiative. This programme offers young people a valuable opportunity to build confidence and develop essential skills, and for some, it provides a pathway to a career in health and social care. The partnership between Fife Health and Social Care Partnership and Kings Trust is truly significant, and I'm thrilled to see it continue to thrive."



Get into Health and Social Care Programme participants

Career Ready

In March, we celebrated the three Fife pupils who completed their internship with the Adult Support and Accommodation Service. For some pupils this opportunity helped them to progress into caring roles in the Partnership. Opportunity The young people at the event spoke about how the internship in the Partnership had given them confidence and experiences in the world of work.

Health Care Staffing Act 2019

The Health and Care (Staffing) (Scotland) Act 2019 (HSCA) was passed by the Scottish Parliament in 2019. Enacted on 1 April 2024, the Act is applicable to all health and care staff in Scotland. There are several Year Two high priority actions that have achieved completion as planned and on time.

In Part 3 of the Act 'Care Services' self-assessment exercise' was conducted by Care Services in line with Part 3 of the Act to ascertain readiness for the implementation, and Business

Continuity Plans were completed. In Part 2 of the Act, the NHS Fife's Health Care Staffing Act Implementation Group successfully delivered the Chapter Testing.

Information about the Act was developed and made available to the workforce across all staff digital platforms including access to specific training via the Turas learning platform.

The Care Inspectorate Safe Staffing Programme Lead commented, "We appreciate the complexities of service planning and procurement for all Health and Social Care Partnerships. However, we hope the testing process has informed you and the team in preparation for enactment on 1 April 2024. The work you all dedicated to this testing process has been integral to our work here at the Safe Staffing Programme".



41. Armed Forces Covenant

Across Fife the Armed Forces Community includes approximately:

- 1,000 serving personnel
- 450 reservists
- 21,000 veterans, and
- the partners and family members of serving personnel, reservists and veterans.

For most of these people, serving in the armed forces is or was a positive experience. However, some individuals experience adverse physical and mental health challenges, which can be compounded by other factors such as welfare and/or financial issues. Members of the Armed Forces Community may also experience problems accessing appropriate services in comparison to the civilian population. This can be further complicated by a lack of understanding of the armed forces culture within civilian services.



We have a strong support network in place across Fife including **Veterans First Point** a specialist service dedicated to the mental health and wellbeing of former armed services personnel in Fife. V1P offers:

- Peer support from fellow veterans
- Help with transitioning to civilian life
- Psychological therapy
- Opportunities to form social connections with other veterans.

V1P are closely connected with other organisations who can provide help with housing, employment, finances and other practical issues. If you are a veteran who lives in Fife, you are eligible to register with V1P for support. Our service is available to all veterans: anyone who has served more than one day in the Royal Navy, Army, or Royal Air Force (regular or reserve) or the Merchant Navy in support of combat operations.

Want to find out more?

Contact 01383 565 128, e-mail fife.veteransfirstpoint@nhs.scot or visit our website: www.veteransfirstpoint.org.uk/drop-center/fife.

To support the Armed Forces Community and ensure compliance with the requirements of the Armed Forces Covenant, Fife partner agencies set up a multiagency Working Group in February 2023. Over the last year the Working Group has:

- Added details of 78 services and support options across Fife to the Forces Connect App (including third and independent sectors, as well as Fife Council, NHS Fife and the Health and Social Care Partnership).
- Created a new area on the Fife Health and Social Care Partnership website for the Armed Forces Community: www.fifehealthandsocialcare.org/your-community/armed-forces-community/.
- Developed e-learning modules for employees in Fife Council, NHS Fife and the third and independent sectors.

A community of identity

Let's start by learning about the Armed Forces and Veterans Community.

Select the play button.



Screenshot from the Fife e-learning modules.

The e-learning modules are part of a suite of modules developed by Warwickshire County Council with funding from the Armed Forces Covenant Fund Trust to support training and awareness of the Covenant and Covenant Duty.

The modules have been adapted by NHS Highland and Fife Health and Social Care Partnership for partner agencies and organisations across Fife.

Thanks go to colleagues across the UK who have contributed to the e-learning modules.

You can find out more about the requirements of the Armed Forces Covenant Duty here:

https://www.armedforcescovenant.gov.uk/

Inspection of Services

All registered social care services undergo inspection from the Care Inspectorate following their quality framework.

Prior to the coronavirus pandemic, the Care Inspectorate inspected against a mixture of quality frameworks and quality themes depending on the service type. All service types now have a new Quality Framework in place and from December 2022 the Care Inspectorate will report only under the relevant key questions of each Quality Framework. Where a service has not yet been inspected under a new Quality Framework the corresponding grade from the previous quality theme methodology will be used instead. A service's entire grading history, including grades under the previous quality theme methodology, can be viewed on the Care Inspectorate website. Different service types are assessed under different key questions as set out in their Quality Frameworks.

During the period 1st April 2024 to 31st March 2025, the Care Inspectorate inspected:

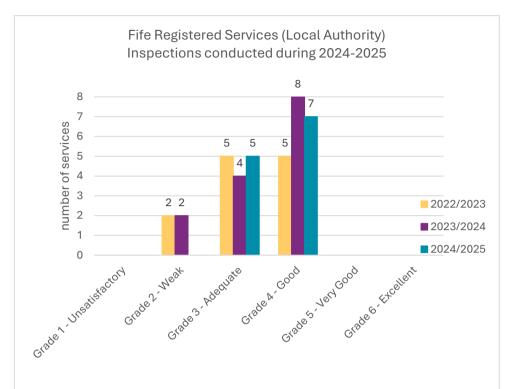
51 Care Home Services:

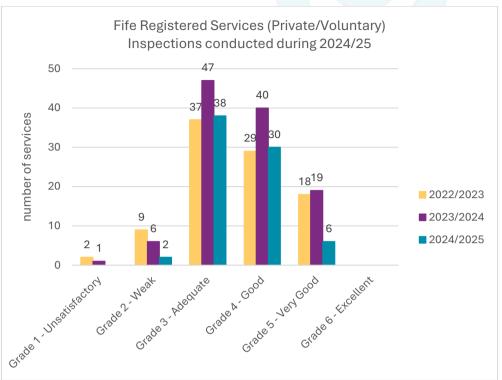
- 6 Local Authority
- 42 Private
- 3 Voluntary or Not for Profit.

35 Housing Support/Care at Home Services:

- 6 Local Authority
- 16 Private
- 13 Voluntary or Not for Profit

In previous years, a small number of local authority inspections have been assessed as weak (see graph below), this year performance has improved and all of the local authority inspections were graded as either good or adequate (no services were graded as unsatisfactory or weak). There has been a similar improvement in the inspection of private/voluntary services with no services graded as unsatisfactory and a significant reduction (from nine to two) of the services inspected that were graded as weak. Work is ongoing to improve the quality of these services each year.







Care Opinion

Care Opinion is a not-for-profit organisation who host a public website where service users, carers or family members can share their experiences of any health or care services they have received within the last three years. They make it safe and simple for anyone to share their story and all stories are anonymised. Stories can be shared in a variety of ways. The service user, carer, family member or whoever wants to share a story can complete a freepost leaflet, go online to Care Opinion website or use the freephone telephone number and tell their story to Care Opinion. Care Opinion moderate all stories before they are published. Stories can be about a journey someone has had, and one story can be about several different services. A story can have more than one response so all Services can respond. If a Service makes a change due to a story that has been told this can be shown on the story and everyone knows that a change has been made.

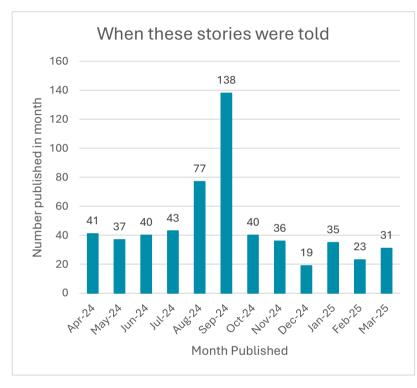
During 2024 to 2025:

- Care Opinion received 560 stories from members of the public about Fife Health and Social Care Partnership
- 89% of these stories were completely positive with the remaining 11% having some level of criticality.
- Staff responded to these stories 695 times.
- These stories have been read 50,698 times.

"Occupational therapy visited me in March. Since my wife's illness (stroke) and subsequent loss of mobility and speech my experience of Fife's Health and Social Care Services, consistently demonstrated quietly and efficiently and sensitively

by its care workers, has been exemplary. When I think of how many upsets and crises they face daily; I find it all remarkable. The delivery and installing of the shower chair and trolley may be routine, but they were well done."

You can read more stories on Care Opinion here: www.careopinion.org.uk



Care Opinion – number of stories published each month.

There was an increase in the number of stories received in September 2024. This was due to a promotional campaign to highlight the work of the Breastfeeding Service.

Stories about Social Work and Social Care Services – this is how people told us they felt:



"Caring, friendly, professional, are words I would use to describe the staff at the Rapid Cancer Diagnostic Services (RCDS) Kirkcaldy. They dealt with my case in a compassionate and understanding way, knowing that speed was of the essence to remove any worry I had of having cancer. They kept me up to date and answered all my questions promptly.

The RCDS is an amazing service and thanks to the Team for making an anxious time less so."

Stories about the Partnership's Health Services – this is how people told us they felt:



"A wonderful service from occupational therapy assistant who was patient and caring towards my husband. She used patience and kindness to encourage him to use equipment to help himself. The aids are so helpful."

Fife Alcohol and Drug Partnership

Fife Alcohol and Drug Partnership works with health and social care services, and other groups and organisations across Fife, to support people affected by alcohol and drugs. Our vision is to 'enable all the people in Fife affected by drugs and alcohol use to have healthy, safe, satisfying lives free from stigma'.

Over the last year we have:

- established the multi-agency 'Children and Young People Affected by Their
 Own Substance Use Rapid Action Group' in response to increasing drug related
 deaths in the 15 to 24 age range.
- led on a workshop with multiple partners to raise awareness of the key issues in Fife and identify system and service-based improvements over the short, medium and long term. This has generated an action plan including a Quality Improvement Charter to increase testing in those who access opiate replacement therapy treatment.
- supported the ongoing distribution of Take Home Naloxone across Fife, this is one of the essential interventions required to prevent drug related deaths.
- collaborated with Active Communities to arrange outdoor activity sessions for individuals in recovery.
- developed a strong working relationship with the Scottish Recovery
 Consortium to support those with lived and living experience to collaborate
 with the Charter of Rights development.
- commissioned Scottish Recovery Consortium to enhance and sustain the already established autonomous Lived Experience Panel.
- led a multi-agency group to deliver the Health Improvement Scotland Action Plan for Residential Rehabilitation in Fife, and mapped all residential rehabilitation providers included in the national Residential Rehabilitation Framework.
- maintained the local delivery plan target for Alcohol Brief Interventions for three consecutive years.



worked with young people in Fife to develop a new campaign that asks young people to Think Again! about casual or occasional drug use. You can find more information about the campaign here: www.fifehealthandsocialcare.org/thinkagain

Financial Performance and Best Value

The financial position for public services continues to be challenging and the Integration Joint Board must operate within significant budget constraints and pressures. It is therefore important that resources are targeted at the delivery of the priorities within the strategic plan.

The budget for services delegated to and managed by the Health and Social Care Partnership for 2024-25 was £770.799m. The core financial position was an overspend of £34.017m, primarily driven by:

- Prescribing Costs
- Hospital and Long-Term Care
- Adult and Older Adult's Social Care, including Care at Home, Care Homes, and Adult Placements.

This was funded by the planned use of reserves of £3.019m with the remaining overspend being funded by partners in NHS Fife and Fife Council in accordance with the Integration Scheme.

Key financial pressures in 2024–25 included:

- Increased Demand for Services: Driven by an ageing population and more complex care needs, resulting in higher demand for adult packages, homecare, and residential care.
- Staff Recruitment Challenges: Difficulty recruiting staff, particularly in Mental Health Services, led to reliance on higher-cost locum and agency staff.
- Prescribing Costs: Significant increases in both volume and cost. The Optimisation Oversight Group continues to provide governance to manage this budget effectively.
- Cost-of-Living Increases: Rising costs in pay, energy, fuel, and food impacted service delivery, with external providers requiring additional support.

Delivering value for money remains a core priority for the Partnership. All service redesign, procurement, purchasing, and commissioning activities are required to adhere to the Best Value principles and procurement guidance issued by relevant statutory bodies.

Looking ahead, the Partnership anticipates further financial pressures, including:

- Availability of funding from partners.
- Rising inflation and increased costs for energy, supplies, and pay.
- Demographic pressures, particularly from an ageing population.

Fife Health and Social Care Partnership remains committed to:

- Containing or reducing costs wherever possible.
- Maximising the use of all available funding streams.
- Reviewing all areas of expenditure.
- Taking immediate corrective actions to address emerging financial pressures.



Conclusion

This Annual Performance Report provides an overview of some of the key activities progressed by Fife Health and Social Care Partnership over the last year (April 2024 to March 2025). We have continued to work with individuals, carers, local communities and service providers to deliver the best out-comes that we can for the people of Fife. By listening to local views, engaging with employees and other experts, and by working together as Team Fife, we have continued to ensure that people can access the services that they need - the right care, at the right time, provided in a place that is right for them.

The Partnership is currently facing significant challenges and pressures. The demand for health and social care services continues to increase, Fife has an ageing population with increasingly complex and/or multiple health conditions. The longer-term impact of COVID-19 and the cost-of-living crisis, also places additional pressures on our services. One approach we are taking to address these challenges is to redesign our systems and processes and do things differently. For example, increased use of digital solutions such as our website **Living Safely and Independently at Home in Fife** which offers the people of Fife an improved online resource to help them stay well, active and independent as they age (the website is available here: https://fife.lifecurve.uk/).

We are also implementing new delivery models which enable individuals to stay healthy and well at home for longer, for example moving to a single-handed care model in Fife which facilitates timely discharges from hospital and enables people to return home as soon as possible. Transforming our Community Rehabilitation and Care Services will ensure that enhanced rehabilitation and care services can be delivered in people's homes, or homely settings, to support their recovery and independence. In addition, our community mental health wards are being modernised and improved, this will enable us to provide high-quality, accessible mental health care that meets the needs of our communities now and in the future.

Moving forward, we will continue to encourage and support prevention and self-management. We will also work together, with individuals, families and carers, partner agencies, care providers and local communities, to improve the quality of care that is available for the people of Fife.











Further information about the strategic planning process in Fife, including opportunities to get involved in consultations or other engagement events, is available on our website: www.fifehealthandsocialcare.org.

Appendix 1 – Governance

Fife Integration Joint Board

Fife is one of the largest Health and Social Care Partnerships in Scotland, next to Edinburgh and Glasgow, with over 6,000 staff, who are employed by NHS Fife or Fife Council, and an annual budget of around £600 million.

The Integration Joint Board (IJB) is the decision-making body for the Partnership. The Board includes representatives from NHS Fife, Fife Council, partners agencies, including the third and independent sectors, and members of the public.

The Chair of the IJB is David Ross, and the Vice Chair is Colin Grieve.

Voting Members

- David Ross (Chair)
- Colin Grieve (Vice Chair)
- Alastair Grant
- Chris McKenna
- David Alexander
- Dave Dempsey
- Janette Keenan
- John Kemp
- Lynn Mowatt
- Lynne Parsons
- Margaret Kennedy
- Mary Lockhart
- Rosemary Liewald
- Sam Steele
- Sinead Braiden

Professional Advisors (Non-Voting)

- Lynne Garvey (Chief Officer of IJB, Director of Fife Health and Social Care Partnership)
- Audrey Valente (Chief Finance Officer)
- Helen Hellewell (Deputy Medical Director/GP Representative)
- James Ross (Chief Social Work Officer)
- Jackie Drummond (Medical Representative)
- Lynn Barker (Director of Nursing/Nurse Representative)

Other Stakeholders (Non-Voting)

- Amanda Wong (Associate Director, Allied Health Professionals)
- Debbie Fyfe (Joint TU Secretary)
- Ian Dall (Public Rep)
- Kenny McCallum (Staff, Fife Council Representative)
- Kenny Murphy (Third Sector Representative)
- Morna Fleming (Carers Representative)
- Paul Dundas (Independent Sector Representative)
- Vicki Bennet (Staff, NHS Fife Representative)

In responding to the Public Bodies (Joint Working) (Scotland) Act 2014, Fife Council and NHS Fife agreed to integrate services and functions as required within the Act, delegating these to Fife Integration Joint Board. The IJB is responsible for the strategic planning of the functions delegated to it and for ensuring oversight of the delivery of the services conferred on it by the Act through the locally agreed arrangements set out in the Integration Scheme.

The IJB is commonly referred to as Fife Health and Social Care Partnership. This is the public facing aspect of Fife Integration Joint Board and is essentially the employees from both organisations working in partnership to deliver health and social care services.

More information on the health and social care services and functions delegated to the IJB are set out within Fife's Integration Scheme which is available on our website: www.fifehealthandsocialcare.org.

Senior Leadership Team

The Senior Leadership Team provides operational management for Fife Health and Social Care Partnership under the leadership of Lynne Garvey, the Director of Health and Social Care.

Lynne Garvey
Chief Officer and Director of Health & Social Care

Operational Service Delivery

SLT leads for orperational management delivery and business outcoes for a portfolio of services

Business Enabling

SLT leads for Corporate Services and functions inc. financial governance, strategic planning, performance, transformational change and organisational development

Professional & Quality Services

SLT leads for quality, safety, experience, clinical and care governancee, professional regulation and standards



Lisa Cooper Head of Integrated Primary & Preventive Care Services



Chris Conroy
Head of Integrated
Community Care Services



Karen Marwick Interim Head of Complex & Critical Services



Audrey Valente
Chief Finance Officer and
Head of Transformation
& Corporate Services



Vacant Head of Strategic Planning & Performance



Roy Lawrence Principal Lead Organisational Development & Culture



Lynn BarkerDirector of Nursing



Helen Hellewell Deputy Medical Director



Caroline Cherry Principal Social Work Officer

Strategic Planning Group

Fife Health and Social Care Partnership delivers a wide range of health and social care services to individuals and communities across Fife. Working with partner agencies, organisations in the independent and third sectors, local groups and national bodies, the Partnership supports and cares for people of all ages, and with very different circumstances, needs, and aspirations.

The Strategic Planning Group is responsible for the development and oversight of the Strategic Plan for the Partnership. This includes:

- supporting Fife Integration Joint Board to review the Strategic Plan at least every three years,
- contributing to the development of supporting strategies, delivery plans and annual reports,
- monitoring progress and assessing performance in relation to the implementation of the Strategic Plan, and,
- ensuring compliance with relevant legislative and statutory requirements.

The Chair of the Strategic Planning Group is Colin Grieve.

During 2024 to 2025 the Strategic Planning Group (SPG) met five times; these are some of the activities completed.

The SPG contributed to the development of these strategies and plans

- Alcohol and Drug Partnership Strategy
- Digital Strategy
- Prevention and Early Intervention Strategy
- Mental Health and Wellbeing Strategy (in development)
- · Delivery Plan (in development, aligns to the national Dementia Strategy)

we reviewed the progress of our supporting strategies through:

3 Annual Reports and

16 Flash Reports





Extended Leadership Team

Bringing our Extended Leadership Team together has been instrumental in fostering collaborative learning, strengthening relationships across the Partnership, and driving forward service transformation. Throughout 2024 to 2025, we organised six sessions to bring together managers, key stakeholders, and leads from Fife's independent and voluntary sectors. These sessions have been very well received. Our primary focusses this year has been on assessing our financial position and ensuring the sustainability of our services, additionally, we covered the following topics:

- 1. Realistic Medicine: guest speakers Linda McGourty and Emma O'Keefe (Clinical Co-Leads), along with Kingsley Oturu (Senior Project Manager), led discussions on value-based health and care. They led discussions on delivering better outcomes and experiences for the people we care for through equitable, sustainable, appropriate, and transparent use of available resources.
- 2. Workforce Plan: our three-year Workforce Plan focuses on supporting service sustainability and transformation, highlighting our workforce ambitions through:
 - Domestic recruitment
 - International recruitment
 - Service redesign
 - Role diversification
 - Staff training and development
- 3. Climate Change: Pam Ewen (Head of Planning, Fife Council) outlined our current position and plans to improve our working methods to support climate change reduction.
- 4. Mental Health and Wellbeing Participation and Engagement: Laura Harris (Social Work Resource Service) shared insights from participation and engagement sessions, discussing how we can act on their findings and apply similar co-production methodologies where relevant.
- 5. Partnership's Recovery Plan: we presented the Recovery Plan, asking the Extended Leadership Team to consider what is within our control to deliver on the savings proposal and where we might influence or shape the plan further.
- 6. Health Literacy: Ruth Bennett (Health Promotion Manager) presented how to be health literate, explaining its impact and leading discussions on how it is already being implemented in practice and where this could be implemented further.

In December, we reviewed and consulted on the Extended Leadership Team sessions format to evaluate their effectiveness and identify areas for improvement. Based on feedback, we agreed to reduce the number of sessions over the year and focus more on individual topics. Our first session in February 2025 centred on Risk Management and our Risk Maturity Model, led by Avril Sweeney (Manager, Risk Compliance).

Appendix 2 – National Outcomes and Priorities

| Natio | nal Health and Wellbeing Outcomes for Health and Social Care | Fife Strategic Themes |
|-------|---|--|
| 1 | People are able to look after and improve their own health and wellbeing and live in good health for longer. | Local, Sustainable, Wellbeing, Outcomes |
| 2 | People, including those with disabilities or long-term conditions, or who are frail, are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community. | Local |
| 3 | People who use health and social care services have positive experiences of those services, and have their dignity respected. | Wellbeing |
| 4 | Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services. | Local, Wellbeing |
| 5 | Health and social care services contribute to reducing health inequalities. | Outcomes |
| 6 | People who provide unpaid care are supported to look after their own health and well-being, including to reduce any negative impact of their caring role on their own health and well-being. | Sustainable |
| 7 | People using health and social care services are safe from harm. | Outcomes |
| 8 | People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide. | Integration |
| 9 | Resources are used effectively and efficiently in the provision of health and social care services. | Sustainable, Integration |

Further information is available here: www.gov.scot/publications/national-health-wellbeing-outcomes-framework

| Healt | h and Social Care Standards | Fife Strategic Themes | | |
|-------|---|------------------------------------|--|--|
| 1 | I experience high quality care and support that is right for me | Local, Wellbeing, Outcomes | | |
| 2 | 2 I am fully involved in all decisions about my care and support Local, Wellbeing, Outcomes | | | |
| 3 | I have confidence in the people who support and care for me | Local, Wellbeing, Outcomes | | |
| 4 | I have confidence in the organisation providing my care and support | Sustainable, Integration | | |
| 5 | I experience a high-quality environment if the organisation provides the premises | Outcomes, Sustainable, Integration | | |

 $Further\ information\ is\ available\ here:\ \underline{www.gov.scot/publications/health-social-care-standards-support-life}$

| Public | Health Priorities for Scotland | Fife Strategic Themes |
|--------|--|------------------------------------|
| 1 | A Scotland where we live in vibrant, healthy and safe places and communities. | Local, Wellbeing |
| 2 | A Scotland where we flourish in our early years. | Local, Wellbeing |
| 3 | A Scotland where we have good mental wellbeing. | Wellbeing, Outcomes |
| 4 | A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs. | Outcomes |
| 5 | A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all. | Outcomes, Sustainable, Integration |
| 6 | A Scotland where we eat well, have a healthy weight and are physically active. | Outcomes |

 $Further\ information\ is\ available\ here: \underline{www.gov.scot/publications/scotlands-public-health-priorities}$

Appendix 3 – National Indicators

The National Integration Indicators are reported in the Scottish Health and Care Experience Survey commissioned by the Scottish Government. The Survey is run every two years and is sent out by post to a random sample of people who are registered with a GP in Scotland. It asks people about their experiences of accessing and using health and social care services. The information collected enables comparisons with different Health and Social Care Partnerships across Scotland, and across different years.

Fife's performance for 2024 – 2025 compared to Scotland rate.

Key

| Green | Performance is as expected. Fife's performance is not statistically significant to previous performance, and is similar or better than national performance (Scotland rate). |
|-------|--|
| Amber | Risk is evident that Fife's performance is starting to decline compared to previous performance, and/or a decline compared to national performance (Scotland rate). |
| Red | Fife's performance is below expected levels and there is a statistically significant decline compared to previous performance and/or a decline compared to national performance (Scotland rate). |

Use of 2024 calendar year data instead of 2024/2025 financial year data for indicators 12, 13, 14, 15 and 16.

The primary source of data for these indicators are Scottish Morbidity Records (SMRs) which are nationally collected discharge-based hospital records. In accordance with the recommendations made by Public Health Scotland (PHS) and communicated to all Health and Social Care Partnerships, the most recent reporting period available with complete and robust data is calendar year 2024. Reporting on 2024 calendar year rather than 2024/25 financial year may not fully reflect local activity, however, this is still recommended due to data completeness levels at the time of reporting.

Indicator 20

PHS has not provided information for indicator 20 beyond 2019/20 because detailed Patient Level Information Costing System (PLICS) cost information is not available. PHS previously published information to calendar year 2020 using costs from 2019/20 as a proxy but, given the impact of the COVID-19 pandemic on activity and expenditure, PHS no longer consider this appropriate.

^{**} Data is not currently available.

Further details for all indicators, including long term trends from 2013/2014, are available on the Public Health Scotland website:

https://publichealthscotland.scot/publications/core-suite-of-integration-indicators/core-suite-of-integration-indicators-2-july-2024/

Core suite of integration indicators 2 July 2024 - Core suite of integration indicators - Public Health Scotland

| Outcome In | ndicators | Fife Partnership Rate | Scotland Rate | | |
|------------|--|-----------------------|---------------|--|--|
| NI - 1 | Percentage of adults able to look after their health very well or quite well | 91.4% | 90.7% | | |
| NI - 2 | Percentage of adults supported at home who agreed that they are supported to live as independently as possible | 70.0% 72.4% | | | |
| NI - 3 | Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided | 51.0% 59.6% | | | |
| NI - 4 | Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated | 53.0 % 61.4% | | | |
| NI - 5 | Total % of adults receiving any care or support who rated it as excellent or good | 63.0% | 70.0% | | |
| NI - 6 | Percentage of people with positive experience of the care provided by their GP practice | 65.1% | 68.5% | | |
| NI - 7 | Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life | 67.0% | 69.8% | | |
| NI - 8 | Total combined % carers who feel supported to continue in their caring role | 30.3% | 31.2% | | |
| NI - 9 | Percentage of adults supported at home who agreed they felt safe | 69.1% | 72.7% | | |
| NI - 10 | Percentage of staff who say they would recommend their workplace as a good place to work. | NA | NA | | |

| NI - 11 | Premature Mortality Rate per 100,000 population | 436 | 442 |
|---------|---|---------|---------|
| NI - 12 | Rate of emergency admissions per 100,000 population for adults | 14,360 | 11,559 |
| NI - 13 | Rate of emergency bed day per 100,000 population for adults | 110,688 | 113,627 |
| NI - 14 | Readmissions to hospital within 28 days of discharge per 1,000 discharges | 122 | 103 |
| NI - 15 | Proportion of last 6 months of life spent at home or in a community setting | 90.5% | 89.2% |
| NI - 16 | Falls rate per 1,000 population (65+) | 28.7 | 22.5 |
| NI - 17 | Proportion of care and care services rated good or better in Care Inspectorate inspections | 73.5% | 81.9% |
| NI - 18 | Percentage of adults with intensive care needs receiving care at home | 55.5% | 64.7% |
| NI - 19 | Number of days people aged 75+ spend in hospital when they are ready to be discharged per 1,000 population | 720 | 952 |
| NI - 20 | Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency | 25.3% | 24% |
| NI - 21 | Percentage of people admitted to hospital from home during the year who are discharged to a care home | NA** | |
| NI - 22 | Percentage of people who are discharged from hospital within 72 hours of being ready | NA** | |
| NI - 23 | Expenditure on end of life care, cost in last 6 months per death | NA** | |

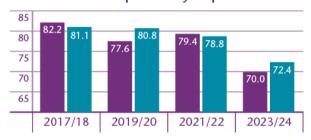
Graphs for indicators 1 to 9 are included below, this includes data up to 2023/2024.

Graphs for indicators 11 to 19 are included with each of the national outcomes in the performance section of the report.

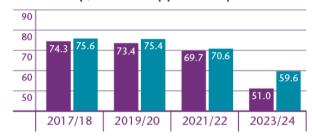
NI-1 Percentage of adults able to look after their health very well or quite well



NI-2 Percentage of adults supported at home who agree that they are supported to live as independently as possible!



NI-3 Percentage of adults supported at home who agree that they had a say in how their help, care or support was provided



NI-4 Percentage of adults supported at home who agree that their health and social care services seemed to be well coordinated



NI-5 Percentage of adults receiving any care or support who rate it as excellent or good



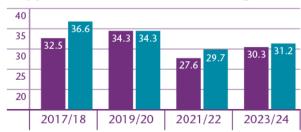
NI-6 Percentage of people with positive experience of care at their GP practice



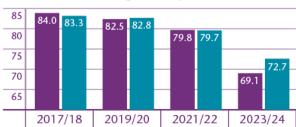
NI-7 Percentage of adults supported at home who agree that their services and support had an impact in improving or maintaining their quality of life



NI-8 Percentage of carers who feel supported to continue in their caring role



NI-9 Percentage of adults supported at home who agree they felt safe



National MSG Indicators

(Ministerial Strategic Group for Health and Community Care)

| ID | Indicator | Previous period | Latest period | Previous period figure - Fife | Latest period figure – Fife | Comparison to previous period - Fife |
|--------|--|-----------------|---------------|----------------------------------|--------------------------------|--|
| MSG 1a | Emergency Admissions* | 2023/2024 | 2024 | 41,021 | 41,910 | ↓ 889 |
| MSG 2a | Number of unscheduled hospital bed days* | 2023/2024 | 2024 | 263,124 | 258,558 | ↑ 4566 |
| MSG 3a | A&E Attendances | 2023/2024 | 2024/2025 | 73,021 | 75,179 | ↓ 2,158 |
| MSG 4 | Delayed Discharge bed days | 2023/2024 | 2024/2025 | 37,839 | 42,130 | ↓ 4,291 |
| MSG 5a | Proportion of last 6 months of life spent at home or in a community setting* | 2022/2023 | 2023/2024 | 89.7% | 90.2% | 个 0.5% |

^{*} Data completeness for emergency admissions and bed days for Fife is 97% as at December 2024.

When reading the graph please note that the arrows relate to performance and the direction indicates whether our performance is increasing or decreasing (improved performance can sometimes mean that a figure will increase or decrease). For example, MSG 5a Percentage of last six months of life by settings shows an increase since last year, for this indicator the upward arrow indicates improved performance.

Appendix 4 – Financial Information 2020 to 2024

| | | 2020 | | | 2021 | | | 2022 | | | 2023 | | | 2024 | |
|-------------------------------------|---------|------------------------|----------|---------|------------------------|----------|---------|------------------------|----------|---------|------------------------|----------|---------|------------------------|----------|
| Delegated Services (as at 31 March) | Budget | Provisional Outturn | Variance |
| Objective summary | £m | £m | £m |
| Community Services | 107.695 | 102.295 | -5.4 | 123.319 | 120.719 | -2.600 | 117.475 | 109.699 | -7.776 | 131.850 | 116.532 | -15.319 | 159.531 | 156.909 | -2.622 |
| Hospitals and Long- Term Care | 54.839 | 57.197 | 2.358 | 56.000 | 56.666 | 0.666 | 59.103 | 64.717 | 5.614 | 66.468 | 77.071 | 10.603 | 62.840 | 75.319 | 12.479 |
| GP Prescribing | 73.807 | 73.799 | -0.008 | 70.979 | 70.955 | -0.024 | 75.581 | 76.337 | 0.756 | 79.202 | 85.643 | 6.441 | 81.314 | 86.936 | 5.622 |
| Family Health Services | 99.765 | 99.749 | -0.016 | 103.878 | 104.367 | 0.489 | 115.186 | 115.554 | 0.368 | 122.801 | 124.329 | 1.528 | 130.860 | 131.216 | 0.356 |
| Children's Services | 17.544 | 17.077 | -0.467 | 18.202 | 16.913 | -1.289 | 16.198 | 15.789 | -0.409 | 17.893 | 17.737 | -0.156 | 18.401 | 18.732 | 0.331 |
| Social Care | 204.635 | 214.814 | 10.179 | 243.682 | 239.459 | -4.223 | 262.759 | 256.113 | -6.646 | 279.741 | 282.222 | 2.481 | 285.440 | 303.291 | 17.851 |
| Housing | 1.665 | 1.656 | -0.009 | 1.324 | 1.324 | 0.000 | 1.699 | 1.329 | -0.37 | 1.737 | 1.737 | 0.000 | 1.633 | 1.634 | 0.000 |
| Total Health & Social Care | 559.95 | 566.589 | 6.639 | 617.384 | 610.403 | -6.981 | 648.001 | 639.538 | -8.463 | 699.692 | 705.27 | 5.578 | 740.020 | 774.036 | 34.017 |

References

- National Health and Social Care Health and Wellbeing Outcomes
 https://www.gov.scot/publications/national-health-wellbeing-outcomes-framework/
- Public Health Priorities for Scotland
 https://www.gov.scot/publications/scotlands-public-health-priorities/pages/1/
- Health and Social Care Standards
 <u>www.gov.scot/publications/health-social-care-standards-support-life</u>
- Public Bodies (Joint Working) (Scotland) Act 2014
 https://www.legislation.gov.uk/asp/2014/9/contents/enacted
- Fife Health and Social Care Partnership www.fifehealthandsocialcare.org
- Care Inspectorate
 www.careinspectorate.com





Annual Performance Report

2024 - 2025

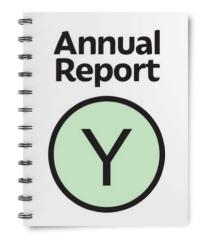
Easy Read Version





There may be some words you don't know in the document. When you see them for the first time they will be in **bold**.

There is a word list with the meanings of these new words at the end of the document.



This Easy Read document is about **Fife Health and Social Care Partnership's Annual Performance Report.**



An **annual performance report** tells us about the good things that an organisation has done over the last year.





This annual performance report is for 2024 to 2025.

2



This annual performance report is linked to our **strategic plan**.



A **strategic plan** is a document which sets out what the Partnership wants to do over a few years.



The purpose of our strategic plan is to help the people of Fife to be able to live independent and healthier lives.

Usually our plans go well and we do improve our health and social care services.



Sometimes changes might take longer because our staff are working on other things.

For example the **COVID-19 pandemic** and the **cost-of-living crisis** have both changed the way that we do things.



More than 374,000 people live in Fife.

Over time the number of older people living in Fife will increase.



Fife is divided into 7 areas. These are called localities.



The 7 localities are:

- 1. Cowdenbeath/Lochgelly
- 2. Dunfermline
- 3. Glenrothes
- 4. Kirkcaldy
- 5. Levenmouth
- 6. North East Fife
- 7. South West Fife



Each locality decides which services are most important to them. Everyone has a chance to get involved.

Locality teams work hard to support the people who live there.



The **Integration Joint Board** makes decisions for the Health and Social Care Partnership.

The person who leads Fife Integration Joint Board is David Ross.



Fife Integration Joint Board also includes people from:

- Fife Council
- NHS Fife
- other local care providers
- members of the public



Lynne Garvey is the Chief Officer of Fife Integration Joint Board. Lynne is also the Director of Health and Social Care.

Lynne leads the **Senior Leadership Team** to deliver services across Fife.



The Senior Leadership Team oversee the daily working of the Partnership.

They are all experts in different areas and lead teams with specialist skills.

5



We want to improve health and social care services for the people of Fife.

Over the last year we have worked with lots of different people to do this.



Fife Health and Social Care Partnership includes employees from:

- Fife Council
- NHS Fife
- voluntary sector
- other local care providers



They work together to deliver services.

This is known as health and social care integration.



The next pages include some of the good things that we have done in the last year.



Local

We want Fife to be a place where people and communities thrive.

These are some of the **Local** things we have done over the last year.



The system we use for children's mental health services has been updated. The new system helps children to get their appointments sooner.

This means that children who need help can get better quicker.



Lots of people have used our Link Life Fife service. This supports people who feel stressed or anxious.

We listen to people and help them to find the care that they need.



We have set up a new service that will stop people falling. This means less people will be hurt or injured.

This service is for all areas of Fife

7



Sustainable

We want our services to work well and be inclusive.

These are some of the **Sustainable** things we have done over the last year.



Our **Integrated Care Teams** help people who are leaving hospital. They make it easier for people to go home sooner.

This can help people get better faster.



The Child Healthy Weight Service helps families to eat well and be active.

This year more people are using the service to feel better.



We organised a special event for foot care. Lots of people came along to the event. They were able to get the right help and advice for their feet.

We will organise more events so that we can help more people.



Wellbeing

We want services in Fife to act quickly to support people.

These are some of the things we have done to improve **Wellbeing** in the last year.



We have been working with teenage girls from the travelling community. The travelling community means groups of people who move around a lot.

We have helped the teenage girls learn cooking skills.



Our community alarm system has been updated. The new system is digital, it uses mobile phones and computers.

This makes it easier for people to use the alarm and call for help when they need it.



We organised Wellbeing Champion training for some of our employees.

The new Wellbeing Champions provide support to their Teams. The Champions listen to people and tell them about useful services and support. For example, healthy eating, lunchtime walks, or starting hobbies.



Outcomes

We want Fife to be somewhere that promotes dignity, equality and independence.

These are some of the **Outcomes** from this year.



The **equality** section on our website has been updated. Equality means that all people should be treated fairly.

We have added information about people's rights and details of other useful websites.



Some of our staff have had extra training. They can now help parents and children with:

- Parenting skills
- Managing emotions
- Being more active
- Looking after their teeth
- Being healthier



To help unpaid carers we have employed 10 more Social Work Assistants. The new employees can help carers find support and services that will help them.







We want Fife to be somewhere people and services work together.

We want people to have access to quality services.

These are some of the examples of **Integration** from over the last year.

Fife Care Academy provides training and education for health and social care students.

This year we organized several events for students. The events helped the students learn more about working in health and social care.



Every year our staff complete a survey about their jobs and working together. This year more staff filled in the survey.

More staff also said they liked working for Fife Health and Social Care Partnership.



We have set up new KY Clubs in Levenmouth, Kirkcaldy and Cowdenbeath.

The KY Clubs provide support to people who are affected by drugs and alcohol.



An **inspection** is when people come to look at what is good and what is not good about a service.

Last year there were 86 inspections of services for adults in Fife.



The inspectors said that 43 of these services were graded as good or very good.

The inspectors said 2 of the care services could be improved.

We will work to improve these services over the next year.



Care Opinion is a website where people can share stories about their experiences.

Over the last year we received 560 stories about Fife Health and Social Care Partnership.

These stories have been read 50,698 times.



Most of the stories about Fife Health and Social Care Partnership were positive. People told us that they were happy with the care and support they received.



Health and social care services are responsible for making the best use of the money they have. These are called **budgets**.



Our budget shows the amount of money we have and the things that we need to buy.

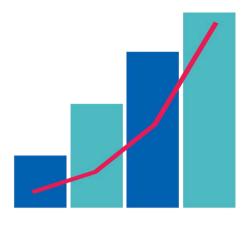
It also shows where we need to make savings on spending.



Over the last year we have watched our budget very closely. This has helped us to keep delivering good health and social care services.



We will keep measuring our budgets closely over the next few years. This will help us to manage our services well in the future.



The Scottish Government has a set of **national performance indicators**.

These can be used to measure Fife's performance.



Areas where Fife is performing well include:

- the number of adults who can look after their own health
- the number of carers who feel supported in their caring role
- the number of days that people have to stay in hospital after an emergency
- the number of adults who say they feel safe at home



Areas where we still have work to do include:

- giving people choices about how their care is provided
- increasing the number of people with complex needs who can receive care at home
- working together to make sure that services are well organised



Supporting the people of Fife together

You can find out more on our website: www.fifehealthandsocialcare.org

What the words mean.

| Annual Performance Report | An update on the things that an organisation has done over the last year. |
|---------------------------|---|
| Budget | The money you have to spend on the things you need. |
| Care Opinion | Care Opinion is an organisation that has a public website. On the website, people can share their experiences of health or care services. |
| | Care Opinion makes it safe and easy for anyone to share their story. |
| | All stories are anonymised. This means the names are removed so no one knows who wrote the story. |
| Cost-of-living crisis | When the amount you have to pay for the things you need keeps going up. |
| COVID-19 pandemic | COVID-19 is also called coronavirus. COVID-19 is a disease that can make people ill. Sometimes people have a fever and cough. The disease can spread quickly from person to person. This is called a pandemic. A pandemic means a disease is spreading in many countries around the world at the same time. |

What the words mean.

| Equality | Equality means that all people should be treated fairly. People should not be treated differently because of their: Age Disability Gender Marital status Pregnancy and maternity - meaning being pregnant and having a baby. Race Religion or belief Sex Sexual orientation - meaning someone's attraction to a particular gender. This could be attraction to the opposite gender, same gender, or both genders. Equality laws protect people from unfair treatment. | |
|---------------------------------------|--|--|
| Health and Social Care Partnership | When the local council and local NHS work together to deliver services. | |
| Inspection | An inspection is when people come to look at what is good and what is not good about a service. | |

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What the words mean.

| Integrated Care Teams | An Integrated Care Team is a group of health care workers who work together to take care of a patient. |
|---------------------------------|--|
| | The team has different types of workers like doctors, nurses, and therapists. They work together and share information to give the best care to the patient. |
| | This lets each person use their skills in the best way. |
| | It helps the patient get coordinated care instead of each worker doing their own thing. |
| Integration | Working together to deliver health and social care services. |
| Integration Joint Board | The Integration Joint Board makes decisions for the Health and Social Care Partnership. |
| Local | Local means in your area or community. |
| National performance indicators | How we measure the things that are important for people's care. |
| Outcomes | Something that you want to happen at the end of an activity. |
| Senior Leadership Team | The people who make sure that the Partnership does a good job. |
| Strategic Plan | The things that an organisation wants to do over a few years. |
| Sustainable | Sustainable means able to continue for a long time. |
| Wellbeing | Wellbeing means health and happiness. |

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People & Communities Scrutiny Committee

25 September 2025

Agenda Item No. 7



CUSTOMER AND ONLINE SERVICES – ANNUAL SERVICE REVIEW REPORT 2024/25

Report by: Diarmuid Cotter, Head of Customer and Online Services

Wards Affected: N/A

Purpose

To present an integrated annual report for scrutiny which combines service planning, change and improvement activity, operational delivery and an assessment of performance for 2024/25.

Recommendation(s)

The Scrutiny Committee is invited to:

- (a) consider and comment on the annual service review report format and related online products;
- (b) review the progress and performance of Customer and Online Service for 2024/25 and the activity undertaken to date and,
- (c) note the service planning and change priorities for 2025/26 and the longer-term direction of travel.

Resource Implications

There are no resource implications arising from this report.

Legal & Risk Implications

There are risks in not meeting Best Value and community planning requirements that can lead to additional monitoring/audit, external intervention and/or loss of public confidence.

Impact Assessment

An EqIA is not required as this report does not propose any changes to policies or services.

Consultation

This paper was informed by performance improvements over 2024/25 and associated Service, CLT and CET engagement.

1.0 Introduction

- 1.1 This report builds on the revised Annual Service Review Report format introduced last year and more strongly aligns change and service planning alongside service performance analysis linked to operational management plans relating to finance, risk, workforce and digital development.
- 1.2 The report attached at Appendix 1 considers the performance of Customer and Online Service in relation to the Council's policy priorities set out in the Plan for Fife; key indicators; financial and workforce pressures and; how we compare in relation to other similar services in other Scottish councils, through the Local Government Benchmarking Framework.
- 1.3 Individual service indicators and results are published online in advance of this annual review to facilitate scrutiny and feedback. These are available at Council plans and performance | Fife Council

2.0 Customer and Online Services – Key Messages 2024/25

- 2.1 Customer & Online Services (COS) continues to deliver an integrated approach to managing customer contact across Fife Council, balancing high-quality service delivery with digital transformation. During 2024/25, the service improved accessibility and responsiveness across multiple channels while supporting vulnerable residents through welfare support, financial assessments, and housing services. Key achievements include significant growth in online transactions and accounts, successful launch of the FIONA AI chatbot, progress towards digital self-service in repairs centre and registration, and continued integration of services under the No Wrong Door approach to reduce crisis interventions.
- 2.2 COS demonstrated strong operational delivery, with 12 key indicators showing improvement and continued success in online and digital channels. Online transactions have grown 40% since 2021/22, online account creation nearly tripled, and the chatbot now handles over 3,900 interactions per month with high satisfaction. Repairs and registration services saw improved efficiency through partial automation, self-service reporting, and online booking adoption. Challenges remain in manual scheduling for Repairs, processing times for benefits due to additional workload, and staff capacity, but these are being actively addressed through digital transformation and targeted service redesign.
- 2.3 Our approach to consolidate good results and address any issues are
 - Digital & Omnichannel Integration expand Digital Experience Platform (DXP)
 capabilities, consolidate web content, and ensure chatbot alignment with updated
 content to maintain accuracy and satisfaction.
 - Repairs increase automation and streamline manual scheduling to reduce administrative burden and free staff for complex work. Continue developing tenantfacing online reporting.

- Registration introduce virtual appointments, system integration, and process standardisation to improve accessibility, reduce duplication, and reduce reliance on physical sites.
- FIONA Chatbot Evolution extend to service-specific queries, starting with a 'planning expert' bot using triage questions to guide users efficiently and reduce phone contact.
- No Wrong Door Continue integrating services, targeting early intervention, and reducing repeat crisis support applications.
- Staff & Culture continue upskilling staff in digital literacy, UX, accessibility, and customer journey design to sustain service improvements.
- 2.4 Our statement of change priorities for 25/26 and beyond are
 - Continue delivering the No Wrong Door approach, integrating services to provide early, holistic support and reduce crisis demand.
 - Strengthen omnichannel integration, ensuring seamless customer journeys across web, chat, phone, and in-person services.
 - Deliver the Digital Experience Platform (DXP) to enhance personalisation, integration, and analytics.
 - Expand self-service capabilities in repairs and registration, reducing manual intervention and increasing efficiency.
 - Roll out virtual-first registration services and further integrate digital workflows to improve accessibility and reduce costs.
 - Maintain staff development and engagement, ensuring digital literacy, accessibility knowledge, and operational excellence underpin ongoing transformation.
 - Maximise collection of Council Tax, rent, and other council income, leveraging digital tools, self-service options, and streamlined processes to improve efficiency while supporting residents to meet their obligations.
- 2.5 The full Annual Service Review Report is set out in Appendix 1.

3.0 Conclusion

3.1 The report provides an integrated view of service planning, operational delivery, change and improvement activity and an assessment of performance for 2024/25.

Appendix 1 – Customer and Online Services, Annual Service Review Report 2024/25

Report contacts

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Communities Directorate

Customer & Online Services Annual Service Review Report 2025

Introduction

This report reflects the performance of Customer and Online Services for 2024/25. It covers the period April 2024 to March 2025, highlighting our delivery, progress, change and improvement plans for 2025/26.

We have considered our performance in relation to the council's policy priorities set out in the Plan for Fife; key indicators; financial and workforce pressures and how we compare in relation to other similar services in other Scottish councils, through the Local Government Benchmarking Framework.

Individual service indicators and results are published online in advance of this annual review to facilitate scrutiny and feedback.

These are available at www.fife.gov.uk/councilperformance

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|---|----|
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| Appendix 1 - Key Performance Indicators | 20 |

Contact information

For further information or discussion please contact:

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Please note, performance data can run behind the period of this report. This is due to data gathering requirements including national benchmarking. The most up-to-date information available has been used to inform this report.

Service overview

Customer and Online Services (COS) deliver a significant part of the Council's customer strategy bringing together areas of customer contact, scheduling and assessment of benefits. It comprises of the following areas: Contact Centre, Customer Service Centres, Registration, Escalation & Resolution, Information Management & Requests, Online Services and Financial Wellbeing and Revenues. Operationally the service manages 15 customer service centres/points, a 24/7 Contact Centre and Fife Council's website fife.gov.uk.

The service also supports the most vulnerable communities in Fife through the administration of the Scottish Welfare Fund, assessment of Housing Benefit, Council Tax Reduction and Education Benefits (including Education Maintenance Allowance).

The service also bills, collects, and recovers Council Tax, Non-Domestic Rates and Sundry Debt. Other statutory functions under its remit include managing corporately the Councils obligation to meet requests being made to Fife Council under Data Protection and Freedom of Information legislation, customer complaints and the registration of births, deaths, and marriages.

The service support vulnerable residents via Community Alarm to promote dependant living and connection to social works services.

Service areas

Customer Service Centres

- Registration (births, deaths and marriages)
- Contact Centre
- Financial Wellbeing & Revenues
- Information Management
- Escalations (customer complaints)
- Online Services

Service Vision

The vision of Customer and Online Services is:

- To drive a completely integrated approach to managing customer contact across the Council with significantly improved access to services, assessment and signposting across all channels while placing an emphasis on digital.
- To maintain a focus on maximising the collection of Council Tax, Rent and Business Rates and Sundry Debt while being aware of our key role in identifying and supporting the most vulnerable.

Demand and Delivery overview

COS service delivery KPIs

The following table shows the last 4 years Customer and Online services key performance indicators (KPIs).

| Performance Indicator | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target |
|--|---------|------------|------------|-----------|--------|
| In year collection of Non-Domestic Rates (%) | 99% | 97.6% | 96.6% | 97.5% | 97% |
| Council Tax Collection | 95.3 | 95.8% | 95.2% | 95.5% | 95.5% |
| Rent Collection | 98.1% | 98.7% | 100.1% | 100.9% | 99.6% |
| Average Time to process new HB claims (in days) | 37.7 | 19.8 | 18 | 36.2 | 22 |
| Average Time to process notification of changes (days) | 5.6 | 3 | 4 | 13.2 | 7 |
| Average Time to Process New CTR Claims (days) | 31 | 19.3 | 16.7 | 33.7 | 22 |
| Average Time to Process CTR Changes (days) | 11.1 | 4.7 | 3.8 | 11.1 | 7 |
| Percentage of Housing Benefit overpayments recovered in the year | 28% | 29% | 38% | 36% | 35% |
| % of Sundry Debt collected in year | 87.6% | 89% | 89.1% | 89.2% | 89.5% |
| % of Contacts Answered - Contact Centre | 86.4% | 88.3% | 91.1% | 91.7% | 90% |
| Registration input accurately % | 98.4% | 98.4% | 97.7% | 97% | 95% |
| Average processing time - Crisis Grants (days) | 3 | 2 | 1 | 2 | 1 |
| Average processing time - Community Care Grants (days) | 37 | 10 | 20 | 16 | 15 |
| Number of welfare fund applications made | 33,855 | 37,073 | 30,693 | 25,012 | N/A |
| % FOI requests completed on time | 88.5% | 84.5% | 88.2% | 86.7% | 90% |
| % of EIR requests completed on time | 89.6% | 91.9% | 89.5% | 89.9% | 90% |
| No. of Fife.gov.uk Sessions | | 10,200,000 | 7,043,300* | 7,714,300 | N/A |
| % of SAR requests complete on time | 83.9% | 81.6% | 82.4% | 84.1% | 80% |
| Number of Transactions by Customer Service Centres | 145,068 | 187,240 | 207,528 | 194,962 | N/A |
| Number of online transactions | 175,506 | 179,468 | 236,120 | 244,110 | N/A |
| Number of online accounts | 142,025 | 175,875 | 205,246 | 230,767 | N/A |

^{*}Reduction due to a change in the way sessions are measured

KPIs relating to service change plan deliverables:

Registration Services

Registration in Fife maintains high standards, with an accuracy of 97%, exceeding the national average of 95%. Nearly 9,000 events are registered annually, making Fife the third largest registration district in Scotland. Online bookings for births and deaths have been successfully introduced and widely welcomed by customers, reducing the need for phone and in-person enquiries. With the launch of the new booking system later this year, Teams appointments will further enhance accessibility and customer choice, supporting a move towards virtual-first, streamlined registration services. Integration with digital workflows and standardisation of processes will also reduce duplication, optimise resources, and improve efficiency across locations.

Council Tax and Revenue Collections

Customer & Online Services continues to maximise the collection of Council Tax, rent, and other council income, achieving strong collection rates despite external pressures. In 2024/25, Council Tax collection reached the target of 95.5% and Non-Domestic Rates collection reached 97.5%, exceeding the target of 97%. Effective billing, recovery, and proactive debt management ensure critical income streams are maintained, enabling the Council to fund frontline services and support vulnerable residents.

Digital self-service options, including online payments and account management, have further improved customer convenience and efficiency, reducing the need for telephone or in-person contact and allowing staff to focus on complex enquiries or high-priority cases.

Benefits

The Benefits team administers Housing Benefit, Council Tax Reduction, and Education-related benefits, providing vital financial support to vulnerable residents. Average processing times for new claims and changes remain a focus: although some timescales increased in 2024/25 due to staff turnover, DWP workload, and operational pressures, the team continues to actively engage with residents through benefit take-up campaigns and support for those transitioning to Universal Credit.

Efforts to streamline processing and improve accuracy are ongoing, ensuring residents receive support quickly, reducing delays, and minimising the risk of financial hardship.

Freedom of Information (FOI) and Environmental Information Requests (EIR)

The service maintains robust governance to manage information requests, with 86.7% of FOIs and 90% of EIRs completed on time in 2024/25. Ongoing improvements to internal processes and digital request management ensure timely, compliant responses while reducing administrative burden. A modular training approach for staff in information governance supports consistency and accuracy across all requests.

Complaints

Customer & Online Services (COS)

- Stage 1 Complaints (<5 days): COS consistently achieved high performance, with 2024/25 closing at 90% of complaints actioned within five days.
- Stage 2 Complaints (<20 days): Performance reached 85% in 2024/25. The service continues to focus on reducing resolution times for more complex cases, ensuring effective escalation and timely response.

Council-Wide Performance

- Stage 1 Complaints (<5 days): Across Fife Council, 90% of Stage 1 complaints were actioned within the target five days.
- Stage 2 Complaints (<20 days): Stage 2 complaints achieved 85% compliance within 20 days, showing improvement over some previous years but highlighting the ongoing need for efficient handling of escalated or complex complaints.

Customer Service Centres

The total number of transactions handled by Customer Service Centres has begun to decline after reaching a recent peak. In 2024/25, CSCs managed 194,962 transactions, down from 207,528 in the previous year. This reduction marks a shift in service demand, highlighting the need to monitor trends and adapt service delivery to ensure efficiency and continued customer support.

Repairs Centre

The Repairs Centre delivered strong operational performance in 2024/25, with call answering reaching 85.84%, slightly below the 90% target. This figure does not reflect the full volume of work, which includes call handling, emails, and complex scheduling for tradespersons. While some repair scheduling is automated, a substantial proportion still requires manual intervention due to reactive or non-standard work. The Centre works closely with Building Services to ensure KPI targets are met.

Digital Transformation and Efficiency Gains

Digital initiatives have significantly reduced reliance on manual input. 80% of online repair requests are now successfully integrated directly into the housing system, ensuring swift and seamless reporting. The remaining 20% of submissions, which fail due to incomplete or incorrect details, are quickly rectified by the team. This transition has freed resources to improve call handling, reduce avoidable contact, and focus on complex or urgent tasks.

Key priorities moving forward include enhancing self-service reporting, expanding automated workflows, and streamlining or eliminating manual scheduling for tradespersons. The current scheduling system, in operation for over 11 years, is due for replacement. The new system is expected to increase automation from 20% to 60%, reducing manual intervention, improving efficiency, and freeing staff to focus on higher-value tasks.

Web Team - Integration with Digital Customer Experience

Both Registration and Repairs services are being closely aligned with broader digital transformation objectives, including the upcoming content management system DXP (Digital Experience Platform) and the Al-powered chatbot, FIONA. Accurate, cleansed content and close collaboration between service teams and the web team ensure FIONA can respond to customer queries effectively, helping to divert routine enquiries away from phone and in-person channels. Future service-specific chatbots, such as the Planning Expert bot, will further support self-service and reduce pressure on frontline staff.

Our people

Headcount and full time equivalent (FTE) by service in 2024/2025:

• 434 Headcount, 384.4 FTE.

Workforce profile

• 66% of the workforce works full time and 95.6% are permanent.

Workforce age

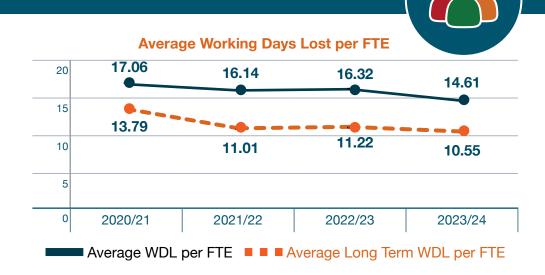
The average workforce age for Fife Council is 44.8 years in 2024/2025. Service comparisons are confirmed below:

- Average workforce age is 46.5 which is above the council average.
- Average age of leavers is 50.7 and new starts is 37.1. This has contributed to a slight reduction in the workforce age profile.
- 4.84% of the workforce is aged 24 and under.

Workforce Turnover

Fife Council turnover rate is 10.8% overall. In 2024/2025:

- Turnover rate is 6.2%. This is below the council average.
- 51.9% of leavers were aged 55 and over. The top reported leaver reason was resigned.



Our people

Key Points

Average working days lost per FTE (WDL) to sickness absence in Fife Council during 2024/2025 was 14.75, short term absences (under 28 calendar days) account for 4.02 days.

Average WDL in 2024/2025 is 14.61 days, long-term absences account for 10.55 days, and short-term absences account for 4.06 days.

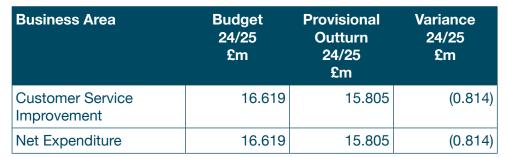
Focus is given on supporting employees through periods of ill health and mental health. The service has also seen the benefits of early referrals Occupational Health, this has given guidance and assurance to management of the support they are providing.

The formation of a Well Being group ensures that all aspects of support is in place and that the workforce feels supported. Across the service there is a consist approach to performance management with all teams using Talking Points and Personal Development Plans.

Managers and supervisors across the service have been upskilled, with 8 completing ILM courses, 2 completing First Line Managers Leadership Matters programme, and 4 undertaking the Institute of Revenues, Rates & Valuation (IRRV) training. The service will continue to prioritise workforce development, ensuring upskilling takes place consistently across all teams and service areas.

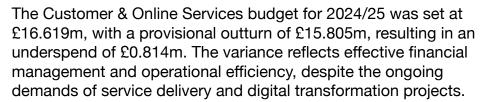
Recruitment has also been done in a more holistic way. Whilst conventional ways are still be used, the service is engaged with outside agencies like Kick Start, Fife Gingerbread, Disability Employment to bring in individuals for work experience and guidance in getting back into the workplace.

Our Budget



| | Budget 24/25 £m | Provisional Expenditure / (Income) 24/25 £m | Variance Overspend/ (Underspend) 24/25 £m |
|-----------------------|-----------------------|---|---|
| Staff Costs | 15.307 | 15.329 | 0.022 |
| Property Costs | 0.203 | 0.180 | (0.023) |
| Transport Costs | 0.039 | 0.039 | 0.000 |
| Supplies and Services | 3.592 | 3.475 | (0.117) |
| Third Party Payments | 2.143 | 2.414 | 0.271 |
| Total Expenditure | 21.284 | 21.437 | 0.153 |
| Internal Income | (3.920) | (4.757) | (0.837) |
| External Income | (0.745) | (0.875) | (0.130) |
| Total Income | (4.665) | (5.632) | (0.967) |
| Net Expenditure | 16.619 | 15.805 | (0.814) |

Key points



Expenditure Breakdown:

- Staff Costs (£15.329m, variance +£0.022m): Slight overspend due to recruitment and retention measures, offset by other efficiency savings.
- Property Costs (£0.180m, variance -£0.023m) and Supplies & Services (£3.475m, variance -£0.117m) came in under budget.
- Third-Party Payments (£2.414m, variance +£0.271m) were slightly above budget, reflecting necessary investment in outsourced services to maintain service levels.

Income:

- Internal income exceeded budget by £0.837m, primarily due to higher than anticipated Central Support Service recharges to the HRA.
- External income also exceeded budget by £0.130m, supporting service delivery and offsetting some expenditure.

Net Expenditure:

The overall net expenditure of £15.805m represents a positive variance against budget.



Our risks

We identify, track and manage a number of risks that would have an impact on service delivery. These tend to be ongoing risks with a range of control measures in place. We have also identified specific mitigating actions and will report on progress against these next year.

| Risk | Mitigating action |
|---|--|
| Workforce challenges - not having the right people in the right place at the right time | Alongside ongoing recruitment work we will update our business continuity plan |
| Critical technology failure | Develop Community Alarm contingency with Falkirk Council |
| Legal and Regulatory Compliance Failure | Develop an intervention policy to support regulatory compliance |
| Improper Data and information handling | New modular approach to mandatory training for information governance to be developed Issue a quick check guide to staff listing relevant procedures and processes |
| Lack of public information through loss of website | Develop basic temporary site in case of outage |

Risks are formally recorded in the strategic risk register and reported on annually. Robust processes are in place to review and assess risks regularly and action is in place to manage them including escalation procedures if required.

Performance assessment - Priorities & progress

Introduction - service delivery context and challenges

Much of our work concerns welfare and welfare benefits and demand for our support is increasing. Local evidence tells us inequality is widening. Changes to welfare benefits are being implemented and public sector resources are decreasing. In response we are working with other services to develop an integrated community support model of early help that prevents, or moves people out of, crisis and sustains a better quality of life within our communities (our No Wrong Door approach).

We are also exploiting new technologies to modernise self-service and routine transactions to free up staff to provide that enhanced support.

We have identified change and improvement priorities in this context and assess our progress against these in the first part of this section.

Meanwhile we continue to deliver a wide range of services day to day and look at how well core services are performing in the second part of this section.

This assessment combines a selection of the performance indicators we use to measure progress with relevant benchmarking information available. A full list of all our performance metrics is available at the end of this document and online.

Priorities & progress

Last year we set two priorities for change and improvement:

- Lead and Design No Wrong Door Customer Service Reforms
- Make Better Use of Digital Solutions to Enhance Service Delivery and Customer Experience

Progress over the past year and next-stage improvements are outlined in the following section.

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Performance assessment - Priorities and progress

Priority 1 **Lead and Design No Wrong Door Customer Service Reforms**

Deliver a more holistic and targeted approach to customer service by addressing the diverse and complex needs of residents through earlier intervention and more joined-up support. The No Wrong Door model ensures people can access the right help at the right time—regardless of their first point of contact.

By integrating services across welfare support, housing, the Scottish Welfare Fund, and benefits delivery, we reduce duplication, support prevention, and help residents move from crisis to stability.

Progress

- Crisis Grants applications fell from 32,349 in 2020/21 to 21,738 in 2024/25, suggesting earlier support is reducing reliance on crisis funding.
- Community Care Grants spend rose from £822k in 2020/21 to £2.5m in 2024/25, reflecting greater investment in stabilising households before crisis point.
- Repeat crisis grant applicants targeted outreach introduced for applicants with 3+ grants; early results show 60% of third repeat applicants engaged with additional council support (benefits checks, energy advice, debt support).
- Debt relief measures "Fair collection" policy applied to vulnerable households; council tax and school meal arrears written off where hardship is identified.
- Free School Meals automatic linkage with CTR/HB claims improved take-up and debt write-off for eligible families. Over £98k of meal debt was written off in 2024 with the support of grant funding.
- Income maximisation Investment in Low Income Family Tracker (LIFT) software supports proactive benefit take-up campaigns.
- Service Redesign / Data-Driven Highlights
- Customer journey mapping across Welfare Support, SWF, Housing and Community Assistance identified duplication and streamlined referrals.
- Outreach for repeat crisis grant applicants is reducing long-term reliance on emergency funds.
- Benefits team audit with Audit Scotland driving improved speed and accuracy in Housing Benefit and CTR claims.

Performance assessment - Priorities and progress

Areas for Improvement

- Strengthen coordination across council services to reduce duplication and ensure seamless transitions.
- Expand early intervention to reduce repeat crisis grant applications.
- Improve benefits processing speed and accuracy to manage rising workloads and Universal Credit transitions, addressing the additional 33,000 processes in 2024/25 that created backlogs.
- Develop community-specific support for fourth repeat applicants who need deeper engagement.

Priority 1 – Key Performance Indicators

| KPI / Metric | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target | Progress / Insight |
|---|-----------|-----------|-----------|-----------|-----------|--------|--|
| Crisis Grants issued | 32,349 | 29,770 | 32,597 | 26,309 | 21,738 | | Falling demand reflects stronger early intervention and targeted outreach. |
| Community Care Grant spend (£) | 822,416 | 1,156,009 | 1,563,144 | 2,292,709 | 2,511,000 | | Rising investment stabilises households earlier, reducing crisis reliance. |
| Crisis Grant spend (£) | 2,540,079 | 2,543,949 | 2,791,807 | 2,357,190 | 2,441,000 | | Spend steady despite fewer applicants, reflecting higher average award per case. |
| Total SWF spend (£) | 3,362,495 | 3,699,958 | 4,354,951 | 4,649,900 | 4,952,000 | | Overall spend increasing to support cost of living and prevention strategies. |
| Average Time to process new HB claims (in days) | 22.4 | 37.7 | 19.8 | 18 | 36.2 | ≤22 | Processing times rose in 2024/25 due to higher workloads and staffing changes, but recovery plans are in place to reduce backlogs and bring performance back within the 22-day target. |

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Priority 2 Make Better Use of Digital Solutions to Enhance Service Delivery and Customer Experience

We are leading a shift towards an integrated, digital-first model of customer service that makes it easier for people to self-serve while ensuring support remains available across phone, chat, and face-to-face channels when needed. By simplifying processes and joining up channels, customers can move between them without losing context, reducing avoidable contact and freeing staff to focus on complex cases.

Key to this transformation are service redesigns such as repairs, where digital scheduling is improving responsiveness and freeing up staff time, and registration, where online booking and upcoming virtual appointments are making services more accessible and efficient. Alongside this, the introduction of FIONA, our Al-powered chatbot, and the approved upgrade to a new Digital Experience Platform (DXP) will strengthen our ability to provide seamless, user-focused, and cost-effective services.

Progress in past year

- Digital Experience Platform (DXP): Business case approved November 2024, website procured March 2025, go-live November 2025. Will deliver personalised content, better analytics, and improved integration.
- FIONA chatbot: Launched June 2024, handling an average of 3,952 monthly interactions (up from an average of 156 last year using previous technology). Satisfaction on chat up nearly 30%, volumes up 20x.
- Online transactions: Increased from 135,427 (2020/21) to 244,110 (2024/25) (+80%).
- Online accounts: Grew from 81,245 in 2020 to 230,767 in 2024/25 (+184%).
- Website improvements: Scottish Welfare Fund and Council Tax Reduction pages redesigned; average time on page fell from 43s to 13s, showing faster information access.
- Repairs: Routine online repairs reporting integrated with Housing System, achieving 80% first-time success. Contact performance improved from 80.83% (2020/21) to 85.84% (2024/25).
- Registration: 57.3% of birth registrations and 23.7% of death registrations booked online in 2024, with 25% fewer calls to Contact Centre. Moving towards virtual appointments and reduced reliance on buildings.
- Web accessibility: Consistently above 87% AA/AAA compliance, reaching 91% in 2024/25.

Performance assessment - Priorities and progress

Areas for Improvement

- Ensure successful delivery and adoption of DXP (launch November 2025).
- Expand chatbot into service-specific bots (Planning Expert Bot first).
- Improve online death registration appointment uptake (currently 24%).

- Develop self-service portal + upgraded scheduling for repairs.
- Advance omnichannel integration to remove the need for customers to repeat information, creating a seamless journey that gets residents to the right support quickly.
- Strengthen collaboration with services to maintain relevance of online content.
- Expand website improvements across all areas, using customer feedback, data insights, and new DXP functionality to enhance the overall customer journey.

Relevant KPI details

| KPI / Metric | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target | Progress / Insight |
|--|---------|---------|---------|---------|---------|--------|--|
| Online transactions | 135,427 | 175,506 | 179,468 | 236,120 | 244,110 | | 80% growth since 2020/21; highlights shift to digital-first. |
| Online accounts | 81,245 | 142,025 | 175,875 | 205,246 | 230,767 | | Accounts up 184% since 2020/21; residents increasingly choosing online access. |
| Chatbot (FIONA) interactions (Average Monthly) | N/A | N/A | N/A | 156 | 3,952 | | Rapid adoption: FIONA launched June 2024, now averaging nearly 4,000 monthly uses. |
| Registration – births booked online (%) | N/A | N/A | N/A | 37.96% | 57.30% | | Birth registrations booked online, now the preferred contact channel. |
| Registration – deaths booked online (%) | N/A | N/A | N/A | 15.93% | 23.70% | | Uptake remains lower than the number of births, likely due to the demographics of this age group, but it continues to follow an upward trajectory. |
| Repairs contact performance (%) | 80.83% | 76.27% | 78.48% | 84.41% | 85.84% | 90% | Rising steadily; digital scheduling and automation improving responsiveness. |
| Accessibility compliance (AA/AAA) | 87% | 89% | 90% | 91% | 91% | 87% | Accessibility consistently high. |

Performance assessment - Operational delivery

Overview of progress







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All results against key indicators can be found in Appendix 1 and online at **www.fife.gov.uk/councilperformance** to facilitate feedback and scrutiny.

Warning

Progress

We are responsible for 2 Local Government Benchmarking Framework (LGBF) indicators, the latest set of LGBF data published covers 2023/24. More detail can be found at Explore the data | Benchmarking

| | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
|--|---------|---------|---------|---------|---------|
| Cost of collecting council tax per dwelling (£) | £1.68 | £1.53 | £2.58 | £-0.14 | -£1.64 |
| Income from council tax received by year end (%) | 93.6% | 95.3% | 95.8% | 95.2% | 95.5% |

Increase in council tax recovery from 95.2% in 23/24 to achieving target of 95.5% in 24/25 contributing to the council's budget to spend on services. Across all 32 local authorities' collection rates range from 89.5% to 98.2% with the average being 95.5%. The cost of collecting council tax continues to reduce with improved performance.

In 24/25 we increased the council tax charge on second homes to 200% bringing in an additional $\mathfrak{L}3,458,603$ in revenue achieving a 97.7% collection rate in this area. We also raised additional revenue of $\mathfrak{L}470,306$ by reviewing and removing 47,076 sole occupancy discounts through data matching.

Challenges

Revenue Collection

Balancing the need to take a holistic view of a customer's situation with the need to maximise revenue collection in difficult economic times will remain a challenge.

Scottish Welfare Fund (SWF)

Despite a slight decrease in the number of SWF applications during 2024/25, the budget was almost fully utilised. This includes the additional £2 million top-up from Fife Council, which was necessary due to rising costs of goods and the provision of higher-quality carpets. Expected ongoing pressure even though mitigation in place.

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Information Management

Overall, the volume of information requests has slightly declined due to a reduction in DPA exemption submissions. FOI and SAR requests continue to rise, with SAR volumes increasing by 14% in 2024/25, indicating greater public engagement and transparency. Enhanced workflows and targeted guidance have been implemented to support staff in managing increasingly complex requests

Benefits

Rising demand has added over 33,000 extra processes in 2024/25, creating backlogs and longer processing times, compounded by staffing pressures and Universal Credit transitions.

Digital Development vs. Expectation

Integrating new technology with existing systems continues to present challenges, particularly where projects depend on legacy infrastructure. The time required to engage with suppliers, clarify requirements, and agree on the scope of integration can extend project timelines.

Areas for improvement

Scottish Welfare Fund - maintain processing time scales by stabilising staffing resources within the team. Scrutinise monthly budget spend to ensure awards are in line with 'high priority' as any overspend will impact the budget and could see the fund have to move to the high most compelling award category. This means that crisis grants would be paid but community care grants would only be able to supply essential to those most in need.

Information Management - Performance continues to fall short of the Regulator's 95% compliance benchmark, highlighting the need for targeted improvement efforts. Response times are being adversely affected by limited staffing and infrastructure, particularly as the complexity of incoming requests increases. This combination of high demand and constrained resources has resulted in delays and missed deadlines, which in turn is impacting the quality and consistency of service delivery. While digital solutions are being procured to help manage these pressures, they remain in the implementation phase and are not yet fully operational, limiting their immediate effectiveness

Benefits – The team has received temporary funding from the DWP, allowing the recruitment of three temporary staff and the creation of a dedicated project team to explore the automation of incoming work from the DWP. While some automation has been implemented, a significant proportion is failing, the project team are investigating the causes and working closely with the software supplier to improve the integration. The team is also liaising directly with the DWP providing feedback on the quality of incoming data. These measures are intended to improve efficiency, reduce backlogs, and ensure more timely processing of benefits.

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Priorities for 2025/26

Customer and Online Services has a significant role to play in the next three years to support the council's 3-year change plan, and the policy priorities set out in the Plan for Fife particularly in terms of tackling poverty and prevention.

Over the next year we plan to strengthen the good performance and progress outlined in this report and build on the priorities for change and improvement set last year by focussing on:

Redesigning registration services to streamline process and integrate systems: moving from traditional to streamlined, virtual-first services and appointments online to improve accessibility, efficiency for customers and the council, lower costs and carbon footprint. This builds on the digital improvements already made: 57.3% of all birth registration appointments and 23.7% of death registrations were booked online in 2024. Next, we will introduce virtual appointments and reduce the number of buildings, standardise processes, reduce duplication and make better use of current resources.

Implement a new integrated customer service model across the council that supports seamless and effective self-service, allowing people to move effortlessly between channels—whether chat, social media, telephone, or face-to-face—without losing context or having to repeat information. This approach enhances accessibility and efficiency, empowering customers to serve themselves while freeing up staff to focus on more complex, value-added tasks. Building on recent digital advancements, online transactions have grown from 175,506 in 2021/22 to 244,110 in 2024/25, and online accounts have increased from 81,245 to 230,767 in the

same timeframe. Simplifying processes will not only drive income generation but also release resources to prioritise service delivery and preventative measures.

Continue to work on an effective for the No Wrong Door approach to provide a more holistic and targeted approach, addressing the diverse needs of residents and delivering comprehensive support and early intervention for those living in complex circumstances. This approach aims to improve outcomes for vulnerable residents.

Aim to integrate services more effectively, this reform will enhance efficiency, reduce delays, and ensure residents receive the right support at the right time. To strengthen this further, Customer Service Centres and associated buildings will be realigned to better reflect community support needs, ensuring physical access complements the improved digital offer and aligns with the principles of No Wrong Door. By integrating services more effectively, this reform will enhance efficiency, reduce delays, and ensure residents receive the right support at the right time.

Optimising digital solutions to improve repair scheduling for a more responsive service: moving from manual and fragmented processes to a streamlined, user-friendly online system that enables customers to easily report issues and schedule repairs. This improves responsiveness and transparency while reducing delays and administrative burden for staff. Recent improvements have contributed to an increase in the percentage of repair contacts answered, rising from 80.83% in 2020/21 to 85.84% in 2024/25, and customer satisfaction with online forms has increased to over 88% in 2024/25. Next steps include further enhancing self-service options, automating scheduling workflows, and reducing avoidable contact to free up resources for those who cannot or choose not to self-serve.

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Appendix 1 - Key Performance Indicators













■ No change



Objective COS Customer

| Performance Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target | Status | Trend |
|--|---------|---------|---------|---------|---------|--------|--------|----------|
| Customer and Online Services Stage 1 Complaints dealt actioned < 5 days | 92% | 96% | 93% | 97% | 96% | 90% | ~ | ^ |
| Customer & Online Services Stage 2 Complaints actioned < 20 days | 100% | 96% | 94% | 90% | 95% | 85% | ~ | ^ |
| Fife Council Stage 1 Complaints actioned < 5 days | 89% | 88% | 86% | 86% | 83% | 90% | | 4 |
| Fife Council Stage 2 Complaints actioned < 20 days | 80% | 84% | 76% | 75% | 75% | 85% | | Ψ |
| Number of Twitter Followers | 53,150 | 53,900 | 55,244 | 55,451 | 54,508 | N/A | 0 | ^ |
| Number of Facebook Fans | 52,441 | 53,613 | 56,472 | 56,472 | 61,393 | N/A | 0 | ^ |
| % agreeing that the council is good at listening to local people's views before it takes decisions (Scottish Household Survey) | 48% | 29% | 33% | 27% | N/A | 51% | | • |
| % agreeing that the council is good at letting people know about the kinds of services it provides (Scottish Household Survey) | 48% | 48% | 37% | 36% | N/A | 73% | | • |
| Number of Online Transactions | 135,427 | 175,506 | 179,468 | 236,120 | 244,110 | N/A | 0 | ^ |
| Number of Online Accounts | 81,245 | 142,025 | 175,875 | 205,246 | 230,767 | N/A | 0 | ^ |

Appendix 1 - Key Performance Indicators



Objective COS LGBF

| Performance Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 | Family Group Av 2023/24 | Target | Status | Trend |
|--|---------|---------|---------|---------|-------------------------------|--------|--------|----------|
| Cost of collecting council tax per dwelling (£) (LGBF) | £1.68 | 1.53 | 2.58 | -0.14 | £5.21 | £5.89 | ~ | ^ |
| Percentage of income due from Council Tax received by the end of the year (LGBF) | 93.60% | 95.30% | 95.80% | 95.20% | 95.80% | 95.50% | | ^ |

Objective COS P4F

| Performance Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target | Status | Trend |
|--|-------------|------------|------------|------------|------------|--------|--------|----------|
| Number of Crisis Grants | 32,349 | 29,770 | 32,597 | 26,309 | 21,738 | N/A | 0 | ↑ |
| Spend on Community Care Grants | £822,416.58 | 1156009.01 | 1563144.07 | 2292709.81 | 2576021.19 | N/A | 0 | Ψ |
| Spend on Crisis Grants | 2540079.33 | 2543949.24 | 2791807.41 | 2357190.21 | 2138718.72 | N/A | 0 | ^ |
| Total on Scottish Welfare Fund application | 3362495.91 | 3699958.25 | 4354951.48 | 4649900.02 | 3459329.54 | N/A | 0 | ^ |
| Number of Community Care Grants | 10,853 | 4,085 | 4,476 | 4,384 | 3,274 | N/A | 0 | ↑ |

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Appendix 1 - Key Performance Indicators

Key KPI Status: VOK Warning Alert O Data only ? Unknown











Trend: 1 Improving

■ No change

↓ Getting worse

Objective COS Resources

| Performance Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target | Status | Trend |
|--|---------|---------|---------|---------|---------|--------|----------|----------|
| Customer & Online Services - Average WDL per FTE | DIV/0 | 17.06 | 16.14 | 16.32 | 14.61 | 16.2 | / | ^ |
| Customer & Online Services - Average Long Term WDL per FTE | DIV/0 | 13.79 | 11.01 | 11.22 | 10.55 | 11.1 | / | ^ |
| COS Workforce who are Female (%) | 79.70% | 73.60% | 75.80% | 78.70% | 78.60% | N/A | 0 | ^ |
| COS Workforce who are Full-time (%) | 68% | 64.70% | 63.50% | 68.60% | 66.60% | N/A | 0 | ↑ |
| COS Workforce who are Permanent Employees (%) | 88.90% | 88.80% | 91.90% | 92.40% | 95.60% | N/A | 0 | ^ |
| COS Number of Voluntary Redundancies (FTEs) | 15 | 0 | 0 | 0 | 0 | N/A | 0 | Ψ |
| COS Employees aged 24 and under (%) | 2.60% | 4.70% | 5.80% | 4.10% | 4.80% | N/A | 0 | ^ |
| COS Employees aged 29 and under (%) | 7% | 10.80% | 13.20% | 10.60% | 11.80% | N/A | 0 | ^ |
| COS Employees aged 55 and over (%) | 24% | 31.20% | 31.60% | 31% | 31.60% | N/A | 0 | ^ |
| COS Number of WYI Bids | 0 | 0 | 2 | 0 | 0 | N/A | 0 | Ψ |
| COS Number of WYI Programme new starts | 1 | 0 | 0 | 0 | 0 | N/A | 0 | Ψ |
| Customer & Online Services Employee Turnover | | | | 7.57% | 6.22% | 10% | | Ψ |
| Cost of collecting Non Domestic Rate per chargeable property (£) | £14.19 | £3.92 | £1.96 | -£0.57 | £0 | N/A | 0 | ^ |
| Cost of collecting sundry debtors per debtor account issued (£) | £6.71 | £4.73 | £4.78 | £4.21 | £0 | N/A | 0 | ↑ |

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Appendix 1 - Key Performance Indicators

Key KPI Status: VOK Warning Alert O Data only ? Unknown













■ No change

↓ Getting worse

Objective COS Service Operations

| Performance Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target | Status | Trend |
|--|---------|---------|---------|---------|---------|--------|----------|----------|
| In year collection of Non Domestic Rates (%) | 98.70% | 99% | 97.60% | 96.60% | 97.50% | 97% | ~ | Ψ |
| Average Time to process new HB/CTR claims (in days) | 20.4 | 37.7 | 19.8 | 18 | 36.2 | 22 | | • |
| Average Time to process notification of changes (days) | 3.5 | 5.6 | 3 | 4 | 13.2 | 7 | | Ψ |
| Average Time to Process New CTR Claims (days) | 23.8 | 31 | 19.3 | 16.7 | 33.7 | 22 | | Ψ |
| Average Time to Process CTR Changes (days) | 9.1 | 11.1 | 4.7 | 3.8 | 11.1 | 7 | | Ψ |
| Percentage of Housing Benefit overpayments recovered in the year | | 28% | 29% | 38% | 36% | 35% | V | • |
| % of Sundry Debt collected in year | | | | | 89.20% | 89.50% | | ^ |
| % of Contacts Answered - Revenues | | 87% | 82.70% | 83.40% | 83.20% | 90% | | Ψ |
| % of Contacts Answered - Contact Centre | 86.93% | 86.43% | 88.38% | 91.04% | 91.73% | 90% | ~ | ↑ |
| Registration input accurately % | 97.80% | 98.40% | 98.40% | 97.70% | 97% | 97% | ~ | • |
| Average processing time - Crisis Grants (days) | 1 | 3 | 2 | 1 | 2 | 1 | | Ψ |
| Average processing time - Community Care Grants (days) | 21.2 | 37.3 | 9.8 | 20.4 | 15.6 | 15 | | ↑ |
| % of Contacts Answered - Out of Hours | 92.47% | 96.72% | 97.70% | 98.89% | 99.14% | 90% | ~ | ↑ |

Appendix 1 - Key Performance Indicators

Key KPI Status: V OK A Warning Alert O Data only ? Unknown Trend: 1 Improving No change V Getting worse

| Performance Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 | Target | Status | Trend |
|--|---------|---------|------------|-----------|-----------|--------|----------|----------|
| % of Contacts Answered - General | 88.53% | 81.34% | 83.78% | 83.19% | 87.07% | 90% | | ↑ |
| % of Contacts Answered - Repairs | 80.83% | 76.27% | 78.48% | 84.41% | 85.84% | 90% | | ^ |
| % of Contacts Answered - Social Work | 86.32% | 88.99% | 90.16% | 93.02% | 96.16% | 90% | ~ | ^ |
| Number of welfare fund applications made | | 33,855 | 37,073 | 30,693 | 25,012 | N/A | 0 | Ψ |
| % FOI requests completed on time | 88.30% | 88.55% | 84.49% | 88.15% | 86.68% | 90% | | Ψ |
| % of EIR requests completed on time | 93.55% | 89.64% | 91.92% | 89.48% | 89.96% | 90% | | Ψ |
| No. of Fife.gov.uk Sessions | | | 10,200,000 | 7,043,300 | 7,714,300 | N/A | 0 | Ψ |
| % of SAR requests complete on time | 86.81% | 83.99% | 81.64% | 82.35% | 84.12% | 80% | V | ^ |
| Number of Transactions by Customer Service Centres | 83,192 | 145,068 | 187,240 | 207,528 | 194,962 | N/A | 0 | Ψ |

25 September 2025

Agenda Item No. 8



Revised Housing Estate Management Approach - Review of Housing Garden Fencing Policy

Report by: John Mills, Head of Housing

Wards Affected: All

Purpose

The Housing Garden Fencing Policy was approved at the Cabinet Committee on 12th September 2024. The purpose of this report is to provide an update on progress following the implementation of this new policy position.

Recommendations

The Committee is asked to:

- (1) Note the steps taken to implement the Housing Garden Fencing consistently across Areas and to devolve budgets to the Area Housing Managers.
- (2) Note that requests for new or replacement fencing should continue to be managed within existing budget provisions. Availability of funding beyond 2025/26 will be subject to review and determined as part of setting future years' HRA budgets.

Resource Implications

Devolved HRA budget is currently in place and managed by the Area Housing Managers for garden fencing repairs and replacement works.

Legal & Risk Implications

There are no additional legal or risk implications arising from this report.

Impact Assessment

An EqIA summary was previously completed when the Housing Garden Fencing Policy was approved by Cabinet Committee.

Consultation

Consultation has been undertaken with Area Housing Managers and Building Services colleagues as part of this preliminary review.

1.0 Background

- 1.1 The findings from the Fencing Test of Change tested the principles and associated funding requirements for a Housing Garden Fencing Policy. This exercise was undertaken as part of the Revised Estate Management Approach. Cabinet Committee approved the policy position on the 12th of September 2024. This means that individual tenant requests for new or replacement fencing can be considered where there is available budget.
- 1.2 Guidance was issued to staff so that requests for repairs or new fencing are dealt with consistently across the Areas. The Area Housing Manager is now responsible for spending on garden fencing, and this can only be authorised within their budget allocation. The total budget for 2025/26 is £1.7 million for both repairs and new fencing and this has been based on previous years spend. This budget has been devolved prorata and table one below shows the amounts that have been made available this year to each of the Areas. A proportion of each of the devolved budgets should be retained for contingency and to deal with requests of a health and safety nature throughout the year.

Table one

| Area | Fencing budget split by Area |
|-----------------|------------------------------|
| Cowdenbeath | £ 305, 830 |
| Dunfermline | £ 185,980 |
| Glenrothes | £ 257,720 |
| Kirkcaldy | £ 385,731 |
| Levenmouth | £ 245,819 |
| North East Fife | £ 205,020 |
| South West Fife | £ 113,900 |
| Total Amount | £ 1,700,000 |

1.3 The Policy states that priorities for new fencing should be agreed in consultation with local elected members. Updates on fencing expenditure for both repairs and new fencing should be a standing agenda item for discussion at Ward meetings. In each Area, records should be maintained of the levels of demand for fencing so this can be monitored and considered for future budget planning purposes.

2.0 Issues and Options

2.1 From a preliminary review the issue of capacity within the Fencing Team to carry out inspections and then schedule the work has been highlighted as an issue. Unfortunately, the situation has been exacerbated by the severe storms that have been experienced this year. Building Services have confirmed they are working through the backlog of requests, and all surveys will be completed in the next few weeks. Repair tickets are being worked through by the dedicated inhouse team, supervision has increased, and a

- subcontractor was recently appointed to assist with the volume of work. Although it will be weather dependent any current backlogs should be resolved within 2-3 months.
- 2.2 Feedback would suggest the demand for garden fencing remains high for repairs, renewal or to assist with neighbour disputes. There would appear to be a desire on the part of tenants to have their own safe and secure garden space. Garden fencing has remained within the top three priorities for external improvements in the Annual Tenants Survey. 28.02% of those surveyed last year out of a sample of 910 tenants listed an improved garden fence as one of the main improvements sought.
- 2.3 We can only contribute to owner- led fencing where there is available budget and the proposed works would also be of benefit to Council tenants. Unfortunately fencing work cannot proceed in situations where owners have a shared responsibility and do not agree to contribute their fair share of the costs. It is not sustainable for the HRA to subsidise private owners by meeting the full cost of any proposed fencing works.

3.0 Conclusions

3.1 Funding for new fencing and repairs needs to be met within the existing HRA revenue budget. Requests for fencing are budget dependent, and any works can only be authorised by Area Housing Managers if they are within budget limits. Expectations therefore need to be managed and there is no new or additional budget currently available to extend the scope of this policy statement.

Report Contact

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People and Communities Scrutiny Committee

Fife W

25 September 2025

Agenda Item No. 9

Housing Services – Annual Assurance Statement and Annual Service Review Report 2024/25

Report by: John Mills, Housing Services, Communities Directorate

Wards Affected: N/A

Purpose

To present an integrated annual report for scrutiny which combines service planning, change and improvement activity, operational delivery and an assessment of performance for 2024/25. The report also presents recommendations for submission of the Annual Assurance Statement to the Scottish Housing Regulator, based on regulatory guidance.

Recommendation(s)

The Scrutiny Committee is invited to:

- (a) Agree the wording of the draft Annual Assurance Statement 2025 based on the compliance position at 31st March 2025 (Appendix 1).
- (b) Authorise the Scrutiny Committee Chair and the Housing & Building Services Spokesperson to sign the Annual Assurance Statement and agree to the submission by 31st October 2025.
- (c) consider and comment on the annual service review report format and related online performance information;
- (d) review the progress and performance of Housing Services for 2024/25 and the activity undertaken to date and,
- (e) note the service planning and change priorities for 2025/26 and the longer-term direction of travel.

Resource Implications

There are no resource implications arising from this report.

Legal & Risk Implications

There are on-going legal requirements for Committee highlighted within this report, linked to a significant risk of regulatory intervention if the Council does not adhere to the standards and expectations set through the Scottish housing regulatory framework.

There are risks in not meeting Best Value and community planning requirements that can lead to additional monitoring/audit, external intervention and/or loss of public confidence.

Impact Assessment

An EqIA is not required as this report does not propose any changes to policies or services.

Consultation

This paper was informed by performance improvements over 2024/25 and associated Service, CLT and CET engagement. Consultation on the Annual Assurance Statement has been conducted with the Fife Tenants Forum to support the required level of assurance.

1.0 Introduction

- 1.1 This report builds on the revised Annual Review Report format introduced last year and more strongly aligns change and service planning alongside service performance analysis linked to operational management plans relating to finance, risk, workforce and digital development.
- 1.2 The report attached at Appendix 2 considers the performance of the Housing Services in relation to the Council's policy priorities set out in the Plan for Fife; key indicators; financial and workforce pressures and; how we compare in relation to other similar services in other Scottish councils, through the Local Government Benchmarking Framework.
- 1.3 Individual service indicators and results are published online in advance of this annual review to facilitate scrutiny and feedback. These are available at: Council plans and performance | Fife Council
- 1.4 In February 2024, the Scottish Housing Regulator published an updated regulatory framework for social landlords which continues to be based on powers available through the Housing (Scotland) Act 2010. The framework focuses on key regulatory priorities to meet the standards and outcomes of the Scottish Social Housing Charter, duties to help people who are homeless, ensure tenant and resident safety while promoting equality and human rights.
- 1.5 Section 3 of the regulatory requirements reinforces social landlords' responsibilities to meet legal duties and adhere to statutory guidance, including providing an Annual Assurance Statement as discussed in sections 2.0 and 3.0 below.

2.0 Annual Assurance Statement Requirements

2.1 From 2019, social landlords must submit between April and October of each year an Annual Assurance Statement providing assurance that their organisation complies with all parts of the regulatory framework. In terms of local authorities, the statement must be

- submitted by the relevant committee, in the context of Fife Council this being the People & Communities Scrutiny Committee.
- 2.2 Where the Council does not fully comply, the Annual Assurance Statement must set out how and when the necessary improvements will be made to achieve compliance. Judgement must be determined on the materiality and significance of any issues of noncompliance, including whether it would affect the interests and safety of tenants and residents, threaten service delivery, or bring the Council into disrepute.
- 2.3 The People & Communities Scrutiny Committee must agree to the assurance approach and weigh up the evidence and seriousness of issues to determine whether it is material and should be disclosed. Importantly, feedback from tenants and other service users must be considered as part of the assurance approach. All statements will be published and will form part of the regulatory view of the organisation.

3.0 Annual Assurance Statement 2025

- 3.1 The Scottish Housing Regulator has indicated that issues of non-compliance with the regulatory standards need only to be reported if they are material and significant, a judgement to be made by this Committee. Based on the outturns of the Annual Return on the Charter and concerns expressed by the Scottish Housing Regulator, wording for the draft Annual Assurance Statement 2025 is proposed in Appendix 1 for Committee consideration.
- 3.2 The Scottish Housing Regulator continues to engage with the Service around homelessness, with a particular focus on the provision of temporary accommodation and outcomes for people who are homeless. Improvement actions have been identified for delivery during 2025-26 and are included in the draft Annual Assurance Statement.
- 3.3 In terms of non-compliance with tenant & resident safety, the council did not meet statutory requirements with gas safety, electrical safety and fire safety. Work to rectify this includes enforced access to address no access issues. This will help increase compliance levels moving forward. Damp & Mould is also recognised as a major risk to health. An established approach is in place for dealing with referrals promptly to minimise risk.
- 3.4 The Annual Assurance Statement (Appendix 1) contains full details of the reasons for non-compliance and the improvement actions to rectify these. Additionally, pressure areas are identified for 2025-26 alongside mitigation actions to help minimise these.

4.0 Housing Services – Key Messages 2024/25

4.1 During 2024/25, although homelessness demands remain high, good progress has been recorded with reducing the number of live cases whilst also reducing the number of households placed in B&B type accommodation. To improve tenant & resident safety with electrical and fire safety requirements, an enforced access procedure has been implemented to ensure necessary works can be carried out. This should increase compliance moving forward.

- 4.2 Performance across Annual Return on the Charter indicators has generally been positive with improvement recorded across the majority of areas. An increase in the number of mainstream tenant satisfaction surveys conducted by external consultants has had a positive impact on the robustness of data. Satisfaction has increased across all areas and feedback received from the consultation will help inform continuous improvement moving forward.
- 4.3 A small number of indicators evidence deterioration in performance over the last year. Where these are immaterial for purposes of the Annual Assurance Statement, improvement actions will still be progressed in line with the Services Pathway to Improvement 2023-26. Aside this, the Service have recognised some internal targets are too ambitious when comparing against local authority averages and top quartiles. It was agreed that to maintain a dynamic approach to performance, and keep ambitions in scope, targets would be reviewed and reset for the final year (2025/26) of the Pathway, alongside identifying improvement actions to be taken forward.
- 4.4 During 2025/26, the service aspires to ensure statutory duties are met in relation to areas identified as material non-compliance in the Annual Assurance Statement (homelessness and tenant & resident safety). To compliment this, work will evolve through delivery of Service Change Plan priorities to respond to current challenges. This includes ambitions around climate change, enhancing independent living, reshaping operating arrangements, developing joined up working to promote tenancy sustainment and improving policy and outcome alignment.
- 4.5 The full Annual Service Review Report is set out in Appendix 2.

5.0 Conclusion

5.1 The report provides an integrated view of service planning, operational delivery, change and improvement activity and an assessment of performance for 2024/25 as well as the draft Annual Assurance Statement 2025 which is proposed based on the 2024/25 performance position.

Appendix 1 – Annual Assurance Statement 2025
Appendix 2 – Housing Services, Annual Service Review Report 2024/25
Appendix 2a – HS Scrutiny Report – Pathway Performance

Report contacts

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Background Papers

The following papers were relied on in the preparation of this report in terms of the Local Government (Scotland) Act, 1973:

Scottish Housing Regulator (2024) Regulation of Social Housing in Scotland Regulatory Framework | Scottish Housing Regulator

Scottish Housing Regulator (2024) Annual Assurance Statement – Statutory Guidance Annual Assurance Statement | Scottish Housing Regulator.

Appendix 1 – Fife Council Draft Annual Assurance Statement 2025

The People & Communities Scrutiny Committee at a meeting on the 25th September 2025 sought appropriate assurance that Fife Council Housing Service comply with all relevant requirements of the Scottish Housing Regulatory Framework; relevant standards and outcomes in the Scottish Social Housing Charter; and relevant legislative duties. Evidence has been considered through regular performance reporting and liaison with the tenant forum to support the required level of assurance.

On review of the evidence provided, it can be confirmed the Council recognises material non-compliance in the following standards and outcomes of the Scottish Social Housing Charter for tenants, people who are homeless and other service users. These areas are a focal point for improvement throughout 2025-26.

Areas of Non-Compliance:

Homelessness

During 2024-25, a slight reduction in new homeless presentations is evident. Pressure on temporary accommodation remains significant with demand and supply constraints resulting in households staying longer in temporary accommodation. Despite this, a reduction in the use of hotels and B&B accommodation is evident, with plans developing to reduce the use of hostel accommodation in 2025-26. Live homeless cases reduced from 1,938 to 1,678 in year as a result of increased allocations, a focus on prevention and enhanced case management. The Service continues to focus on homelessness pressures and meeting statutory duties, as part of a core strand of the Housing Emergency response. The improvement actions currently under implementation are to:

- Boost rapid rehousing and minimise customer transitions by increasing scatter flat flipping from 100 to 200 annually.
- Enhance the number of property acquisitions to meet the needs of homeless households and those from resettlement / humanitarian schemes.
- Develop a temporary and supported accommodation strategy which will outline plans to decommission or reprovision unsuitable accommodation.
- Review frontline services linking to Fife Council No Wrong Door transformational change programme.
- Proactively redevelop the housing advice, options and prevention framework to promote informed housing choices and pathways.
- Implement the Voids Service Improvement Plan to reduce relet times to 25 days and reduce void rent loss while promoting a transfer led approach to housing allocations.
- Review the Housing Allocation Policy to promote a simplified, partnership focus on housing need and promote prevention through managed pathways for those most at risk of homelessness.

Resources permitting, additional actions which are being considered for 2025/26 (some of which link to the Housing Emergency Strategic Statement) are:

- Enhance community-based temporary accommodation, create a Private Sector Leasing scheme and explore other private sector interventions to help achieve statutory duty compliance.
- Implement objectives in temporary and supported accommodation strategy to enable plans to decommission or reprovision unsuitable accommodation.
- Enhance a revised frontline housing options service as part of a Whole Systems and Wider Task Force approach, to prepare for a Homelessness Prevention Duty.
- Seek cross organisational support to upscale Housing First tenancies from 115 to 200 and continue to diversify the programme.
- Build on learning from Health & Social Care Partnership tests of change to redevelop commissioned services, focusing on housing and accommodation-based support.

Tenant and Resident Safety:

With regards to tenant and resident safety, compliance is recorded against water safety, lift safety and asbestos. A robust programme of work is in place to address the following tenant and resident safety requirements where Fife Council are not fully compliant. These areas are closely monitored to ensure compliance moving forward.

Gas Safety

The Council recognise non-compliance in six cases where gas safety checks were not carried out within timescale, thus breaching a statutory duty. All failures were linked to procedural failures where a change to gas reporting systems resulted in a temporary issue with anniversary dates. To fully rectify this and prevent any future failures, the improvement actions in place for 2025-26 are to:

- Implement an improved procedure and liaise with area team colleagues to ensure a second gas safety check is conducted prior to keys being handed over to new tenants.
- Continue close monitoring of properties, processes and procedures through the gas governance group.

Electrical Safety

As of 31st March 2025, 3,358 properties did not have a valid electrical safety certificate. This is the outcome of denied access by tenants, resulting in a backlog of properties without a valid certificate.

To ensure compliance moving forward, the improvement actions identified for 2025-26 are to:

- Conduct face-to-face communication with tenants denying access to explain the importance of electrical safety inspections and the benefits for both tenants and properties.
- Implement an enforced access procedure where access is denied on two previous occasions. This will mirror the process progressed for no access gas safety cases.
- Conduct in excess of 6,000 electrical safety tests per annum to ensure the backlog is cleared.
- Implement a new Housing Asset Management System to allow closer monitoring of component replacement programmes.

Fire Safety

As of 31st March 2025, 890 properties recorded non-compliance with fire and smoke alarm requirements. This is the result of denied property access preventing the installation of interlinked smoke alarms and the checking of anniversary dates. Duplication is recorded between the non-compliant fire safety properties and non-compliant EICR properties impacted by denied access.

To ensure compliance moving forward, the improvement actions identified for 2025-26 are to:

- Implement an enforced access procedure where access is denied on two previous occasions. This will mirror the process progressed for no access gas safety cases.
- Implement a new Housing Asset Management System to allow closer monitoring of component replacement programmes and improved accuracy of recording and reporting.

A programme of work is on-going in two high rise blocks in Fife to improve fire safety. The £7 million large scale works include the replacement of External Wall Insulation, an upgraded heating system, internal fire safety works including a fire alarm evacuation system and the replacement of older kitchens and bathrooms. Work is well underway with the completion anticipated by December 2025.

On 26th June 2025, Cabinet Committee agreed to a series of actions to further enhance fire safety in high-rise and medium-rise flats, sheltered housing and homeless hostels as a result of the Scottish Government response to the Grenfell Tower Inquiry phase 2. Over a 5-10-year period, a 4-stage process will be implemented to conduct

improvements and minimise current and future risk. A costed work programme, through the HRA Capital Plan, will be drawn up over coming months.

Damp & Mould

Fife Council recognise the legal, health and reputational risks of failing to effectively tackle damp and mould in Council housing. During 2024-25, 2,353 referrals were received and dealt with through a proactive approach established for tackling dampness, condensation and black mould. The approach involves a dedicated team resourced to offer specialist advice, a Building Services team and external specialists who undertake dampness mitigation work and fuel poverty support and advice where this is identified as a contributing factor. Damp, mould and condensation routine referrals continue to be received and dealt with in a timeously manner.

Pressures:

The Committee considered pressures for 2025-26 and the mitigation measures to support these.

Housing Emergency

On the 21st March 2024, Fife Council declared a housing emergency due to the unprecedented pressures on housing and homelessness services. During June 2025, Cabinet Committee approved a Housing Emergency Strategic Statement and 24 high impact and priority actions for further consultation and development. The actions follow the themes of; maintaining the supply of affordable housing, making best use of existing properties and enhancing housing access and prevention of homelessness as outlined as the structure of the High-Level Action Plan in June 2024.

The approach will be developed and refined through the governance structure and continued engagement with the Scottish Government Housing Emergency Unit, peer local authorities and national bodies such as ALACHO, CIH Scotland and Shelter Scotland.

Average time to relet properties

In 2024-25, the average time to relet reduced to 36.74 days which is just outside local authority top quartile performance. The Voids Governance Group continues to implement change and react to a recent Tenant and Resident Scrutiny Panel report with the intention to achieve below 25 days by the end of 2025-26. A technical team has been established to oversee voids from pre-termination to final clean. Arrangements are ongoing to re-provision and improve the Clean and Clear contract. There are ongoing issues with utilities partnerships following the unexpected departure of delivery partner Utilita. The Governance Group are confident a new partnership will be in place soon.

Housing Revenue Account (HRA) and Capital Plan Viability

Following a series of below inflation rent increases and cost of borrowing pressures on the financial viability of the HRA, the 30-year HRA Business Plan and Capital Plan is placed under increased risk. This restricts the Council's borrowing ability to fund affordable housing programmes, stock improvements to meet SHQS (including non-traditional housing stock), Social Housing Net Zero Standards and improved fire safety measures as a result of the Grenfell Tower Inquiry phase 2. To ensure future viability, a robust business plan review process is in place, alongside reviewing service efficiencies and consideration of service delivery deferments in non-statutory areas.

Equalities and Human Rights:

Fife Council recognises it has responsibilities under the Equality Act 2010 and the Human Rights Act 1998. It is committed to promoting equality, addressing discrimination and providing housing as a human right, despite the challenges faced through the housing emergency. Some examples of how this is achieved are:

- Collecting equalities data on our staff, tenants, homeless customers, Gypsy/Travellers and service users to help understand needs and being clear on how data is used.
- Completing equality impact assessments and carrying out consultation on all new strategies, policies, regulation, programmes and decisions, prior to approval through Committee.

- Safeguarding people with protected characteristics through the provision of Gypsy/Traveller sites, temporary accommodation, older persons and specific needs housing, and refuge provision.
- Implementing a 3-year capital improvement programme of work to Gypsy/Traveller sites in Fife to install chalets and energy efficiency improvements, following consultation with site tenants.
- Eliminating discrimination and promoting diversity through extensive staff training, including equality and diversity, equality in recruitment, mental health and gender equality.

People & Communities Scrutiny Committee Date: 25th September 2025

| Councillor Judy Hamilton | Cllr Gary Holt |
|--|--|
| Spokesperson Housing and Building Services | Convenor People & Communities Scrutiny Committee |
| | |
| | <u> </u> |
| Date: XX October 2025 | Date: XX October 2025 |



Communities Directorate

Housing Services Annual Service Review Report 2025

Introduction

This report reflects the performance of Housing Services for 2024/25. It covers the period April 2024 to March 2025, highlighting our delivery, progress, change and improvement plans for 2025/26.

We have considered our performance in relation to the council's policy priorities set out in the Plan for Fife; key indicators; financial and workforce pressures and how we compare in relation to other similar services in other Scottish councils, through the Local Government Benchmarking Framework (LGBF).

Individual service indicators and results are published online in advance of this annual review to facilitate scrutiny and feedback.

These are available at www.fife.gov.uk/councilperformance

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Contact information

For further information or discussion please contact:

John Mills Head of Housing Services john.mills@fife.gov.uk Please note, performance data can run behind the period of this report. This is due to data gathering requirements including national benchmarking. The most up-to-date information available has been used to inform this report.

Service overview

Housing Services is part of the Communities Directorate and provides landlord services to over 31,000 council houses in Fife by managing housing lists, letting void properties, supporting tenants' rights, ensuring tenants meet their responsibilities, providing assistance to help sustain tenancies and improving house condition through repairs and maintenance.

Additionally, over 2,500 households present as homeless on an annual basis. Assistance with homelessness is provided through prevention, offering advice and support, providing temporary accommodation, assisting with access to permanent accommodation and by working with the voluntary sector to provide additional services.

The Service aims to 'provide housing choices for people in Fife' and a range of housing outcomes have been established to help provide everyone with access to a safe, high-quality home that is affordable and meets their needs. To help achieve this ambition, as well as promote equality in housing and help eradicate poverty, ten outcomes linking to the following five priorities are identified in the Local Housing Strategy 2022-2027:

- Ending Homelessness
- More Homes in the Right Places
- A Suitable Home
- A Quality Home
- A Warm Low Carbon Home

The Local Housing Strategy supports the Plan for Fife, principally through the 'Thriving Places' theme where it has the lead responsibility for increasing the supply of new housing and improving housing conditions in the private sector. Links to other key plans include the delivery of specialist housing and adaptions through the Health and Social Care Strategic Plan and the delivery of energy efficiency home improvements through Fife's Climate Change Action Plan.

Housing Services are also progressing a range of work through the Service Change Plan. The plan sets out how the Service will further evolve to deliver Service ambitions, priorities and continuous improvement over the period 2025-28.

Demand & Delivery Overview 2024/25

Demand - 2024/25

Housing demand can be summarised as follows:



Fife Housing Register

11,462 applicants

at April 2025 (excluding those with zero points)



Homeless applicants

2,655 households

presenting as homeless during the year



Homeless live cases

1,678 households

seeking permanent accommodation at 31.03.25



Unsuitable acc. order breaches

32 breaches relating to temporary

accommodation

Assets - 2024/25

Fife Council Housing Services recorded the following in relation to assets at 31.03.25:



31,243 properties

owned and managed by Housing Services. This includes scatter flats, sheltered housing and group homes



993 temporary accommodation scatter flats (included in total housing stock

figure above)



7 hostels

owned by the Housing Revenue Account



166 Mid-Market Rent units

owned and leased out to housing associations to manage



3 Gypsy/Traveller Sites

containing 46 pitches. 17 chalets installed on pitches at present with plans in place to expand this over the next 2 years.

Our People



Headcount and full time equivalent (FTE) by service in 2024/2025:

660 Headcount, 606.9 FTE.

Workforce profile

• Workforce is predominantly full time (73%) and permanent (97.6%).

Workforce age

The average workforce age for Fife Council is 44.8 years in 2024/2025. Service comparisons are confirmed below:

- Average workforce age is 47.5 which is above the council average.
- Average age of leavers is 52.5 and new starts is 39.6. This has contributed to a slight reduction in the workforce age profile.
- 2.42% of the workforce is aged 24 and under.

Workforce Turnover

Fife Council turnover rate is 10.8% overall. In 2024/2025:

- Turnover rate is 5.9%. This is below the council average.
- Almost 60% of leavers were aged 55 and over. The top reported leaver reason was retirement.

Working days lost

Average working days lost per FTE (WDL) to sickness absence in Fife Council during 2024/2025 was 14.75, short term absences (under 28 calendar days) account for 4.02 days.

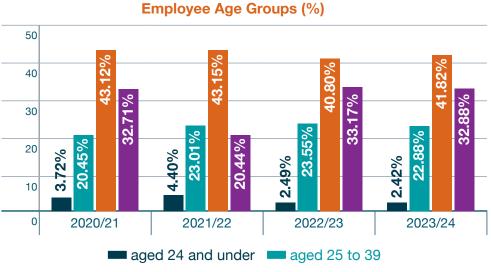
 Average WDL in 2024/2025 is 16.07 days, long-term absences account for 12.29 days, and short-term absences account for 3.78 days.

Key points

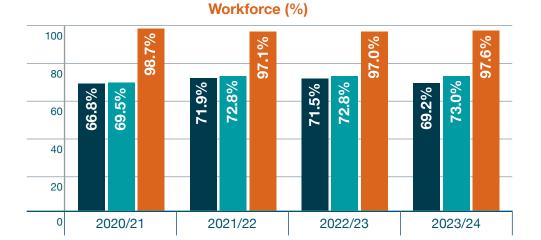
- The Service promotes professionalism through the Housing Training Academy, in partnership with the CIH, and supports the CIH Professionalism Commitment with new processes and joint guidance.
- The Housing Training Academy offers career progression opportunities via training, qualifications, development, and a Leadership Programme.
- Protected learning time has been introduced across the Service.
- Young people are supported into traineeships to initiate careers in housing.
- Employee absence is monitored, and Attendance
 Management Panels have been implemented. The Service
 supports employees to have good attendance through the roll
 out of a pilot with the Attendance Management Unit.
- Health and well-being are prioritised through mentally healthy workplace training for managers and Mental Health First aiders.











■ % Female ■ % Full time ■ % Permanent

Our Budget



Appendix 2a

- KPIs

Housing Services includes both General Fund Housing (GFH) and the Housing Revenue Account (HRA). GFH sits within the General Fund whilst the HRA is a separate ring-fenced account. The tables below outline the financial position for both GFH and HRA.

General Fund (GFH)

| Business Area | Budget 24/25 £m | Provisional Outturn 24/25 £m | Variance 24/25 £m |
|----------------------------|-----------------------|---------------------------------------|-------------------------|
| Private landlords & HMO | 0.029 | (0.043) | (0.072) |
| Safer Communities | 3.139 | 3.140 | 0.001 |
| Management & Support | 0.704 | 0.569 | (0.135) |
| Affordable Housing | 0.082 | 0.082 | 0.000 |
| Private Housing Investment | 2.298 | 2.244 | (0.054) |
| Homelessness | 6.846 | 6.450 | (0.395) |
| Other Housing Initiatives | 0.789 | 0.784 | (0.005) |
| Housing Support Services | 1.743 | 1.689 | (0.054) |
| Net Expenditure | 15.630 | 14.915 | (0.715) |

Key points

The service variance is mainly due to unspent Rapid Rehousing Transition Plan funding (£0.497m) and cessation of the Wheatley Group grant (£0.298m).

| | Budget 24/25 £m | Provisional Expenditure / (Income) 24/25 £m | Variance Overspend/ (Underspend) 24/25 £m |
|--------------------------|-----------------------|---|---|
| Staff Costs | 8.120 | 8.967 | 0.846 |
| Property Costs | 9.881 | 10.589 | 0.707 |
| Transport Costs | 0.230 | 0.248 | 0.018 |
| Supplies and Services | 3.033 | 2.597 | (0.436) |
| Third Party Payments | 11.783 | 14.798 | 3.016 |
| Transfer Payments | 0.000 | 0.171 | 0.171 |
| Support Services Charges | 2.913 | 2.916 | 0.003 |
| Total Expenditure | 35.961 | 40.286 | 4.325 |
| Internal Income | (2.146) | (3.019) | (0.873) |
| External Income | (18.185) | (22.352) | (4.166) |
| Total Income | (20.331) | (25.371) | (5.040) |
| Net Expenditure | 15.630 | 14.915 | (0.715) |

Our Budget

Housing Revenue Account (HRA)

| | Budget 24/25 £m | Provisional Outturn 24/25 £m | Variance 24/25 £m |
|----------------------------------|-----------------------|---------------------------------------|-------------------------|
| Budgeted Expenditure | | | |
| Repairs and Maintenance | 47.298 | 45.561 | (1.737) |
| Supervision and Management | 21.728 | 22.390 | 0.662 |
| Funding Investment:- | | | |
| Cost of Borrowing | 39.153 | 37.823 | (1.330) |
| Revenue Contribution (incl CFCR) | 23.409 | 24.398 | 0.989 |
| | 131.588 | 130.172 | (1.416) |
| Voids | 2.571 | 2.286 | (0.285) |
| Housing Support costs | (0.467) | (0.446) | 0.021 |
| Garden Care Scheme | 0.446 | 0.475 | 0.029 |
| Bad or Doubtful Debts | 2.907 | 3.624 | 0.717 |
| Other Expenditure | 12.312 | 13.708 | 1.396 |
| | 149.357 | 149.819 | 0.462 |

| | Budget 24/25 £m | Provisional Outturn 24/25 £m | Variance 24/25 £m |
|--|-----------------------|---------------------------------------|-------------------------|
| Financed by | | | |
| Dwelling Rents (Gross) | (139.112) | (139.395) | (0.283) |
| Non Dwelling Rents (Gross) | (3.774) | (3.701) | 0.073 |
| Hostels - Accommodation charges | (2.257) | (2.439) | (0.182) |
| Other Income | (1.492) | (1.562) | (0.070) |
| Budgets transferred to/(from) Balances (previous years carry forwards etc) | (2.722) | (2.722) | 0.000 |
| | (149.357) | (149.819) | (0.462) |
| Contribution (to)/from Balances | 0.000 | 0.000 | 0.000 |

Key points

Significant pressures across the HRA include a £0.717m increase in bad debt provision due to historic outstanding rent arrears. There is an overspend of £1.396m on Other Expenditure mainly due to increased costs for Hostels. These were offset by underspends on Repairs and Maintenance (£1.737m) due to a larger than anticipated year end refund from Building Services, and the Cost of Borrowing (£1.330m) due to interest rates being lower than anticipated. The CFCR was increased by £0.989m as a result of a net underspend across the HRA.

Our Risks

Key corporate and service-specific risks affecting delivery are actively tracked and managed, with control measures in place. The table below highlights current service-specific risk and ongoing mitigation actions to minimise risk impact. Progress against these will be reported next year. Full details on all risks are available on request.

| Risk | Mitigating Actions |
|--|---|
| Workforce challenges – the Service will not have the right people in the right place at the right time | Training and development opportunities provided through the Housing Training Academy. |
| | Ongoing recruitment practice including considering the Life Chances approach. |
| Health & Safety - tenants and residents | Provide the Scottish Housing Regulator with Annual Assurance Statement and pursue the actions identified. |
| | Develop the response to the requirements of Grenfell Part 2 enquiry report. |
| | Implement new electrical safety and fire safety enforced access processes. |

| Risk | Mitigating Actions |
|--|--|
| Legal and regulatory failure – failure to accommodate and comply with unsuitable accommodation order | Provide the Scottish Housing Regulator with Annual Assurance Statement and pursue the actions identified. Work with the Scottish Housing Regulator on the Engagement Plan. Deliver LHS, Homelessness strategy and Housing Emergency Strategic Statement Actions. |
| HRA business | Conduct an annual review of the HRA Business Plan. Investigate alternative funding approaches. Identify budget efficiencies and consider service deferments in non-statutory areas. |

Performance assessment - Priorities & progress

Introduction - service delivery context and challenges

Housing Services and partners aim to 'Provide housing choices for people in Fife'. This vision is outlined in the LHS 2022-2027, along with priorities, outcomes and actions which help progress work towards this vision.

Fife declared a housing emergency during March 2024 due to the pressures experienced in housing and homelessness. In June 2025, Cabinet Committee approved a Strategic Statement containing 24 actions focused on recommendation themes: boosting new builds, meeting homelessness statutory duties, reducing the homelessness backlog, increasing property acquisitions, enhancing prevention and expanding funding options. A consultation plan and governance structure are being developed to progress this work.

A change in service delivery is required to ensure continuous improvement whilst contributing towards the Communities Directorate aim of supporting, protecting and developing community wellbeing. The intention of a more integrated housing estates and safer communities service is to improve the condition of housing estates and instil a sense of ownership and belonging. This will be progressed through a series of programmes and projects included in the Service Change Plan.

The Annual Assurance Statement contains pressure areas which are recognised as challenges for 2025-26. These include the housing emergency, average re-let timescales and Housing Revenue Account and Capital Plan viability. Further details on these can be found within the 'Challenges' section appearing later within the report.

Priorities & progress

The service will continue to work to improve performance across all indicators, however, in 2025/26 resources will be focussed on meeting statutory duties. Two priorities have been identified based on the 2024/25 Annual Return on the Charter performance and areas recognised as material non-compliance in the Annual Assurance Statement 2025. These priorities are to:

- Reduce homelessness and improve housing access, ensuring temporary accommodation statutory duties are met.
- Improve compliance across tenant and resident safety aspects and continue to address damp & mould in Council housing.

The progress against each of these has been detailed within the relevant priority section below, alongside the areas identified for improvement.

Performance assessment - Priorities & progress

Priority 1 **Homelessness and access to housing**

A slight reduction in new homeless presentations was evident in 2024-25, however pressure on temporary accommodation remains significant with demand and supply constraints resulting in longer stays in temporary accommodation. The Service continues to focus on homelessness pressures and meeting statutory duties as a core part of the housing emergency response.

Progress

Despite continued high demand for homelessness and temporary accommodation services, key improvements include:

- Homeless presentations recorded a slight decrease (31 presentations) and the number of live cases decreased by 260.
- Unsuitable accommodation order statutory breaches reduced by 63% (87 breaches in 2023/24 to 32 breaches 2024/25).
- The percentage of households placed in B&B type temporary accommodation reduced from 23.10% in 2023/24 to 15.03% in 2024/25.
- 75% of clients were prevented from statutory homelessness, through housing options advice. A 7% increase on 2023/24 performance.
- Housing First live tenancies upscaled to 103. Resources are in place for 115 live tenancies. A recent Housing First evaluation will inform future planning and services.
- The average relet time for void properties reduced to 36.74, the lowest since pre-covid times (2019/20), as a result of an on-going focus on void performance.

Performance assessment - Priorities & progress

Areas for Improvement

Homelessness & Temporary Accommodation

Although good progress has been recorded, it is evident further work is required to drive transformation and ensure compliance with homelessness statutory duties. In 2025/26, scatter flat flipping will increase from 100 to 200 annually, a temporary and supported accommodation strategy will be developed to plan for decommissioning or reprovisioning unsuitable accommodation, property acquisitions will increase for homeless and resettled households and housing advice and prevention frameworks will be redeveloped.

Housing Access

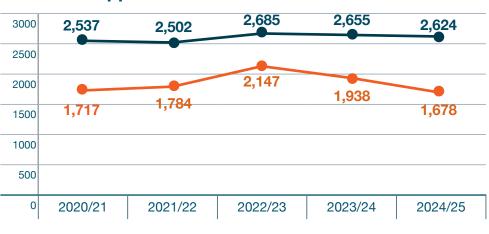
A Voids Service Improvement Plan will be implemented aiming to cut void rent loss and reduce relet times to 25 days. This target has been reset from 20 days after a recent review (see page 18 for more details). The Housing Allocation Policy is under review to simplify and strengthen prevention pathways. Efforts will be aligned with the 'No Wrong Door' programme to review frontline services.

Housing Emergency Strategic Statement

Additional actions around homelessness are being considered as part of the Housing Emergency Strategic Statement, subject to resource availability. Plans include expanding community-based temporary accommodation and private sector interventions including a Private Sector Leasing scheme, implementing the objectives outlined in the temporary accommodation strategy, revising frontline housing options services for the Homelessness Prevention Duty, upscaling the Housing First tenancies target from 115 to 200 and building on Health & Social Care Partnership innovations to reshape commissioned support services.

Relevant KPI details

Homeless Applications and Live Cases

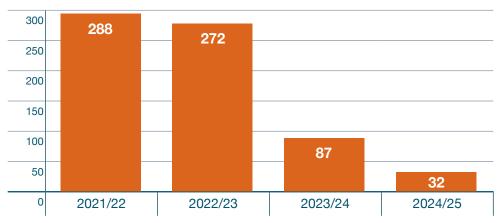


Service Demand Our Our Service delivery Performance Our year Reference Appendix 2a & Delivery ahead - KPIs overview

Performance assessment - Priorities & progress

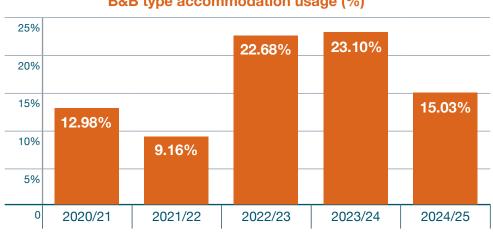
Temporary Accommodation

No. of unsuitable accommodation order breaches



B&B Type Accommodation

B&B type accommodation usage (%)



Housing Options Advice

| Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 | 2024/25 |
|--|---------|---------|---------|---------|---------|
| % of clients prevented from statutory homelessness through housing options advice | 52% | 44% | 58% | 68% | 75% |

Void Re-let Timescales

Average no. of days to re-let properties



Performance assessment - Priorities & progress

Priority 2 **Tenant and resident safety**

The Scottish Housing Regulator requests that landlords provide specific assurance on compliance with obligations relating to tenant and resident safety within Annual Assurance Statements. Compliance is recorded with water safety, lift safety and asbestos. A robust programme of work is in place to address Fife Council non-compliance areas.

Progress

Progress with non-compliance tenant & resident safety aspects include:

- Six gas safety breaches occurred due to the second safety check not being conducted prior to the key handover to new tenants – a newly emerging issue. Previous issues with gas safety have not reoccurred, indicating positive progress.
- 3,358 properties do not have a valid electrical safety certificate which is the result of denied property access.
 This is a 557-property reduction on 2023/24. An enforced access procedure has been developed to address this.
- 890 properties recorded non-compliance with fire & smoke alarm requirements. These were impacted by denied access and enforced access will be progressed.
- A £7million works programme is underway to improve fire safety aspects in two high-rise blocks in Levenmouth, with an estimated completion date of December 2025.
- A proactive approach is in place for dealing with damp and mould, allowing timely resolution of referrals.

Performance assessment - Priorities & progress

Areas for Improvement

Gas Safety

To prevent future failures, a new process is now being implemented by area teams to ensure keys are not handed over to new tenants until the second gas safety check has been completed. The gas governance group will continue to monitor processes and procedures closely to prevent future failures.

Fire and Electrical Safety

An enforced access procedure, mirroring gas safety enforced access will be implemented to enable essential works where access has been denied on two previous occasions. It is anticipated that this, along with, improved communication to explain the importance of safety inspections will facilitate compliance in an increased number of properties.

During June 2025, Cabinet Committee agreed to a series of actions in response to the Grenfell Tower Inquiry phase 2. A costed works programme is in development to enhance fire safety and minimise risk in high-rise and medium-rise flats, sheltered housing and homeless hostels.

Housing Asset Management System

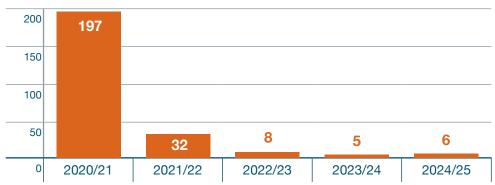
The current Housing Asset Management System is being upgraded to a cloud-based system, which will be in place by the end of 2025. This will ensure component replacement programmes can be closely monitored and improve the accuracy of recording and reporting, both of which will have a positive impact on all aspects of tenant & resident safety. The system will also support a new asset management approach, linked to business planning.

Performance assessment - Priorities & progress

Relevant KPI details

Gas Safety

No. of times gas safety statutory duties were not met



Fire and Electrical Safety

Accurate fire and electrical safety failure data was not available in 2022/23. Improved recording within Building Services permitted reporting since 2023/24, however, no recorded change in fire safety compliance between 2023/24 and 2024/25 prompted a system review. The implementation of a cloud-based Housing Asset Management System in 2025/26 will improve data accuracy.

| Element | 2022/23 | 2023/24 | 2024/25 |
|---|------------|---------|---------|
| Properties non-compliant with electrical safety | Unknown | 3,915 | 3,358 |
| Properties non-compliant with fire safety | Around 200 | 890 | 890 |

Damp and Mould

An increased level of condensation, dampness and black mould referrals were received from tenants following the introduction of an improved approach in 2023. During 2024-25, 2,353 referrals were received and dealt with proactively.

Performance assessment – Operational delivery

Overview of progress

All results against key indicators can be found in Appendix 2a and online at www.fife.gov.uk/councilperformance to facilitate feedback and scrutiny.

The Service monitors a number of 'Annual Return on the Charter' indicators throughout the year and performance is reported annually to the Scottish Housing Regulator. These indicators also form the basis of the Housing Services 'Pathway to Improvement 2023-26'. Appendix 2a presents charter indicator performance against targets for the period 2024/25, comparison against 2023/24 performance, improvement actions for 2025/26, as well as Local Authority averages and top quartiles obtained from the Scottish Housing Regulator.

During 2024/25, external consultants surveyed tenants, factored owners, Gypsy/Travellers and temporary accommodation customers to gauge satisfaction levels for reporting to the Scottish Housing Regulator. This was the first year where a 3-fold increase in the mainstream tenant survey sample was implemented, with interviewing proportionate to the housing stock in each Committee area to enhance data accuracy. Improvement was recorded across all mainstream tenant indicators including:

- Satisfaction with overall services (83.14% to 84.03%)
- Management of neighbourhoods (84.57% to 86.84%)
- Landlords keeping tenants informed (81.69% to 84.41%)
- Rent representing value for money (77.25% to 81.59%)
- Opportunities to participate in decision making (78% to 80.89%)
- Quality of home (83% to 86.94%).

Performance assessment – Operational delivery

The consultants analysed tenant responses to suggest improvement areas. The following feedback will inform future work to enable continuous improvement through the pathway to improvement:

- One in four dissatisfied tenants felt the repairs service could be improved through better quality repairs, efficiency and completing the repair as expected.
- One in ten felt their property could benefit from an upgrade (prominently bathroom, window, door and kitchen upgrades).
- 46.5% were in favour of using digital platforms for better information provision.
- 35.4% were unaware of the rent support initiatives on offer if required.
- Priorities for neighbourhood management include dealing with litter, maintaining landscaped areas, and handling anti-social behaviour complaints.

Aside the main tenant satisfaction indicators, improvement has been recorded in several other areas too. Some of these include:

- Repairs carried out right first time (87.87% to 91.33%)
- Satisfaction with repairs carried out in the last year (91.81% to 93.60%)
- Average time to complete non-emergency repairs (6.30 days to 5.61 days)
- Tenancy sustainment by housing list applicants (91.34% to 95.56%) and homeless Applicants (90.07% to 91.24%)
- Rent lost through empty properties (1.44% to 1.23%)
- Gross rent arears (8.11% to 7.5%).

While progress is positive, Fife Council remain committed to continuous improvement, with improvement actions underway to build upon this positive work.

Appendix 2a

- KPIs

Satisfaction with Gypsy/Traveller site management increased from 50% to 64.29%. The Scottish Housing Regulator engages with the Service due to previous weak performance. During 2024/25, 16 chalets were installed at the Tarvit Mill site which has positively impacted satisfaction levels. Further chalet installations are planned for the remaining two public sites over the next two years. Other improvements areas identified through surveys were; dealing with litter and car parking on sites, continuing to provide support and engagement and improving rent value for money – all of which will inform future plans.

A decline in performance is evident through a small number of indicators including:

- anti-social behaviour cases reported/resolved in the last year (93.38% to 89.83%)
- average days to complete adaptations (20.42 days to 28.06 days)
- factored owner satisfaction with services (37.50% to 35.38%)
- tenancy sustainment (existing tenants) (94.30% to 93.82%)

Despite internal slippage, the time taken to complete adaptions remains in top quartile local authority performance. The performance decline in these indicators is considered immaterial for the purposes of the Annual Assurance Statement but will be subject to on-going monitoring and review to progress improvements moving forward.

Performance assessment – Operational delivery

It is recognised that internal targets previously set for a number of indicators do not reflect the external pressures and changing environment experienced in Housing Services at present. Although performance improvements have been recorded and, in many instances, performance is above the local authority average, analysis suggests some targets will not be achieved in the final year of the Pathway to Improvement (2025-26). To maintain a robust and dynamic performance framework, which maintains the ambition of achieving top quartile performance, Housing Services have taken the decision to review 2025–26 targets for the following areas:

- Repairs completed right first time
- Anti-social behaviour cases resolved
- Tenancy sustainment levels
- Rent lost through empty properties
- Satisfaction with information on services and decisions
- Satisfaction with opportunities to participate in decision making
- Time taken to complete adaptations
- Gross rent areas
- Complaints responded to
- Average time to relet properties
- Gypsy/Traveller satisfaction

All results against key indicators can be found in Appendix 2a and online at Council plans and performance | Fife Council to facilitate feedback and scrutiny.

Other indicator progress

Housing Services are responsible for four Local Government Benchmarking Framework (LGBF) indicators. The latest set of LGBF data published covers 2023/24 and more detail can be found at Explore the data | Benchmarking. It is worth noting there is duplication between these indicators and those reported to the Scottish Housing Regulator as part of the Annual Return on the Charter.

| Performance Indicator | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|--|---------|---------|---------|---------|
| Gross Rent Arrears (all tenants) as a % of rent due for the year | 6.9% | 6% | 8.0% | 8.1% |
| % of rent due lost through properties being empty during the last year | 1.5% | 1.4% | 1.3% | 1.4% |
| Proportion of Council Dwellings meeting Scottish Housing Quality Standards (SHQS) % | 84.9% | 88.1% | 89.6% | 92.2% |
| Average number of days taken to complete Non- Emergency Repairs | 5.1% | 7.0% | 6.8% | 6.3% |

Performance assessment – Operational delivery

Challenges

The Annual Assurance Statement outlines pressures for 2025-26. These are:

- Housing emergency following the declaration during March 2024 due to pressures on housing and homelessness, a Strategic Statement containing 24 actions was agreed by Cabinet Committee in June 2025. This requires further consultation and development to ensure actions can be resourced and delivered to support recovery.
- Average re-let timescales although progress has been recorded during 2024-25 and performance is just outside local authority top quartile, further improvements are required to achieve below 25 days and support quicker turnover of Council homes.
- HRA and Capital Plan viability below inflation rent increases and cost of borrowing pressures restricts the Councils borrowing ability to fund affordable housing delivery, stock improvements and net zero standards. Additionally, fire safety measures relating to the Grenfell Tower Inquiry 2 require funding.

Further details on the mitigation actions can be found within the Annual Assurance Statement (Appendix 1 within the covering report).

One year ahead

Priorities for 2025/26

The main focus for 2025/26 is meeting statutory duties in areas of material non-compliance in the Annual Assurance Statement and the two priorities outlined in this report. Alongside this, the Service must evolve to address current challenges and deliver key priorities.

The Service Change Plan 2025–28 includes 24 programmes/ projects supporting transformation and the Communities Directorate's ambitions. Several projects align with report priorities, especially around homelessness and housing access. The change themes and key improvement priorities planned for 2025-26 include:

- Increasing net zero compliant housing stock to improve housing conditions and align with climate change ambitions.
- Enhancing independent living and tenancy sustainment via data and digital technology.
- Reshaping operating arrangements influenced by 'No Wrong Door' and place re-design to integrate services and initiate financial saving.
- Developing a joined-up approach towards household support to help improve tenancy sustainment.
- Reviewing and improving policy and outcome alignment to help increase housing supply whilst reducing homelessness and poverty.

Service Change Plan project delivery is well underway with a framework in place for regular monitoring and reporting. To date, two projects are noted as complete, 18 are in progress, with a further four still to be initiated.

During 2025/26, work will continue in partnership with the Fife Tenants Forum and the Fife Tenants Scrutiny Group to ensure that service improvements are shaped by tenant views.

Reference links

- Local Housing Strategy
- Housing Emergency Strategic Statement
 Agenda and Papers Cabinet Committee of 26 June 2025 (pages 125 145)

Appendix 2a - Performance Indicators 2025

| Key KPI Status: 🔽 OK | Warning Alert | O Data only ? Unknow | Trend: 1 Improving | ■ No change ↓ | Getting worse |
|----------------------|---------------|----------------------|--------------------|----------------------|---------------|

| | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | |
|---|---------|--------|--------|--------|---|---------------|--------------------|---------------------------|---|
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value | Pathway to Improvement Actions |
| % of tenants satisfied with the overall service provided by their landlord | 83.14% | 84.03% | 82.00% | | A 3-fold increase to survey numbers was applied in 2024/25 along with a move to a proportionate survey interviewing method to ensure interviews completed were balanced to the housing stock in each committee area. This improved the accuracy and robustness of weighted survey data. There has been an improvement in this indicator in the last year exceeding target. We have continued to support the work of the tenants scrutiny panel, which provides us with detailed customer insight to improve service delivery. The Tenants Satisfaction Survey Performance Indicators will inform the selection of future topics for review. | 81.60% | 90.88% | Not measured for Quarters | Continue to support the work of the tenant's scrutiny panels. This provides a detailed customer insight to improve service delivery. Review results from the Tenants Satisfaction Survey Performance Indicators to inform a selection of future topics for improvement. |
| % of reactive repairs carried out in the last year completed right first time | 87.87% | 91.33% | 98.50% | | Additional monitoring & quality control checks within Building Services are supporting improvements in this indicator. | 89.25% | 92.40% | 90.32% | Continue to monitor performance and highlight issues through the Repairs & Investment Management Group. Continue engagement with contractors to improve processes. |
| The number of times in the reporting year you did not meet your statutory duty to complete a gas safety check | 5 | 6 | 0 | | As per figures supplied by Gas Servicing Team Procedural failures, gas governance group reviewing process. A change to gas reporting systems resulted in a temporary issue with anniversary dates for checks. This has been fully rectified. | 2.3 | 0 | 2 | Implement an improved procedure and liaise with area team colleagues to ensure a second gas safety check is conducted prior to keys being handed over to new tenants. Continue close monitoring of properties, processes and procedures through the gas governance group. |
| % of tenants who have had repairs or maintenance carried out in the last 12 months satisfied with the repairs and maintenance service | 91.81% | 93.60% | 93.00% | ~ | No target set for 24/25 but performance has improved from last year Reported satisfaction level increasing. Improved data gathering providing more accurate picture. | 85.62% | 91.82% | Not measured for Quarters | Continue to monitor performance and highlight issues through the Repairs & Investment Management Group. Look to maximise survey responses by reviewing processes. |
| % of tenants satisfied with the landlord's contribution to the management of the neighbourhood they live in | 84.57% | 86.84% | 88.70% | | A 3-fold increase to survey numbers was applied in 2024/25 along with a move to a proportionate survey interviewing method to ensure interviews completed were balanced to the housing stock in each committee area. This improved the accuracy and robustness of weighted survey data. An improvement on the previous years satisfaction level. Reflects the decentralisation of services to areas and the ongoing engagement with tenants including through tenant led walkabouts and working with our RTOs/TRAs. | 79.70% | 91.29% | Not measured for Quarters | Review and implement Area Housing Plans to support housing services and improve neighbourhood management Continue engagement with tenants including through tenant led walkabouts and working with RTOs/TRAs Continue to support and work closely with the tenant's scrutiny panel who will focus on estates management during 2025/26. |

Appendix 2a - Key Performance Indicators

Key KPI Status: V OK A Warning Alert O Data only ? Unknown Trend: ↑ Improving No change ✔ Getting worse

| | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | |
|--|---------|--------|--------|----------|---|---------------|--------------------|---|---|
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value | Pathway to Improvement Actions |
| % of tenancy offers refused during the year | 23.46% | 23.71% | 21.00% | | The number of refusals continues to be low level. There is no direct impact on voids or wider allocation processes but will be kept under review as we work through the Allocation Policy Review process. | 36.47% | 25.65% | 26.91% | Continue to promote good communication with applicants during the offer process. Conclude the review of the allocations policy and implement any changes as a result of this. |
| of anti-social behaviour cases reported in the last year which were resolved | 93.38% | 89.83% | 95.00% | | The number of reported private space ASB cases during 2024-25 has decreased to levels almost comparable to those seen prior to the pandemic. However, the complexity of ASB cases has risen significantly, with a notable increase in issues relating to poor mental health. | 90.33% | 95.79% | Not measured for Quarters | A review of Fife Council's Anti-Social Behaviour Policy is planned, and the scope of this exercise will be reported to Cabinet Committee in the Autumn of this year. |
| | | | | | Of the 1,997 ASB cases opened during 2024-25, 1,794 were resolved within the same year. Of those resolved, 1,747 cases were resolved within locally agreed timescales (97.3%). | | | | Initial analysis suggests most cases that remained open at the end of the year were low level rather than those that required legal action and would normally take more time to resolve. Further checks to be undertaken to ensure staff are closing cases on the system timeously throughout the year. |
| | | | | | | | | | Cases will be triaged more effectively at the first point of contact. Cases will only be opened on the CX Management system that require investigation. Disputes not considered ASB will be considered under a different category. |
| % of new tenancies to existing tenants sustained for more than a year | 94.30% | 93.82% | 97.00% | A | The Service has had a high turnover of staff over the past year, which has now been resolved. This has allowed staff to work in smaller patch areas, interacting with tenants and identifying any issues sooner. This has seen an increase in abandonments that have been identified. | 94.59% | 96.72% | 93.88% | A continued focus from Housing Management Officers to work with tenants in smaller patches to ensure sustainment through follow up visits and tenancy assistance. |
| | | | | | | | | Working with partners and fuel poverty teams to ensure tenants are equipped to live in a warm sustainable home. | |
| | | | | | | | | | Use benefit checker to ensure income maximisation. |

Appendix 2a - Key Performance Indicators

Key KPI Status: V OK A Warning Alert O Data only ? Unknown Trend: 1 Improving No change V Getting worse

| | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | |
|--|---|--------|--------|---|---|---------------|--------------------|---------------------------|---|
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value Value | Pathway to Improvement Actions |
| % of new tenancies to applicants who were assessed as statutory nomeless by the local authority sustained for more | 90.07% | 91.24% | 97.00% | | The Service has had a high turnover of staff over the past year, which has now been resolved. This has allowed staff to work in smaller patch areas, interacting with tenants and identifying any issues sooner. This has seen an increase in abandonments that have been identified. | 89.74% | 92.45% | 94.53% | A continued focus from Housing Management Officers to work with tenants in smaller patches to ensure sustainment through follow up visits and tenancy assistance. |
| han a year | | | | | | | | | Working with partners and fuel poverty teams to ensure tenants are equipped to live in a warm sustainable home. |
| | | | | | | | | | Use benefit checker to ensure income maximisation. |
| % of new tenancies to applicants from the andlord's housing list sustained for more than a year | 91.34% | 95.56% | 97.00% | | The Service has had a high turnover of staff over the past year, which has now been resolved. This has allowed staff to work in smaller patch areas, interacting with tenants and identifying any issues sooner. This has seen an increase in abandonments that have been identified. | 91.80% | % 94.47% | 92.11% | A continued focus from Housing Management Officers to work with tenants in smaller patches to ensure sustainment through follow up visits and tenancy assistance. |
| | | | | | | | | | |
| | | | | | | | | | Continue walkabouts to identify any issues |
| 6 of lettable houses that became vacant in the last ear | 5.18% | 7.50% | 8.00% | | A transfer led approach to housing allocations is helping to boost turnover in response to the Housing Emergency. The aim of the allocation policy is to generate vacancies | 7.29% | 6.74% | Not measured for Quarters | Continue to promote a transfer led approach to housing allocations to generate turnover. |
| | | | | | by creating transfer chains to meet the needs of tenants in housing need and use the resultant vacancy to meet other priority needs. It is expected that turnover will be approximately similar in 2025/26 due to a continuation of this approach. | | | | Continue to use new build and property acquisitions to generate chains of allocations to meet multiple needs and develop new housing to create transfer and specialist housing opportunities. |
| %) of rent due lost through properties being empty luring the last year | yoid rent loss is a critical business indicator and reflects the focus on performance improvement. Resourcing and other issues in Quarter 3 and 4 affected overall performance but the target will remain at >1% going into | 0.85% | 0.27% | The Voids Governance Group will continue to implement change and read to a recent Tenant and Resident Scrutin Panel report | | | | | |
| | | | | | 2025/26. | | | | Arrangements are ongoing to re- provision and improve the Clean and Clear contract |
| | | | | | | | | | A new utilities partnership in in development following the unexpected departure of Utilita |

Key KPI Status: V OK A Warning Alert O Data only ? Unknown Trend: ↑ Improving No change ✔ Getting worse

| | 2023/24 | | | : | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | |
|--|------------|------------|------------|--------|--|---------------|--------------------|---------------------------|---|
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value | Pathway to Improvement Actions |
| The total number of households waiting for applications to be completed at the end of the reporting year | 170 | 394 | 400 | ~ | The demographic profile across Fife, coupled with an increase in complex cases has resulted in a sustained demand on the service. Whilst the number of adaptations completed remains higher than the covid years, the increase in equipment, labour and material costs has resulted in careful management of budget spend in the last quarter with cases at highest risk prioritised for adaptations. | 1,763 | 24 | Not measured for Quarters | Identify changes in individuals' needs at an early stage to reduce the demand for larger, costly adaptations Promote early accessible self-help methods, along with alternative routes of support guidance to help meet increasing demands for adaptations Work with Health & Social Care to look at potential budget challenges and try to identify additional funding streams |
| % of tenants who feel their landlord is good at keeping them informed about their services and decisions | 81.69% | 84.41% | 91.00% | | A 3-fold increase to survey numbers was applied in 2024/25 along with a move to a proportionate survey interviewing method to ensure interviews completed were balanced to the housing stock in each committee area. This improved the accuracy and robustness of weighted survey data. We have seen an improvement over the year and we continue to engage with our tenants using different methods including our Tenants Conference, our digital platform, pop up events, Down Your Street magazine, supporting our RTOs and TRAs and working with our Tenants Federations. Our Tenant Participation Strategy is being reviewed in partnership with our Tenants Federation. | 83.05% | 95.51% | Not measured for Quarters | Implement the revised Tenant Participation Strategy Continue to engage with tenants through various consultation methods |
| Total cost of adaptations completed in the year by source of funding (£) | £1,827,517 | £1,567,054 | £1,200,000 | | The spend against this workstream appears less due to a change in the financial cost codes used by OTs in previous years. This figure provides a true reflection of the spend on HRA properties for all permanent and minor adaptations completed in Fife Council stock. | £633,190 • | £503,435 | Not measured for Quarters | Closely monitor budgets to ensure this adequate to deliver the level of adaptations required, taking the cost of labour, equipment and materials into consideration. Identify changes in individuals' needs at an early stage to reduce the demand for larger, costly adaptations. Work with Health & Social Care to look at potential budget challenges and try to identify additional funding streams |

Appendix 2a - Key Performance Indicators

Key KPI Status: V OK A Warning Alert O Data only ? Unknown Trend: ↑ Improving No change ↓ Getting worse

| | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | |
|--|------------|------------|------------|--------|--|---------------|--------------------|---------------------------|--|
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value | Pathway to Improvement Actions |
| The average time to complete adaptations (days) | 20.42 days | 28.06 days | 18.00 days | | Delays in obtaining and agreeing costings and drawings for larger complex adaptations has resulted in an increase on days to complete, however these delays ensure the adaptations fitted meet the assessed need. Pressures on budget streams also mean that funding for adaptations is aligned to those in greatest need. Fife's Health and Social Care Partnership Eligibility Criteria is used to risk assess and prioritise cases appropriately, with a careful balance on sustaining care provisions in the community, by both HSCP paid care, and care provided by family. Similar to 21.1, pressures on budget and service demands have resulted in fewer cases progressing. Equipment costs have risen on the temporary side, such as stairlifts, hoists etc however the budget has remained static. Work is ongoing to identify changes in individuals needs at an early stage to reduce the demand for larger, costly adaptations. Promotion of early accessible self-help methods, along with alternative routes of support guidance, will be pivotal in meeting the increasing demands for adaptations across Fife | 35.92 days | 30.85 days | Not measured for Quarters | Monitor contractors output along with the streamlining of process to deliver performance improvements. Identify changes in individuals' needs at an early stage to reduce the demand for larger, costly adaptations. Promote early accessible self-help methods, along with alternative routes of support guidance to help meet increasing demands for adaptations Review customer journey to look at areas where timescales can be reduced |
| % of the court actions initiated which resulted in eviction and the reasons for eviction | 100% | 26.52% | 17.00% | | Evictions have restarted Q2 this financial year after suspension due to Covid restrictions and Cost of Living legislation. 33 evictions (28 adult only tenancies, 5 with children, however only 3 of the 5 were the child's main residence) 10 of the 33 presented as homeless, 6 of which were refused due to intentionality. The other 4 households are residing in temporary accommodation (2 of these households contain children and will receive one offer of accommodation under the Children's Act). | 23.06% | 17.50% | Not measured for Quarters | Evictions have re-started following a period of suspension. Cases are progressed to court as a last resort after multiple attempts to engage with tenants to manage rent accounts, and all other options and supports have been explored. |
| Homelessness (LA's only) - the % of homeless households referred to RSLs under section 5 and through other referral routes | 2.3% | 4.46% | 5.00% | | This indicator does not count the direct allocations by RSLs through the Fife Housing Register. In 2025/26, partnership options with FHR will be mainstreamed with a view to maximise housing association contributions to the Housing Emergency. | 13.63% | 22.39% | Not measured for Quarters | Conclude the review of the allocations policy and implement any changes as a result of this. Mainstream FHR partnership options to maximise housing association contributions to the Housing Emergency. |

Key KPI Status: V OK A Warning Alert O Data only ? Unknown Trend: ↑ Improving No change ↓ Getting worse

| | | | | | 0004/05 (Dathway to Improvement Very 0) | | | | |
|---|---------|---------|--------|--------|---|---------------|--------------------|---------------------------|--|
| lu di matan | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | Pathway to Improvement Actions |
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value | |
| % of tenants who feel that the rent for their property represents good value for money | 77.25% | 81.59% | 84.50% | | A 3-fold increase to survey numbers was applied in 2024/25 along with a move to a proportionate survey interviewing method to ensure interviews completed were balanced to the housing stock in each committee area. This improved the accuracy and robustness of weighted survey data. There has been an improvement on this indicator and we will continue to work with our Tenants Federations and the Tenants Scrutiny Panel to ensure that rents represent good value for tenants. | 80.61% | 89.14% | Not measured for Quarters | Tenants are consulted and views are considered when setting rent. Decisions on rent levels need to be balanced to ensure service delivery is maintained and tenant priorities are taken into account. We will continue to engage with tenants through the rent setting process including consultation on service priorities. We anticipate that this engagement will be reflected in satisfaction levels. We will continue to work with the Fife Tenant Forum and support the work of the Fife Tenant Scrutiny Panel to ensure tenants priorities are reflected in service |
| Rent collected as % of total rent due in the reporting year | 100.09% | 100.88% | 99.56% | | Financial year 24/25 was a 53 week long rent year and this has led to an inflated figure. Our Period 26 ran for 3 weeks, but tenants were only charged for two weeks. In effect there was an extra "free" week to our tenants when rent not charged. Although there was no rent charged over this free week, rent money was still paid. We received approx. £2million of payments which came mainly from the DWP. This has boosted our income significantly within period 26, and therefore the whole financial year. Hence the increased collection figures. It will mean however that next financial year we are going to be down by the same £2million, so next year our figures will likely reflect this reduction. We have continued to provide support to tenants through a rent support funding and to engage with tenants to encourage direct payment to for Universal Credit tenants in arrears. | 100.37% | 100.94% | 92.28% | Performance was above target during 2024-25. Tenants will continue to be supported to maximise rent collection. Direct debit payments will continue to be encouraged for payment of rent and direct payments for housing costs requested for tenants on Universal Credit in arrears. We will continue to provide rent support including mitigation support payments for tenants migrating to Universal Credit. Continue to use our systems to target contact with tenants to engage and provide support to prevent arrears accruing. |

Key KPI Status: VOK A Warning Alert O Data only ? Unknown Trend: 1 Improving No change V Getting worse

| | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | |
|--|---------|--------|---------|----------|---|---------------|--------------------|---------------------------|--|
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value | Pathway to Improvement Actions |
| Gross rent arrears (all tenants) as at 31 March each year as a % of rent | 8.11% | 7.50% | 5.50% | • | Our rent collection rates show continued improvement and remain positive. | 8.59% | 7.06% | 6.76% | We will continue to provide rent support including mitigation payments for tenants migrating to UC. |
| due for the reporting year. | | | | | | | | | Direct debit payments will continue to be encouraged for payment of rent and direct payments for housing costs requested for tenants on Universal Credit in arrears. |
| | | | | | | | | | Continue to use systems to target contact with tenants to engage and provide support to prevent arrears accruing. |
| Average annual management fee per factored property | £97.95 | £81.62 | £81.62 | ~ | Fife Council's Factoring Services carried out another formal consultation in February 2024 to which appointed Fife Council as Property Factor. This equated to an increase of 98 owners. The annual management fee is £81.62 (not including VAT), we have 628 owners. | £67.54 | £14.42 | Not measured for Quarters | Admin/Management fee models have been devised to calculate the cost of providing this service. |
| | | | | | The annual management fee has previously included VAT therefore amendments were made to which reflects in the value. | | | | |
| | | | | | The amount charged actually reduced in 2024/25 compared to the previous year. The reason for this was because we were asked to remove VAT from the figures | | | | |
| % of factored owners satisfied with the factoring service they receive (%) | 37.50% | 35.38% | 58.00% | | For the 2024/25 session, the factored owners satisfaction survey was conducted via telephone, email and postal contact with a total of 130 responses to this question. Main reasons for dissatisfaction included management fee is too high (33.3%), poor communication (25.2%) and unclear invoices (15.4%). Work is on-going to improve service delivery. | 50.19% | 66.37% | Not measured for Quarters | Work is on-going to improve service delivery across dissatisfaction areas. Work is on-going to improve the contact details held to allow more surveys to be conducted via phone moving forward. |
| The percentage of all complaints responded to in full at stage 1 | 97.98% | 98.76% | 100.00% | | Our performance has increased from last year and 98.76 for 1st stage and at 96.27 for second stage is good performance and only a few outlying not answered on time. Data is only accurate on the day the report is run, hence the discrepancy between brought forward and carried forward figures. | 96.02% | 100% | Not measured for Quarters | Service Mangers to ensure that team members reply to complaints within the timeframe and a weekly reminder is issued by the Service Manager. |

Key KPI Status: V OK A Warning Alert O Data only ? Unknown Trend: 1 Improving No change V Getting worse

| | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | |
|---|------------|------------|------------|---|---|---------------|--------------------|---------------------------|---|
| Indicator | Value | Value | Target | Status | Note | LA Average | LA Top Quartile | Value Value | Pathway to Improvement Actions |
| Average length of time taken to re-let properties in the last year (days) | 43.50 days | 36.74 days | 25.00 days | | There is an ongoing focus on voids performance and standards improvement. This year has seen continuous improvement and the Voids Governance Group has updated the Voids Service Improvement Plan with aim of reducing to under 25 days in 2025/26 | 77.90 days | 35.60 days | 35.76 days | The Voids Governance Group will continue to implement change and react to a recent Tenant and Resident Scruting Panel report |
| | | | | | reducing to under 25 days in 2020/20 | | | | Arrangements are ongoing to re- provision and improve the Clean and Clear contract |
| | | | | | | | | | A new utilities partnership in in development following the unexpected departure of Utilita |
| For those who provide Gypsies/travellers sites - Average weekly rent per pitch | £70.89 | £75.94 | £79.97 | V | Tarvit Mill, Cupar has reduced from 20 pitches to 16 pitches to accommodate the new chalets. 4 less pitches than in previous years due to improvement works at Tarvit Mill, Cupar | £86.74 | £76.31 | Not measured for Quarters | Increased in line with agreed rent increase per year. |
| For those who provide sites - % of Gypsies/Travellers | 50.00% | 64.29% | 85.00% | | For 2024/25 Gypsy Traveller Satisfaction surveys, there were 28 surveys completed face to face which is | 80.10% | 100.00% | Not measured for Quarters | Work to install chalets at Tarvit Mill is complete |
| satisfied with the landlord's management of the site (%) | | | | | an improvement on preceding years. The satisfaction rating has increased significantly in response to service improvements. | | | | Roll out of further programmes to install chalets and improve Heatherywood and Thorntonwood over the next two years. |
| The percentage of all complaints responded to in full at stage 2 | 95.15% | 96.27% | 100.00% | | Our performance has increased from last year and 98.76 for 1st stage and at 96.27 for second stage is good performance and only a few outlying not answered on time. Data is only accurate on the day the report is run, hence the discrepancy between brought forward and carried forward figures. | 86.20% | 97.99% | Not measured for Quarters | Service Mangers to ensure that team members reply to complaints within the timeframe and a weekly reminder is issued by the Service Manager. |
| % of tenants satisfied with the opportunities given to them to participate in their andlord's decision-making process | 78.00% | 80.89% | 85.00% | | A 3-fold increase to survey numbers was applied in 2024/25 along with a move to a proportionate survey interviewing method to ensure interviews completed were balanced to the housing stock in each committee area. This improved the accuracy and robustness of weighted survey data | 80.29% | 95.63% | Not measured for Quarters | Implement the revised Tenant Participation Strategy Continue to engage with tenants through various consultation methods |
| | | | | We have seen an improvement over the year and we continue to engage with our tenants using different methods including our Tenants Conference, our digital platform, pop up events, Down Your Street magazine, supporting our RTOs and TRAs and working with our Tenants Federations. Our Tenant Participation Strategy is being reviewed in partnership with our Tenants Federation. | | | | | |

Key KPI Status: VOK A Warning Alert O Data only ? Unknown Trend: ↑ Improving No change ↓ Getting worse

| | 2023/24 | | | | 2024/25 (Pathway to Improvement – Year 2) | | | Q1 2025/26 | Pathway to Improvement Actions |
|---|------------|------------|------------|--------|--|---------------|--------------------|---------------------------|--|
| Indicator Value | | Value | Target | Status | Note | LA Average | LA Top Quartile | Value Value | |
| % of stock meeting the SHQS at the end of the reporting year | 92.15% | 92.24% | 91.00% | ~ | We have removed our abeyances and will be utilising our no access team to reconnect with these tenants. Where there are mutual works required, we will be involving our mutual owners team in an attempt to progress. | 83.18% | 92.24% | Not measured for Quarters | Continue to replace elements on a life expectancy basis through component replacement programmes. Upgrade the asset database to cloud-based version to improve performance for surveys and reporting. |
| % of tenants satisfied with the quality of their home | 83.00% | 86.94% | 82.00% | ~ | A 3-fold increase to survey numbers was applied in 2024/25 along with a move to a proportionate survey interviewing method to ensure interviews completed were balanced to the housing stock in each committee area. This improved the accuracy and robustness of weighted survey data, improving satisfaction rates and above target set. | 80.58% | 87.31% | Not measured for Quarters | Continue to replace elements on a life expectancy basis through component replacement programmes. Upgrade the asset database to cloudbased version to improve performance for surveys and reporting. |
| Average length of time taken to complete emergency repairs (hours) | 3.28 hours | 3.26 hours | 3.30 hours | ~ | Building Services continues to work on improving the speed of response to emergency repairs. This ensuring a high level of service to tenants is maintained. | 3.79 hours | 2.67 hours | 3.07 hours | Continue to monitor performance and highlight issues through the Repairs & Investment Management Group. Continue engagement with contractors to improve processes. |
| Average length of time taken to complete non- emergency repairs (days) | 6.30 days | 5.61 days | 5.50 days | | Increased management of the responsive repairs process through DRS has seen a reduction in the number of days to respond to non- emergency repairs. This work continues, to ensure a high level of service to tenants is maintained. | 10.09 days | 7.04 days | 5.98 days | Continue to monitor performance and highlight issues through the Repairs & Investment Management Group. Continue engagement with contractors to improve processes. |

People and Communities Scrutiny Committee

25 September 2025

Agenda Item No. 10



2024-25 Revenue Monitoring Outturn – Communities Service

Report by: Eileen Rowand, Executive Director, Finance and Corporate Services
Michael Enston, Executive Director, Communities

Wards Affected: All

Purpose

The purpose of this report is to give members an update on the provisional financial position for the 2024-25 financial year for the Communities Directorate & the Housing Revenue Account (HRA) which are areas in scope of the People & Communities Scrutiny Committee.

Recommendations

Committee is asked to consider the current financial performance and activity as detailed in this report.

Resource Implications

None.

Legal & Risk Implications

There are no direct legal implications arising from this report.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None.

1.0 Background

- 1.1 The purpose of this report is to advise Members of the outturn for the Communities Directorate and the HRA for the 2024-25 Revenue Budget, and to highlight the major variances for the financial year.
- 1.2 For 2024-25 no specific savings proposals were approved by the Council as part of the Revenue Budget. There is therefore no requirement to include a Savings Tracker as part of financial reporting for the 2024-25 financial year.

2.0 Outturn

2.1 Outturn

- 2.1.1 There is a provisional variance of (£5.078m) for the Communities Directorate, this is a movement of (£1.979m). A summary of the 2024-25 out-turn for the areas under the scope of this committee is detailed in Appendix 1. Where there are significant variances (+/-£0.250m) to budgets a brief explanation is provided at Section 3.
- 2.1.2 The HRA has nil net balances for 2024-25. There is a planned withdrawal from balances of £2.722m which has been approved at Cabinet Committee and Full Council.

3.0 Major Variances

Communities & Neighbourhoods - Underspend (£1.174m), movement of (£0.518m)

- 3.1 Community Use and Halls and Centres where there is an under-recovery of income of £0.674m. As part of the Community Use Plan, work continues to develop and implement a more targeted approach to marketing and consultation with communities to ensure they are offering what communities want and that there are no barriers preventing the community from accessing these services.
- 3.2 Unachieved historical savings of £0.339m are being offset by an underspend of (£0.748m). This underspend is due to a reduction in the level of funding required by the Opportunities for All programme. The remaining overspend is offset by (£0.271m) external funding received for expenditure incurred in 2023/24, staff vacancies across the service and Area Budget underspend of (£1.402m) due to lower than anticipated funding being required. The remaining underspend is offset by £0.500m overspends in premises and supplies and services costs within Halls & Centres across Fife.
- 3.3 The movement of (£0.518m) relates to the increase in Area Budget underspends and a reduction in the level of Fairer Fife Funding required by EPES, offset by an increase in the under recovery of income in Halls & Centres and Community Use of Schools and overspends of £0.500m on premises and supplies services costs within Halls & Centres.

GFH Housing & Neighbourhood Services – Underspend (£0.715m), movement (£0.827m)

3.4 The underspend is mainly due to unspent Rapid Rehousing Transition Plan (RRTP) project funding (£0.497m) and cessation of Wheatley Group grant (£0.298m)

Children and Families –Underspend (£1.736m), movement of (£0.178m)

- 3.5 There is an overspend of £3.208m on purchased placements, which is mainly due to the full year effect of placements made during the previous year. There are also overspends of £0.648m on continuing care, £0.457m on Direct Payments, and £0.422m in throughcare on rents and grant payments, all in line with last year's spend are also included. Overspend on £0.730m on Children Affected by Disability (CABD) respite due to a new ongoing high-cost package,
- 3.6 These overspends are partially offset with underspends of (£0.262m) grants to voluntary organisations (£0.851m) overachievement of income for Unaccompanied Asylum Seeking Children, (£1.053m) on family placements such as foster care and kinship, (£3.042m) staffing due to staff turnover and budget for permanent posts/staff who are currently undertaking other work, and (£1.506m) Whole Family Wellbeing (WFW) funding which will be carried forward into 2025/26 to support the planned spend for next year.
- 3.7 There are no areas with significant movements from what was forecasted at December.

Criminal Justice Service (CJS) –Underspend (£0.795m), movement of £0.157m

3.8 The underspend of (£0.795m) has arisen on the permanent flexible element of CJS funding and is due to staff turnover creating vacant substantive posts as staff have been redeployed to undertake Covid and Bail Funded work. The funding for this work is temporary. A further factor in the underspend is that, whilst this report covers service managed budget, a proportion of the underspend is in respect of central support services, which are allowable within the grant funding, but are not charged to services within this report.

Customer & Online Services – Underspend (£0.814m), movement (£0.756m)

3.9 The underspend is mainly due to income from the HRA in relation to Central Support Service recharges from the Contact Centre, Local Offices and Revenues and Welfare teams.

Housing Revenue Account - Net Balance nil, movement nil

Repairs & Maintenance – Underspend (£1.737m), movement (£1.285m)

3.10 The underspend and movement is mainly due to a larger than anticipated year end refund from Building Services for work billed during the year.

3.11 Supervision & Management – Overspend £0.662m, movement £0.631m

The overspend is mainly due to increased Central Support Service allocations for services such as the Contact Centre, Local Offices and Revenues & Welfare teams and this is partially offset by staffing underspends due to vacant posts.

Cost of Borrowing – Underspend (£1.330m), movement (£0.366m)

3.11 The underspend is due to interest rates being lower than anticipated.

Revenue Contribution (Including CFCR) – Over achievement (£0.990m), movement £1.864m

3.12 The higher level of CFCR is a result of in year underspends across the HRA. The increased level of CFCR reduces the borrowing requirement for the HRA Capital Plan.

Voids - Underspend (£0.285m), Movement £0.005m

3.13 Improvements in the Change of Tenancy process has resulted in a reduction in the number of days which properties are empty for, resulting in a reduction in voids rent loss for dwelling rents anticipated in year.

Bad or Doubtful Debts - Overspend £0.717m, movement (£0.174m)

3.14 The overspend is due to increasing levels of arrears for both former and current tenants increasing in year write offs and bad debt provisions.

Other Expenditure – Overspend £1.396m, movement (£0.636m)

- 3.15 The overspend mainly relates to hostels which is projecting an overspend of £0.960m. Hostels have a high operating cost which has continued to cause a pressure for the HRA. Due to a sustained increase in demand for Temporary Accommodation, Hostels continue to be a required form of accommodation.
- 3.16 The remaining overspend mainly relates to Property Insurance £0.218m, grounds maintenance £0.244m and repairs and energy costs at travelling people sites £0.195m.

4.0 Conclusions

- 4.1 There is a variance of (£5.078m) for the Communities Directorate, this is a movement of (£1.979m).
- 4.2 The HRA has nil net balances for 2024-25. There is a withdrawal from balances of £2.722m which has been approved at Cabinet Committee and Full Council.

List of Appendices

- 1 Outturn 2024-25 Summary Communities Directorate
- 2 Outturn 2024-25 Housing Revenue Account

Background Papers None

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| BUDGET MONITORING REPORT SUMMARY PEOPLE AND COMMUNITIES | | | | | | Appendix 1 |
|--|---|---|--|---|---|---|
| PEOPLE AND COMMUNITIES | | Mar | | | Dec | |
| COMMUNITIES | CURRENT BUDGET 2024-25 £m | FORECAST 2024 - 25 £m | VARIANCE £m | VARIANCE % | PREVIOUS REPORTED VARIANCE £m | MOVEMENT FROM PREVIOUS REPORTED VARIANCE |
| TOTAL COST OF SERVICES | 214.747 | 209.794 | (4.954) | -2.31% | (3.099) | (1.855) |
| LESS: CORPORATELY MANAGED ITEMS | 49.786 | 49.910 | 0.124 | 0.25% | 0.000 | 0.124 |
| SERVICE MANAGED NET BUDGET | 164.961 | 159.883 | (5.078) | -3.08% | (3.099) | (1.979) |
| ANALYSIS OF SERVICE MANAGED BUDGET | | | | | | |
| COMMUNITIES & NEIGHBOURHOODS GFH - HOUSING & NEIGHBOURHOOD SERVICES COMMUNITIES EXECUTIVE DIRECTOR CHILDREN & FAMILIES CRIMINAL JUSTICE SERVICE CUSTOMER & ONLINE SERVICES | 58.989 15.630 0.246 72.517 0.961 16.619 | 57.815 14.915 0.401 70.781 0.166 15.805 | (1.174) (0.715) 0.155 (1.736) (0.795) (0.814) | -1.99% -4.57% 63.21% -2.39% -82.72% -4.90% | (0.656) 0.112 0.012 (1.558) (0.952) (0.058) | (0.518) (0.827) 0.144 (0.178) 0.157 (0.756) |
| | 164.961 | 159.883 | (5.078) | -3.08% | (3.099) | (1.979) |
| | | | | | | MOVEMENT FROM |
| SUBJECTIVE GROUPING | CURRENT BUDGET 2024-25 £m | FORECAST 2024 - 25 £m | VARIANCE £m | VARIANCE % | PREVIOUS REPORTED VARIANCE £m | PREVIOUS REPORTED VARIANCE |
| SERVICE MANAGED NET BUDGET | 164.961 | 159.883 | (5.078) | -3.08% | (3.099) | (1.979) |
| INCOME | (43.876) | (51.704) | (7.828) | 17.84% | (4.164) | (3.664) |
| EXPENDITURE EMPLOYEE COSTS PREMISES RELATED EXPENDITURE TRANSPORT RELATED EXPENDITURE SUPPLIES & SERVICES THIRD PARTY PAYMENTS TRANSFER PAYMENTS SUPPORT SERVICES CHARGES | 90.150 18.940 2.288 21.425 67.744 5.343 2.948 208.837 | 86.977 20.628 2.334 18.069 74.801 5.574 3.204 211.587 | (3.173) 1.688 0.046 (3.356) 7.058 0.232 0.256 2.750 | -3.52% 8.91% 1.99% -15.66% 10.42% 4.33% 8.70% | (4.012) 0.789 (0.005) (1.687) 6.040 (0.137) 0.075 1.064 | 0.838 0.899 0.050 (1.669) 1.018 0.368 0.181 |
| TOTAL | 164.961 | 159.883 | (5.078) | -3.08% | (3.099) | (1.979) |

| HOUSING REVENUE ACCOUNT (HRA) 2 | CURRENT BUDGET | ACTUAL | FORECAST | WADIANCE | VADIANCE | PREVIOUS REPORTED | Appendix 2 MOVEMENT FROM PREVIOUS REPORTED |
|--|-------------------|--------------|-----------------|----------------|------------|----------------------|--|
| | 2024-25 £m | ACTUAL £m | 2024 - 25 £m | VARIANCE £m | VARIANCE % | VARIANCE £m | VARIANCE £m |
| Budgeted Expenditure | | | | | | | |
| Repairs & Maintenance | 47.298 | 45.562 | 45.561 | (1.737) | -3.67% | (0.452) | (1.285) |
| Supervision & Management | 21.728 | 22.390 | 22.390 | 0.662 | 3.05% | ` , | 0.631 |
| Funding Investment: | 220 | | | 3.332 | 3.3370 | 3.332 | 3.331 |
| Cost of Borrowing | 39.153 | 37.891 | 37.823 | (1.330) | -3.40% | (0.965) | (0.366) |
| Revenue Contribution (including CFCR) | 23.409 | 24.398 | 24.398 | 0.990 | 4.23% | (0.874) | 1.864 |
| | 131.588 | 130.241 | 130.172 | (1.415) | -1.08% | (2.259) | 0.844 |
| Voids | 2.571 | 2.286 | 2.286 | (0.285) | -11.08% | (0.290) | 0.005 |
| Housing Support Costs | (0.467) | (0.446) | (0.446) | 0.021 | -4.41% | (0.008) | 0.028 |
| Garden Care Scheme | 0.446 | 0.475 | 0.475 | 0.029 | 6.43% | ` , | (0.012) |
| Bad or Doubtful Debts | 2.907 | 3.624 | 3.624 | 0.717 | 24.66% | 0.891 | (0.174) |
| Other Expenditure | 12.312 | 13.708 | 13.708 | 1.396 | 11.34% | 2.032 | (0.636) |
| | 149.357 | 149.888 | 149.819 | 0.462 | 0.31% | 0.407 | 0.055 |
| Financed By: | | | | | | | |
| Dwelling Rents (Gross) | (139.112) | (139.396) | (139.395) | (0.283) | 0.20% | (0.192) | (0.091) |
| Non Dwelling Rents (Gross) | (3.774) | (3.701) | (3.701) | 0.073 | -1.93% | , | 0.018 |
| Hostels - Accommodation Charges | (2.257) | (2.439) | (2.439) | (0.182) | 8.07% | | 0.001 |
| Other Income | (1.492) | (1.562) | (1.562) | (0.070) | 4.66% | ` ' | 0.017 |
| Budgets transferred to/(from) Balances | , , | , , | , | | | , , | |
| (previous years carry forwards etc) | (2.722) | (2.790) | (2.722) | 0.000 | -0.00% | 0.000 | 0.000 |
| | (149.357) | (149.888) | (149.819) | (0.462) | 0.31% | (0.407) | (0.055) |
| Net Balance | 0.000 | 0.000 | 0.000 | 0.000 | 0.00% | 0.000 | 0.000 |

People and Communities Scrutiny Committee

25 September 2025

Agenda Item No. 11



2025-26 Revenue Monitoring Projected Outturn – Communities Service

Report by: Eileen Rowand, Executive Director, Finance and Corporate Services
Michael Enston, Executive Director, Communities

Wards Affected: All

Purpose

The purpose of this report is to give members an update on the projected outturn financial position for the 2025-26 financial year for the Communities Directorate & the Housing Revenue Account (HRA) which are areas in scope of the People & Communities Scrutiny Committee.

Recommendations

Committee is asked to consider the current financial performance and activity as detailed in this report.

Resource Implications

None.

Legal & Risk Implications

There are no direct legal implications arising from this report.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None.

1.0 Background

- 1.1 The purpose of this report is to advise Members of the projected outturn for the Communities Directorate and the HRA for the 2025-26 Revenue Budget, and to highlight the major variances as at June 2025.
- 1.2 Section 4 of the report summarises the progress on delivery of approved budget savings and provides an explanation of any variances to the delivery of savings target.
- 1.3 Variances occur for a number of reasons and variances in budget are not always correlated to delivery of savings targets.

2.0 Projected Outturn

2.1 **Projected Outturn**

- 2.1.1 There is a projected variance of (£2.397m) for the Communities Directorate. A summary of the 2025-26 projected out-turn for the areas under the scope of this committee is detailed in Appendix 1. Where there are significant variances (+/-£0.250m) to budgets a brief explanation is provided at Section 3.
- 2.1.2 The HRA is projecting nil net balances for 2025-26.

3.0 Major Variances

Children and Families – Projected Underspend (£2.365m)

- 3.1 There is a projected overspend of £0.911m on continuing care and £1.187m on Children Affected by Disability (CABD) of which £729k is on respite and £458k on direct payments, both of which are in line with last years spend.
- 3.2 These projected overspends are offset with projected underspends of (£1.999m) on family placements such as foster care and kinship, (£2.376m) on staffing due to staff turnover and budget for permanent posts/staff who are currently undertaking other temporary funded work and (£0.372m) on Purchased Placements due to the full year effect of the reduction in packages last financial year and since the start of April this year

Housing Revenue Account – Nil Variance

Repairs & Maintenance – Projected Underspend (£1.879m)

3.4 This is relating to responsive and change of tenancy repairs and is mainly due to the inflationary increase on charges from Building Services being less than planned.

- Supervision & Management Projected Overspend £0.493m
- 3.5 This overspend is mainly due to staff turnover being lower than assumed.
 - Bad or Doubtful Debts Projected Overspend £0.426m
- 3.6 An overspend is anticipated on the Rent Support Fund due to the managed migration of claimants to Universal Credit.
 - Dwelling Rents Under-recovery £0.974m
 - 3.7 Dwelling rents are forecasting an under recovery of rental income of £0.974m based on income received to date.

4.0 Progress on Budget Savings

- 4.1 Appendix 3 provides details of revenue budget savings for the areas falling under the scope of the Place Directorate, detailing achievements against the current year approved budget savings. The appendix details:
 - the 3 year budget period for which the savings were approved
 - the title of each saving
 - the savings target relevant to the current financial year
 - the value of saving forecast as deliverable for the financial year
 - a Red/Amber/Green Status for each saving
- 4.2 All savings have been categorised using a Red/Amber/Green status and these are described as follows:
 - Green No issues and saving is on track to be delivered
 - Amber There are minor issues or minor reduction in the value of saving, or delivery of the saving is delayed
 - Red Major issues should be addressed before any saving can be realised
- 4.3 Where a saving is no longer deliverable in the current year it is expected that substitute savings are identified to ensure that costs remain within budget overall. Where this is the case, the original saving will be categorised red or amber and a substitute saving will be identified. The substitute saving will be categorised as green and identified in the tracker as a substitute.
- 4.4 The full year saving amounts are detailed along with annual forecast information detailed in Appendix 3. There are no savings variations at Service level (+/-£0.250m) between the Service savings target and the projected saving being delivered within the current financial year.
- 4.5 Overall, the savings to be delivered are £2.026m for 2025/26 and the forecast delivery is £1.826m. Across all areas, there are £0.410m savings identified as being Amber status and it is forecast that £0.210m will be achieved in 2025/26. One of the savings Developing an In House Children Rights Service, £0.200m will be delayed until 2026/27,

5.0 Conclusions

- 5.1 There is a projected underspend of (£2.397m) for the Communities Directorate.
- 5.2 The HRA is projecting nil net balances for 2025-26.

List of Appendices

- 1 Projected Outturn 2025-26 Summary Communities Directorate
- 2 Projected Outturn 2025-26 Housing Revenue Account
- 3 25-26 Budget Savings Tracker

Background Papers

None

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| BUDGET MONITORING REPORT SUMMARY PEOPLE AND COMMUNITIES COMMUNITIES | | | Δ | ppendix 1 |
|--|--|---|---|--|
| | Current Budget | Forecast | Vari | ance |
| | £m | £m | £m | % |
| Total Cost of Services | 179.562 | 177.165 | (2.397) | (1.34%) |
| Less: Corporately Managed Items | 15.734 | 15.734 | 0.000 | 0.00% |
| Service Managed Net Budget | 163.828 | 161.431 | (2.397) | (1.46%) |
| Analysis of Service Managed Budget | | | | |
| Communities & Neighbourhoods | 57.571 | 57.663 | 0.092 | 0.16% |
| GFH - Housing & Neighbourhood Services | 17.043 | 17.083 | 0.041 | 0.24% |
| Communities Executive Director | 0.250 | 0.248 | (0.002) | (0.74%) |
| Children & Families | 72.120 | 69.755 | (2.365) | (3.28%) |
| Criminal Justice Service | 1.097 | 0.928 | (0.169) | (15.38%) |
| Customer & Online Services | 15.749 | 15.754 | 0.005 | 0.03% |
| | 163.828 | 161.431 | (2.397) | (1.46%) |
| | Current | | | |
| Subjective Grouping | Budget | Forecast | | ance |
| | £m | £m | C | |
| | | | £m | % |
| Service Managed Net Budget | 163.828 | 161.431 | £m (2.397) | % (1.46%) |
| Service Managed Net Budget Income | | 161.431 (44.882) | (2.397) | |
| | 163.828 | | (2.397) | (1.46%) |
| Income | 163.828 | | (2.397) | (1.46%) |
| Income Expenditure | 163.828 (43.527) | (44.882) | (2.397) (1.356) | (1.46%) |
| Income Expenditure Employee Costs | 163.828 (43.527) 91.492 | (44.882) 91.133 | (2.397) (1.356) (0.358) | (1.46%) 3.11% (0.39%) |
| Income Expenditure Employee Costs Premises Related Expenditure | 163.828 (43.527) 91.492 18.782 | 91.133 19.077 | (2.397) (1.356) (0.358) 0.295 | (1.46%) 3.11% (0.39%) 1.57% (9.55%) |
| Income Expenditure Employee Costs Premises Related Expenditure Transport Related Expenditure | 163.828 (43.527) 91.492 18.782 2.184 | 91.133 19.077 1.976 | (2.397) (1.356) (0.358) 0.295 (0.209) | (1.46%) 3.11% (0.39%) 1.57% (9.55%) |
| Income Expenditure Employee Costs Premises Related Expenditure Transport Related Expenditure Supplies & Services Third Party Payments Transfer Payments | 163.828 (43.527) 91.492 18.782 2.184 20.144 | 91.133 19.077 1.976 19.701 | (2.397) (1.356) (0.358) 0.295 (0.209) (0.443) 0.451 (0.778) | (1.46%) 3.11% (0.39%) 1.57% (9.55%) (2.20%) 0.68% |
| Income Expenditure Employee Costs Premises Related Expenditure Transport Related Expenditure Supplies & Services Third Party Payments | 163.828 (43.527) 91.492 18.782 2.184 20.144 66.306 5.493 2.953 | 91.133 19.077 1.976 19.701 66.758 4.715 2.953 | (2.397) (1.356) (0.358) 0.295 (0.209) (0.443) 0.451 (0.778) 0.000 | (1.46%) 3.11% (0.39%) 1.57% (9.55%) (2.20%) 0.68% (14.16%) 0.00% |
| Income Expenditure Employee Costs Premises Related Expenditure Transport Related Expenditure Supplies & Services Third Party Payments Transfer Payments | 163.828 (43.527) 91.492 18.782 2.184 20.144 66.306 5.493 | 91.133 19.077 1.976 19.701 66.758 4.715 | (2.397) (1.356) (0.358) 0.295 (0.209) (0.443) 0.451 (0.778) | (1.46%) 3.11% (0.39%) 1.57% (9.55%) (2.20%) 0.68% (14.16%) |

| HOUSING REVENUE ACCOUNT (HRA) 202 | 25-26 | | Ар | pendix 2 |
|---------------------------------------|-------------------------|----------------|-------------|-----------|
| | Current Budget £m | Forecast £m | Varia £m | ınce % |
| Budgeted Expenditure | | | | |
| Repairs & Maintenance | 50.451 | 48.573 | (1.879) | (3.72%) |
| Supervision & Management | 22.768 | 23.261 | 0.493 | 2.17% |
| Funding Investment: | | | | |
| Cost of Borrowing | 45.005 | 45.005 | 0.000 | 0.00% |
| Revenue Contribution (including CFCR) | 20.000 | 19.774 | (0.225) | (1.13%) |
| | 138.224 | 136.614 | (1.611) | (1.17%) |
| Voids | 2.137 | 2.137 | 0.000 | 0.00% |
| Housing Support Costs | (0.482) | (0.482) | 0.000 | 0.00% |
| Garden Care Scheme | 0.474 | 0.474 | 0.000 | 0.00% |
| Bad or Doubtful Debts | 3.387 | 3.813 | 0.426 | 12.59% |
| Other Expenditure | 13.753 | 13.873 | 0.121 | 0.88% |
| COVID Expenditure | 0.000 | 0.000 | 0.000 | 0.00% |
| | 157.494 | 156.430 | (1.064) | (0.68%) |
| Financed By | | | | |
| Dwelling Rents (Gross) | (149.537) | (148.562) | 0.974 | (0.65%) |
| Non Dwelling Rents (Gross) | (3.995) | (3.906) | 0.090 | (2.24%) |
| Hostels - Accommodation Charges | (2.441) | (2.441) | 0.000 | 0.00% |
| Other Income | (1.521) | (1.521) | 0.000 | 0.00% |
| | (157.494) | (156.430) | 1.064 | (0.68%) |
| | 0.000 | 0.000 | 0.000 | 0.00% |

TRACKING APPROVED 2025-26 SAVINGS PEOPLE AND COMMUNITIES COMMUNITIES JUNE 2025

Appendix 2

| | Approved | | | | | (Under)/ | |
|----------------------------------|-----------------|---------|---|-----------|--------|----------|--------|
| | Budget | Savings | | Savings | Actual | Over | Rag |
| Area | Year | Ref | Title of Savings Proposal | Target £m | £m | £m | Status |
| Housing & Neighbourhood Services | 2025-28 | CM-001 | Safer Communities - Travel Reduction | 0.020 | 0.020 | 0.000 | Green |
| Housing & Neighbourhood Services | 2025-28 | CM-003 | B&B Reduction | 0.150 | 0.150 | 0.000 | Green |
| Housing & Neighbourhood Services | 2025-28 | CM-004 | Commissioning Services in house | 0.050 | 0.050 | 0.000 | Green |
| Housing & Neighbourhood Services | 2025-28 | | Efficiency Saving | 0.063 | 0.000 | (0.063) | Amber |
| Customer & Online Service | 2025-28 | CM-008 | Increased digital focus for customer | 0.024 | 0.024 | 0.000 | Green |
| Customer & Online Service | 2025-28 | | Efficiency Saving | 0.103 | 0.000 | (0.103) | Amber |
| Communities & Neighbourhood | 2025-28 | CM-012 | Future of Leisure | 0.100 | 0.000 | (0.100) | Amber |
| Communities & Neighbourhood | 2025-28 | | Efficiency Saving | 0.144 | 0.000 | (0.144) | Amber |
| Children, Families & Justice | 2025-28 | CM-014 | Consolidate Community Social Work | 0.304 | 0.304 | 0.000 | Green |
| Children, Families & Justice | 2025-28 | CM-018 | Review of payments to Health | 0.427 | 0.427 | 0.000 | Green |
| Children, Families & Justice | 2025-28 | CM-019 | Developing an Inhouse Children's Rights | 0.200 | 0.000 | (0.200) | Amber |
| Children, Families & Justice | 2025-28 | CM-020 | Review of Taxi Usage | 0.100 | 0.100 | 0.000 | Green |
| Children, Families & Justice | 2025-28 | | Efficiency Saving | 0.233 | 0.233 | 0.000 | Green |
| Communities Directorate Wide | 2025-28 | CM-022 | Management & Organisational savings | 0.108 | 0.108 | 0.000 | Green |
| Grand Total | | | | 2.026 | 1.416 | (0.610) | |

Rag Status Key:-

Green - No issues and saving is on track to be delivered

Amber - There are minor issues or minor reduction in the value of saving, or delivery of the saving is delayed

Red - Major issues should be addressed before any saving can be realised

| | Summary | | | | | | | | | |
|---------------|-------------------------|----------------|------------------------|--|--|--|--|--|--|--|
| Rag Status | Savings Target £m | Forecast £m | (Under) /Over £m | | | | | | | |
| Green | 1.416 | 1.416 | 0.000 | | | | | | | |
| Amber | 0.610 | 0.410 | (0.200) | | | | | | | |
| Red | 0.000 | 0.000 | 0.000 | | | | | | | |
| Total | 2.026 | 1.826 | (0.200) | | | | | | | |

People & Communities Scrutiny Committee



25 September 2025

Agenda Item No. 12

2024-25 Capital Plan Outturn – Communities

Report by: Eileen Rowand, Executive Director, Finance and Corporate Services

Michael Enston, Executive Director, Communities Directorate

Wards Affected: All

Purpose

The purpose of this report is to provide an update on the Capital Investment Plan and advise on the provisional financial position for the 2024-25 financial year.

Recommendation(s)

Committee is asked to consider the current performance and activity for the 2024-25 Capital Plan Outturn as detailed in this report.

Resource Implications

None.

Legal & Risk Implications

None.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None.

1.0 Background

- 1.1 Based on current information, this report summarises the capital outturn for the areas falling under the scope of this Committee for 2024-25. The provisional expenditure is £140.921m resulting in a variance of (£14.218m).
- 1.2 Appendix 1 shows an analysis of specific projects in the current capital investment plan which have a budget greater than £1m and analyses total project cost rather than only in year spend.
- 1.3 Appendix 2 details the actual expenditure and income against budget for each project. A brief explanation of any significant forecast variances is provided at section 3 within this report.

2.0 Governance

- 2.1 On 21 June 2016 the Executive Committee approved revised governance and scrutiny arrangements for major capital projects. At that meeting the Committee agreed an enhanced level of reporting on capital projects through the quarterly capital expenditure monitoring report.
- 2.2 Across the Capital Investment Plan there continues to be risk that both the timing and the costs of projects are adversely affected by the current economic climate. Inflationary increases have had a significant impact, and these have been reflected in the Plan. Monitoring of the impact of any additional costs on projects will continue and any significant impact on timescales and associated risks will be reported to this committee. Where appropriate, any known impact on timing of delivery of projects has been built in to the rephased plan and the overall scale of any additional costs or further delays has been considered as part of the review of the Capital Investment Plan approved in February 2025.

3.0 Issues, Achievements & Financial Performance

Key Issues / Risks

- 3.1 Appendix 1 details the total cost position for all capital projects within the areas under the scope of the Committee with an overall value of £1m and over. At this stage of the financial year there are no key issues associated with the major projects.
- 3.2 Across the Capital Investment Plan there continues to be risk that both the timing and the costs of projects are adversely affected by the current economic climate. Throughout the programme, issues are continuing to be identified in relation to the supply of construction materials, the consequences of which have been considered and reflected in the Capital Investment Plan review which was approved by Fife Council on 22 June 2023. Monitoring of the impact of any additional costs on projects still in their infancy will continue and any significant impact on timescales and associated risks will be reported to this committee. Where appropriate, any known impact on timing of delivery of projects has been built in to the rephased plan

- and the overall scale of any additional costs or further delays will be considered as part of the review of the Capital Investment Plan.
- 3.3 These potential risks cover all aspects of the capital plan including both General Fund and the HRA.

Major Projects - Potential Risks and Actions

- 3.4 There is a variance of £0.500m on Glenwood Regeneration project as a result of the Compulsory Purchase Orders being higher than anticipated.
- 3.5 The Golf Depot Hub is projecting an underspend of £0.671m at present but discussions are ongoing in relation to this project with expenditure expected in 2025-26.

Financial Performance - 2024-25 Outturn

- 3.6 Appendix 2 provides a summary of the outturn for each project for the financial year 2024-25. The appendix shows a provisional outturn of £140.921m against a Capital Investment plan of £155.139m, a spending level of 91%.
- 3.7 The reasons for significant variances (+/-£0.500m) are detailed below.
- 3.8 Slippage is the term used to describe projects that are expected to spend less than the budget allocation in a particular year due to a delay in timing on the delivery of the project. This is not uncommon in the capital programme and the reasons for this can be wide and varied. Advancement is the term used to describe projects that are expected to spend more than the budget allocation in a particular year due to an acceleration of the budget from future years.

Significant Variances

Area Community & Corporate Development – Variance of (£9.105m)

- 3.09 Countryside has an underspend of (£1.191m) the majority of which relates to using inhouse services rather than sourcing these externally and contributions from SEPA received in advance and (£0.105m) remains uncommitted. Sports and Golf Programme has an underspend of (£0.786m) due to the Golf Depot costs being less than anticipated. Area Community Facilities has an advancement £0.709m, mainly due to the advancement of enabling works on site for Templehall Integrated Community Hub.
- 3.10 Improving Health Through Leisure and Sport has slippage of (£0.804m) within approved projects relating to several playpark projects across Fife. These projects are delayed aligning with the outcome of the play space strategy which is to be agreed by each area committee and the desire to involve communities to seek match funding against council and Scottish Government funding for play parks. Budget of (£0.155m) remains unallocated

- 3.11 Sport & Leisure Facilities has slippage of (£3.456m), (£2.054m) is relating to enabling works issues causing a delay to starting on site for Cowdenbeath Leisure centre. Budget of (£0.565m) remains unallocated. The remaining slippage is due to Synthetic Turf Pitch costs being less than anticipated alongside securing external funding.
- 3.12 Area Capital Investment has slippage of (£0.404m) relating to several playpark projects across Fife, these projects are delayed aligning with the outcome of the play space strategy and the desire to involve communities to seek match funding against Council and Scottish Government funding for play parks. Fife Tourism infrastructure has slippage of (£0.469m), projects have now been identified to utilise this funding.
- 3.13 Plant & Machinery Replacement programme has slippage of (£0.466m), this is a result of a delay to the replacement of machinery with Fife Golf Trust. Discussions are ongoing to identify additional budget to enable the replacement programme to commence. Parks development projects have slippage of (£1.874m) due to the utilisation of the Play Park Renewal funding over core budget.

Area Community & Corporate Income – variance £2.342m

3.14 The variance of £1.683m relates to Back Burn Restorations project income. Income is drawn down once expenditure has been incurred. £0.577m relates to playpark development projects.

Children & Families – slippage (£0.747m)

3.15 There has been delays in the detail design stage of Glenmar House as design and procurement had taken longer than expected resulting in slippage of £0.604m. Review of design and cost is ongoing.

Housing Revenue Account – variance (£4.391m)

Specific Needs/Sheltered Housing – slippage (£2.794m)

3.16 There is slippage of (£3.784m) relating to the Property Acquisition Programme. Spend is prioritised to maximise the subsidy available and 37 properties were purchased this financial year using the available subsidy in year. A further 3 properties three properties were purchased this financial year utilising resettlement funds. The slippage will be used to fund the acquisition of more properties in 2025-26, again, maximising the use of available subsidy and ensuring best value for tenants.

The slippage was offset by accelerating £1.063m spend on the Tarvit Mill travelling people site from future years.

Affordable Housing – slippage (£3.235m)

- 3.17 There is slippage within the affordable housing programme (£3.235m) against a budget of £73.624m. This is partly due to delays at some sites with spend slipping into future years. Due to the high level of spend per site, a delay in project start date start dates can cause a material level of slippage.
 - Major Projects advancement £1.088m
- 3.18 This is mainly due to accelerating £1.541m spend on the Swan and Memorial Court project from future years. This is partially offset by (£0.554m) slippage on roof replacement works at Glamis Road, Kirkcaldy.

4.0 Conclusions

- 4.1 The total 2024-25 approved programme for the areas in scope of this Committee is £155.139m. The level of expenditure is £140.921m, which represents 91% of the total programme, resulting in a variance of (£14.218m).
- 4.2 The management of capital resources require us to look across financial years, as well as within individual years. The current year performance is only a snapshot of the existing plan, and the Directorate will adjust expenditure levels within future years of the plan to accommodate the advancement or slippage of projects.

List of Appendices

- 1. Total Cost Monitor
- 2. Capital Monitoring Report by Service

Background Papers

None

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FIFE COUNCIL
PEOPLE & COMMUNITIES SCRUTINY COMMITTEE
COMMUNITIES DIRECTORATE
CAPITAL INVESTMENT PLAN 2024-35
TOTAL COST MONITOR - MAJOR CAPITAL PROJECTS

| Project | Theme | Current Project Budget £m | Total Projected Outturn £m | Variance | Variance % | Current Project Status | Expected Project Completion Date |
|---|-------------------------|------------------------------------|-------------------------------------|----------|---------------|---------------------------|---|
| All a de la facción de la | TI di la Biana | 0.000 | 0.000 | | 0.000/ | Occurrent Durain at | 0004.05 |
| Abbeyview Integrated Hub | Thriving Places | 8.006 | 8.006 | | 0.00% | Current Project | 2024-25 |
| Templehall Community Hub | Thriving Places | 15.304 | 15.304 | - | 0.00% | Current Project | 2026-27 |
| Cowdenbeath Leisure Centre - Phase 2 | Thriving Places | 7.767 | 7.767 | - | 0.00% | Current Project | 2025-26 |
| East Sands Redevelopment Project | Thriving Places | 6.000 | 6.000 | | 0.00% | Future Project | 2029-30 |
| Affordable Housing | Housing Revenue Account | 219.853 | 219.853 | | - | Future Project | 2027-28 |
| Swan and Memorial High Rise | Housing Revenue Account | 7.002 | 7.002 | | 0.00% | Future Project | 2026-27 |
| Total Major Projects over £5.000m | | 263.932 | 263.932 | - | 0.00% | | |
| | | | | | | | |
| Silverburn | Thriving Places | 4.000 | 4.000 | | 0.00% | Current Project | 2025-26 |
| Glenwood Regeneration | Thriving Places | 2.529 | 3.029 | | 19.77% | Current Project | 2024-25 |
| Back Burn Restoration | Thriving Places | 1.863 | 1.863 | - | 0.00% | Current Project | 2025-26 |
| Beacon Leisure Centre - Upgrade Enhancements | Thriving Places | 1.000 | 1.000 | - | 0.00% | Future Project | 2026-27 |
| West Fife Swimming Pool | Thriving Places | 13.200 | 13.200 | - | 0.00% | Future Project | 2028-29 |
| Lochgelly Community Hub | Thriving Places | 1.000 | 1.000 | - | 0.00% | Future Project | 2026-27 |
| River Leven Restoration | Thriving Places | 2.161 | 2.161 | - | 0.00% | Current Project | 2025-26 |
| Rockgelly | Thriving Places | 1.186 | 1.186 | - | 0.00% | Current Project | 2024-25 |
| Lochore Meadows Phase 2 | Thriving Places | 1.152 | 1.152 | - | 0.00% | Completed Project | 2024-25 |
| Golf Depot Hub Glenrothes | Maintaining Our Assets | 1.650 | 1.650 | - | 0.00% | Future Project | 2025-26 |
| Affordable Housing | Housing Revenue Account | 19.731 | 19.731 | - | - | Ongoing Project | On-going |
| Glamis Road Kirkcaldy | Housing Revenue Account | 1.711 | 1.711 | - | 0.00% | Future Project | 2026-27 |
| Reprovision Glenmar Childrens Home | Opportunities for All | 1.705 | 1.705 | - | 0.00% | Future Project | 2025-26 |
| Total Major Projects over £1.000m | | 52.889 | 53.389 | 0.500 | 0.95% | | |
| Total Major Projects | | 316.821 | 317.321 | 0.500 | 0.16% | | |

FIFE COUNCIL PEOPLE & COMMUNITIES SCRUTINY COMMITTEE COMMUNITIES DIRECTORATE CAPITAL INVESTMENT PLAN 2024-33 MONITORING REPORT 2024-25

| | Current | Actual | Projected | Projected | Projected |
|--|---------|---------|-----------|-----------|------------|
| | Budget | to Date | Outturn | Variance | Outturn as |
| Expenditure | £m | £m | £m | £m | % of Plan |
| | | | | | |
| Community Facilities Programme | 3.394 | 3.314 | 3.314 | (0.080) | 98% |
| Countryside Programme | 2.806 | 1.616 | 1.616 | (1.191) | 58% |
| Libraries, Museums, Galleries & Theatres | 0.063 | 0.049 | 0.049 | (0.014) | 77% |
| Plant & Machinery Replacement Programme | 0.466 | - | - | (0.466) | 0% |
| Major Parks Programme | 0.040 | 0.000 | 0.000 | (0.040) | 0% |
| Allotments Programme | 0.375 | 0.242 | 0.242 | (0.133) | 64% |
| Parks Development Projects | 3.879 | 2.005 | 2.005 | (1.874) | 52% |
| Future of Leisure | - | - | - | - | 0% |
| Sports & Golf Programme | 0.841 | 0.054 | 0.054 | (0.786) | 6% |
| Improving Health Through Leisure & Sport | 1.100 | 0.296 | 0.296 | (0.804) | 27% |
| Area Community Facilities | 3.851 | 4.559 | 4.559 | 0.709 | 118% |
| Area Capital Investment | 0.485 | 0.081 | 0.081 | (0.404) | 17% |
| Sport and Leisure Facilities | 7.945 | 4.489 | 4.489 | (3.456) | 57% |
| Fife Tourism Infrastructure Programme | 0.636 | 0.167 | 0.167 | (0.469) | 0% |
| Sports, Leisure and Community Assets | 0.167 | 0.071 | 0.071 | (0.096) | 42% |
| | | | | | |
| TOTAL AREA COMMUNITY & CORPORATE DEVELOPMENT | 26.050 | 16.944 | 16.944 | (9.105) | 65% |
| | | | | | |
| Disability Adaptations | 1.200 | 1.226 | 1.226 | 0.026 | 102% |
| | | | | | |
| TOTAL GENERAL FUND HOUSING | 1.200 | 1.226 | 1.226 | 0.026 | 102% |
| | 4 000 | 4 ==0 | 4 ==0 | 0.040 | 4000/ |
| Minor Works | 1.232 | 1.578 | 1.578 | 0.346 | 128% |
| Policy Options | 1.588 | 1.285 | 1.285 | (0.302) | 81% |
| Regeneration/Estates Action | 1.547 | 2.133 | 2.133 | 0.586 | 138% |
| Component Replacement | 34.675 | 34.552 | 34.552 | (0.123) | 100% |
| Specific Needs/Sheltered Housing | 11.150 | 8.355 | 8.355 | (2.794) | 75% |
| Structural Works (Specialist) | 1.381 | 1.424 | 1.424 | 0.043 | 103% |
| Affordable Housing | 59.046 | 62.975 | 62.975 | 3.929 | 107% |
| Major Projects | 1.489 | 2.577 | 2.577 | 1.088 | 173% |
| Affordable Housing Phase 4 | 14.578 | 7.414 | 7.414 | (7.164) | 51% |
| TOTAL HOUSING REVENUE ACCOUNT | 126.686 | 122.294 | 122.294 | (4.391) | 97% |
| TOTAL HOUSING REVENUE ACCOUNT | 120.000 | 122.234 | 122.294 | (4.391) | 91 /0 |
| | | | | | |
| Looked After Children Homes Reprovision | 0.801 | 0.196 | 0.196 | (0.604) | 25% |
| Looked After Children | 0.403 | 0.196 | 0.196 | (0.142) | 65% |
| CHILDRENS CAPITAL | 1.204 | 0.261 | 0.261 | (0.142) | 38% |
| OHILDRENO OAI HAL | 1.204 | 0.437 | 0.437 | (0.141) | 30 /0 |
| | | | | | |
| TOTAL EXPENDITURE | 155.139 | 140.921 | 140.921 | (14.218) | 91% |

| Income | Current Budget £m | Actual to Date £m | Projected Outturn £m | Projected Variance £m | Projected Outturn as % of Plan |
|--|-------------------------|-------------------------|----------------------------|-----------------------------|--------------------------------------|
| Community Facilities Programme | (2.046) | (2.046) | (2.046) | - | 100% |
| Countryside Programme | (3.114) | (1.432) | (1.432) | 1.683 | 46% |
| Allotments Programme | (0.161) | (0.161) | (0.161) | - | 100% |
| Parks Development Projects | (0.851) | (0.274) | (0.274) | 0.577 | 32% |
| Improving Health Through Leisure & Sport | (0.142) | (0.067) | (0.067) | 0.075 | 47% |
| Sport and Leisure Facilities | (0.151) | (0.151) | (0.151) | - | 100% |
| Fife Tourism Infrastructure Programme | (0.007) | - | - | 0.007 | 0% |
| TOTAL AREA COMMUNITY & CORPORATE DEVELOPMENT | (6.492) | (4.149) | (4.149) | 2.342 | 64% |
| | | | _ | | |
| Regeneration/Estates Action | - | - | - | - | 0% |

Appendix 2

FIFE COUNCIL PEOPLE & COMMUNITIES SCRUTINY COMMITTEE COMMUNITIES DIRECTORATE CAPITAL INVESTMENT PLAN 2024-33 MONITORING REPORT 2024-25

| Component Replacement | (0.175) | (0.175) | (0.175) | 0.000 | 0% |
|---|----------|----------|----------|---------|------|
| Specific Needs/Sheltered Housing | (2.200) | (2.450) | (2.450) | (0.250) | 111% |
| Affordable Housing | (18.116) | (17.909) | (17.909) | 0.207 | 99% |
| Affordable Housing Phase 4 | (0.717) | (2.843) | (2.843) | (2.126) | 397% |
| TOTAL HOUSING REVENUE ACCOUNT | (21.242) | (23.411) | (23.411) | (2.169) | 110% |
| | | | | | |
| Looked After Children Homes Reprovision | - | - | - | - | 0% |
| Looked After Children | - | - | - | - | 0% |
| CHILDRENS CAPITAL | - | - | - | - | 0% |
| | | | | | |
| TOTAL INCOME | (27.734) | (27.560) | (27.560) | 0.173 | 99% |

People & Communities Scrutiny Committee



25 September 2025

Agenda Item No. 13

2025-26 Capital Plan Projected Outturn – Communities

Report by: Eileen Rowand, Executive Director, Finance and Corporate Services

Michael Enston, Executive Director, Communities Directorate

Wards Affected: All

Purpose

The purpose of this report is to provide an update on the Capital Investment Plan and advise on the projected financial position for the 2025-26 financial year.

Recommendation(s)

Committee is asked to consider the current performance and activity for the 2025-26 Capital Monitoring as detailed in this report.

Resource Implications

None.

Legal & Risk Implications

None.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None.

1.0 Background

- 1.1 Based on current information, this report summarises the projected capital outturn for the areas falling under the scope of this Committee for 2025-26. At this stage it is forecast that the projected expenditure will be £193.775m resulting in a variance of £0.428m.
- 1.2 Appendix 1 shows an analysis of specific projects in the current capital investment plan which have a budget greater than £1m and analyses total project cost rather than only in year spend.
- 1.3 Appendix 2 details the actual expenditure and income against budget for each project. A brief explanation of any significant forecast variances is provided at section 3 within this report.

2.0 Governance

- 2.1 On 21 June 2016 the Executive Committee approved revised governance and scrutiny arrangements for major capital projects. At that meeting the Committee agreed an enhanced level of reporting on capital projects through the quarterly capital expenditure monitoring report.
- 2.2 Across the Capital Investment Plan there continues to be risk that both the timing and the costs of projects are adversely affected by the current economic climate. Inflationary increases have had a significant impact, and these have been reflected in the Plan. Monitoring of the impact of any additional costs on projects will continue and any significant impact on timescales and associated risks will be reported to this committee. Where appropriate, any known impact on timing of delivery of projects has been built in to the rephased plan and the overall scale of any additional costs or further delays has been considered as part of the review of the Capital Investment Plan approved in February 2025.

3.0 Issues, Achievements & Financial Performance

Key Issues / Risks

- 3.1 Appendix 1 details the total cost projected position for all capital projects within the areas under the scope of the Committee with an overall value of £1m and over. At this stage of the financial year there are no key issues associated with the major projects.
- 3.2 Across the Capital Investment Plan there continues to be risk that both the timing and the costs of projects are adversely affected by the current economic climate. Throughout the programme, issues are continuing to be identified in relation to the supply of construction materials, the consequences of which have been considered and reflected in the Capital Investment Plan review which was approved by Fife Council on 22 June 2023. Monitoring of the impact of any additional costs on projects still in their infancy will continue and any significant impact on timescales and associated risks will be reported to this committee. Where appropriate, any

known impact on timing of delivery of projects has been built in to the rephased plan and the overall scale of any additional costs or further delays will be considered as part of the review of the Capital Investment Plan.

3.3 These potential risks cover all aspects of the capital plan including both General Fund and the HRA.

Major Projects - Potential Risks and Actions

3.4 There is a variance of £0.441m on Glenwood Regeneration project as a result of the Compulsory Purchase Orders being higher than anticipated.

Financial Performance – 2025-26 Projected Outturn

- 3.5 Appendix 2 provides a summary of the projected outturn for each project for the financial year 2025-26. The appendix shows a projected outturn of £193.775m against a Capital Investment plan of £193.347m, a spending level of 100%.
- 3.6 The reasons for significant variances (+/-£0.500m) are detailed below.
- 3.7 Slippage is the term used to describe projects that are expected to spend less than the budget allocation in a particular year due to a delay in timing on the delivery of the project. This is not uncommon in the capital programme and the reasons for this can be wide and varied. Advancement is the term used to describe projects that are expected to spend more than the budget allocation in a particular year due to an acceleration of the budget from future years.

Significant Variances

Area Community & Corporate Development – Variance of £0.441m

3.8 Community Facilities Programme has a projected overspend of £0.441m on Glenwood Regeneration project as a result of the Compulsory Purchase Orders being higher than anticipated.

Housing Revenue Account – variance (£0.013m)

Major Projects – advancement £2.300m

3.9 This is mainly due to the Swan and Memorial Court project which is now expected to complete by the end of this financial year.

Property Acquisitions – slippage (£1.960m)

3.10 There is slippage of £1.960m relating to the Property Acquisition Programme. The slippage on property acquisitions is part of a two year strategy to maximise the use of the additional subsidy available. It is anticipated that properties will be purchased this financial year using the available budget and subsidy in year and fully utilising this slippage. The Council is also boosting the number of acquisitions by using the UK Resettlement Funding to enhance capacity to prevent homelessness.

4.0 Conclusions

- 4.1 The total 2025-26 approved programme for the areas in scope of this Committee is £193.347m. The projected level of expenditure is £193.775m, which represents 100% of the total programme, resulting in a variance of £0.428m.
- 4.2 The management of capital resources require us to look across financial years, as well as within individual years. The current year performance is only a snapshot of the existing plan, and the Directorate will adjust expenditure levels within future years of the plan to accommodate the advancement or slippage of projects.

List of Appendices

- 1. Total Cost Monitor
- 2. Capital Monitoring Report by Service

Background Papers

None

Report Contact

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FIFE COUNCIL PEOPLE & COMMUNITIES SCRUTINY COMMITTEE

COMMUNITIES DIRECTORATE CAPITAL INVESTMENT PLAN 2025-35 TOTAL COST MONITOR - MAJOR CAPITAL PROJECTS

| Project | Theme | Original Approved Budget £m | Current Project Budget £m | Total Projected Outturn £m | Variance £m | Variance % | Current Project Status | Expected Project Completion Date |
|--|-------------------------|--------------------------------------|------------------------------------|-------------------------------------|----------------|---------------|---------------------------|----------------------------------|
| | | | | | | | | |
| Abbeyview Integrated Hub | Thriving Places | 1.500 | 8.006 | 8.006 | - | 0.00% | Current Project | 2025-26 |
| Templehall Community Hub | Thriving Places | 1.500 | 15.304 | 15.304 | - | 0.00% | Current Project | 2026-27 |
| Cowdenbeath Leisure Centre - Phase 2 | Thriving Places | 1.600 | 7.767 | 7.767 | (0.000) | 0.00% | Current Project | 2025-26 |
| West Fife Swimming Pool | Thriving Places | 1.000 | 13.200 | 13.200 | - | 0.00% | Future Project | 2028-29 |
| East Sands Redevelopment Project | Thriving Places | 6.000 | 6.000 | 6.000 | - | 0.00% | Future Project | 2029-30 |
| Carnegie Hall | Thriving Places | 10.000 | 10.000 | 10.000 | - | 0.00% | Preparatory Works | 2028-29 |
| Affordable Housing | Housing Revenue Account | | 211.856 | 211.856 | - | 0.00% | Future Project | 2027-28 |
| Swan and Memorial High Rise | Housing Revenue Account | | 7.002 | 7.002 | - | 0.00% | Current Project | 2025-26 |
| Glenmar - West Mill - Kirkcaldy Phase 2 | Opportunities for All | 5.600 | 5.600 | 5.600 | - | 0.00% | Future Project | 2028-29 |
| Total Major Projects over £5.000m | | 27.200 | 284.736 | 284.736 | (0.000) | 0.00% | | |
| Silverburn | Thriving Places | 1.000 | 4.000 | 4.000 | - | 0.00% | Current Project | 2025-26 |
| Glenwood Regeneration | Thriving Places | 1.500 | 2.529 | 2.970 | 0.441 | 17.44% | Current Project | 2025-26 |
| Back Burn Restoration | Thriving Places | | 1.863 | 1.863 | - | 0.00% | Current Project | 2025-26 |
| Beacon Leisure Centre - Upgrade Enhancements | Thriving Places | 1.000 | 1.000 | 1.000 | - | 0.00% | Future Project | 2026-27 |
| Lochgelly Community Hub | Thriving Places | 1.000 | 1.000 | 1.000 | - | 0.00% | Future Project | 2026-27 |
| River Leven Restoration | Thriving Places | | 2.161 | 2.161 | - | 0.00% | Current Project | 2025-26 |
| Replace Golf Machinery | Thriving Places | 1.700 | 1.700 | 1.700 | - | 0.00% | Current Project | 2026-27 |
| Lochgelly Town Hall | Thriving Places | 1.000 | 1.000 | 1.000 | - | 0.00% | Feasibility | 2027-28 |
| Golf Depot Hub Glenrothes | Maintaining Our Assets | 0.650 | 1.650 | 1.650 | - | 0.00% | Current Project | 2026-27 |
| Affordable Housing | Housing Revenue Account | | 35.662 | 35.663 | 0.000 | 0.00% | Ongoing Project | On-going |
| Glamis Road Kirkcaldy | Housing Revenue Account | | 1.361 | 1.361 | - | 0.00% | Current Project | 2025-26 |
| Reprovision Glenmar Childrens Home | Opportunities for All | | 1.705 | 1.705 | - | 0.00% | Current Project | 2026-27 |
| Total Major Projects over £1.000m | | 7.850 | 55.632 | 56.073 | 0.441 | 0.79% | | |
| Total Major Projects | | 35.050 | 340.367 | 340.809 | 0.441 | 0.13% | | |

FIFE COUNCIL PEOPLE & COMMUNITIES SCRUTINY COMMITTEE COMMUNITIES DIRECTORATE CAPITAL INVESTMENT PLAN 2025-35 MONITORING REPORT 2025-26

| | Current | Actual | Projected | Projected | Projected |
|--|-----------------|---------|----------------|-----------|----------------------|
| | Budget | to Date | Outturn | Variance | Projected Outturn as |
| Expenditure | £m | £m | £m | £m | % of Plan |
| | 0.000 | 0.450 | 0.504 | 0.444 | 0540/ |
| Community Facilities Programme | 0.080 | 0.153 | 0.521 | 0.441 | 651% |
| Countryside Programme | 3.187 | 0.035 | 3.187 | - | 100% |
| Libraries, Museums, Galleries & Theatres | 0.109 | 0.009 | 0.109 | - | 100% |
| Plant & Machinery Replacement Programme | 0.894 | - | 0.894 | - | 100% |
| Major Parks Programme | 0.040 | - 0.000 | 0.040 | - | 100% |
| Allotments Programme | 0.194 | 0.022 | 0.194 | - | 100% 100% |
| Parks Development Projects | 2.532 | 0.299 | 2.532 | - | |
| Future of Leisure | 1.050 | 0.022 | 1.050 | - | 0% |
| Sports & Golf Programme | 1.958 | 0.033 | 1.958 | - | 100% |
| Improving Health Through Leisure & Sport | 0.804 | 0.056 | 0.804 | - | 100% |
| Area Community Facilities | 13.020 0.774 | 1.422 | 13.020 | - | 100% |
| Area Capital Investment | 6.221 | 1.235 | 0.774 6.221 | - | 100% 100% |
| Sport and Leisure Facilities | 0.669 | 0.015 | | - | 0% |
| Fife Tourism Infrastructure Programme | | 0.015 | 0.669 | - | |
| Sports, Leisure and Community Assets | 0.096 | - | 0.096 | - | 100% |
| Fife Cultural Assets | 0.275 | - | 0.275 | - | 100% |
| TOTAL AREA COMMUNITY & CORPORATE DEVELOPMENT | 30.854 | 3.279 | 31.295 | 0.441 | 101% |
| | 1.000 | 2.2.12 | 4.000 | | 1000/ |
| Disability Adaptations | 1.083 | 0.212 | 1.083 | - | 100% |
| TOTAL GENERAL FUND HOUSING | 1.083 | 0.212 | 1.083 | - | 100% |
| | | | | | |
| Minor Works | 0.935 | 0.056 | 0.935 | - | 100% |
| Policy Options | 2.908 | 0.190 | 2.908 | - | 100% |
| Regeneration/Estates Action | 5.186 | 0.187 | 4.833 | (0.353) | 93% |
| Component Replacement | 36.298 | 9.297 | 36.298 | - | 100% |
| Specific Needs/Sheltered Housing | 4.950 | 0.831 | 4.950 | - | 100% |
| Structural Works (Specialist) | 1.218 | 0.175 | 1.218 | - | 100% |
| Affordable Housing | 94.173 | 14.058 | 94.173 | - | 100% |
| Major Projects | 3.904 | 1.024 | 6.204 | 2.300 | 159% |
| Property Acquisitions | 8.594 | - | 6.634 | (1.960) | 77% |
| Fire Risk Assessment Programme | 2.850 | - | 2.850 | - | 100% |
| TOTAL HOUSING REVENUE ACCOUNT | 161.017 | 25.817 | 161.003 | (0.013) | 100% |
| | | | | | |
| Looked After Children Homes Reprovision | 0.250 | (0.001) | 0.250 | - | 100% |
| Looked After Children | 0.143 | 0.007 | 0.143 | _ | 100% |
| CHILDRENS CAPITAL | 0.393 | 0.007 | 0.393 | - | 100% |
| | | | | | |
| TOTAL EXPENDITURE | 193.347 | 29.315 | 193.775 | 0.428 | 100% |

FIFE COUNCIL PEOPLE & COMMUNITIES SCRUTINY COMMITTEE COMMUNITIES DIRECTORATE CAPITAL INVESTMENT PLAN 2025-35 MONITORING REPORT 2025-26

| Income | Current Budget £m | Actual to Date £m | Projected Outturn £m | Projected Variance £m | Projected Outturn as % of Plan |
|--|-------------------------|-------------------------|----------------------------|-----------------------------|--------------------------------------|
| Countryside Programme | (1.683) | (0.004) | (1.687) | (0.004) | 100% |
| Parks Development Projects | (0.662) | (0.016) | (0.677) | (0.015) | 102% |
| Improving Health Through Leisure & Sport | (0.075) | (0.039) | (0.075) | - | 100% |
| Sport and Leisure Facilities | (0.063) | - | (0.063) | - | 100% |
| Fife Tourism Infrastructure Programme | (0.007) | (0.020) | (0.027) | (0.020) | 378% |
| Sports, Leisure and Community Assets | - | - | - | - | 0% |
| TOTAL AREA COMMUNITY & CORPORATE DEVELOPMENT | (2.490) | (0.080) | (2.529) | (0.039) | 102% |
| | | | | | |
| Component Replacement | - | (0.023) | (0.023) | (0.023) | 0% |
| Affordable Housing | (17.595) | (6.188) | (17.595) | - | 100% |
| Property Acquisitions | (1.848) | - | (2.242) | (0.394) | 121% |
| TOTAL HOUSING REVENUE ACCOUNT | (19.443) | (6.211) | (19.861) | (0.417) | 102% |
| Looked After Children Homes Reprovision | - | - | - | - | 0% |
| Looked After Children | - | - | - | _ | 0% |
| CHILDRENS CAPITAL | - | - | - | - | 0% |
| TOTAL INCOME | (21.934) | (6.291) | (22.390) | (0.456) | 102% |



25 September 2025 Agenda Item No. 14

2024-25 Revenue Budget Provisional Out-turn – Health & Social Care

Report by: Lynne Garvey, Director, Health & Social Care Partnership

Eileen Rowand, Executive Director, Finance & Corporate Services

Wards Affected: All

Purpose

The purpose of this report is to give members an update on the 2024-25 provisional out-turn at March 2025 and the movement from December 2024 for Fife Council Social Care Services for Adults and Older People.

Recommendation(s)

Committee is asked to consider the current financial performance and activity as detailed in the report.

Resource Implications

None

Legal & Risk Implications

The Service requires to manage the risk to individual clients and the community in Fife whilst undertaking its statutory duties within the budget approved by the Council for 2024-25.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None

1.0 Background

- 1.1 The purpose of this report is to advise Members of the Health & Social Care provisional outturn for 2024-25, taking in to account the actual expenditure incurred. Explanations of major variances are highlighted at Section 3. This is the fifth and last monitoring report to the Scrutiny Committee for the 2024-25 financial year.
- 1.2 Section 4 of the report summarises the progress on delivery of approved budget savings and provides an explanation of any variances to the delivery of the savings target.
- 1.3 Section 5 of the report summarises the Risk share apportionment for each Partner.

2.0 IJB

- 2.1 IJB Budget
- 2.1.1 The Health & Social Care Partnership (H&SCP) consists of parts of NHS, Social Care for Adults and Older People and an element of Fife Council Housing, specifically adaptations to houses. It does not include any social care expenditure incurred through Education & Children's Services. The budget is managed by the Integration Joint Board (IJB).
- 2.1.2 The IJB budget was approved on 31 March 2024. The cost to deliver services at existing levels required more funding than was currently available from both partner organisations and therefore a £39m package of savings plan to close the funding gap was presented and approved at that meeting. Additional allocations are awarded in year through Health budget allocations and the current budget for 2024-25 as at March is £744.515m.
- 2.1.3 Total reserves of £4.731m are held by Fife Council on behalf of the IJB. This is made up of £3.496m reserves that are ear-marked for specific use e.g. Mental Health, Community Living Change Plan etc. and, £1.235m of committed reserves which is to cover the cost of replacing existing Analogue Community alarms with Digital alarms. Allocated in year ear-marked £2.974m and committed £0.264m. Additions in year ear-marked £0.052m Anti-Poverty and committed £0.167m for Housing Adaptations. The closing balance of £1.712m will be carried forward into 2025-26. There were no general reserves available for use in 2024-25.
- 2.2 IJB Integration Scheme
- 2.2.1 To reflect the partnership working between the NHS and Fife Council through the Health & Social Care Partnership, an agreement has been reached on how any overspends should be shared between the partners. This is known as the risk share agreement and is part of the Integration Scheme. The share of Fife Council funds is 39% and NHS funds 61% regardless of where the overspend is incurred.
- 2.2.2 The H&SC Partnership is managed by the Integration Joint Board (IJB). Included in the budget is the recognition that resources will transfer from the NHS as more care

- is moved from a hospital setting to a home or homely setting. The budget and provisional outturn to March 2025 includes income from NHS of £4.049m for this transfer of resources.
- 2.2.3 Expenditure of £1.633m on adaptations to houses by Fife Council Housing Services is included in the overall budget for IJB. Housing expenditure is reported to this Committee in the Communities Finance reports and is therefore out with the scope of this report.
- 2.2.4 Part of the budget within Fife Council Social Care is excluded from the overall budget managed by IJB. The excluded element is the Contracts team, who manage the commissioning of services. The budget for this area is £1.878m, forecasted expenditure of £2.226m resulting in a overspend of £0.348m. The overspend relates to unachieved staff turnover and additional maintenance costs for the SWIFT system. As this is not part of the budget managed by IJB, 100% of any over-or under-spend is funded by Fife Council.

3.0 Major Variances for Social Care

- The budget allocated to Fife Council for Social Care for Adults and Older People is £234.638m which includes the budget for Contracts Team of £1.878m.
- 3.1.1 The provisional overspend prior to risk share for Social Care for Adults and Older People within Fife Council is £18.199m or 7.76% of the net service managed budget which, is a decrease of £2.2m from the projected December position. A summary is detailed in Appendix 1. As per the Integration Scheme a recovery plan was agreed at IJB Committee in September to reduce the overspend by £13m, whilst the position did improve, at-risk actions could not be met due to continued high demand for services by the people of Fife.
- 3.2 **Integrated Complex and Critical Care** has a provisional overspend of £6.248m, movement of £1.345m. The main variances and reasons for movement are detailed as follows:
- 3.2.1 Adults Placements overspend £9.236m, movement £1.836m
 - £5.2m relates to the under achievement of Commissioning and Transforming Overnight Care savings. The Commissioning saving of £2.4m is forecasting an under achievement of £2.3m in the current year, due to the delay in forming a review team. The under achievement of £2.9m of the £3m Transforming overnight care saving is due to scoping out what the model will look like and delays in allocating a dedicated resource which has now been resolved.
 - £2.757m relates to a greater number of adult packages having been commissioned than the budget available. £1.051m is due to increased demand for taxis transporting service users to college or day care and, a reduction of £0.240m in projected Housing Benefit Income with the move to Universal Credit.

The movement is due an increase in forecasted adult packages based on recent trends, which has had a direct impact on not being able to achieve the Commissioning saving and a further decrease in projected Housing Benefit Income.

3.2.2 Adults Supported Living – underspend (£1.637m), movement (£0.498m)

Within Community Support Services – vacancies are being held whilst the future design of the service is established. The movement is due to continued vacancies where it was thought some positions might be recruited to prior to the end of the year.

3.2.3 Social Care Fieldwork Teams – underspend (£1.038m), movement £0.608m

The underspend mainly relates to staffing due to delays in recruitment. The movement is due to an increase in Care at Home Packages for Supported Living and an increase in Direct Payments for older people.

3.2.4 Adults Fife Wide – underspend (£0.313m), movement (0.601m)

The underspend and movement is related to grants to voluntary organisations where they have previously been unable to spend 2023-24 grant funding and have agreed to 2024-25 funding being reduced on a temporary basis until they have recruited to vacancies for example to be able to deliver the Services as per their agreement.

- 3.3 **Integrated Community Care Services** has a provisional overspend of £10.621m, movement (£3.357m). The main variances and reasons for movement are detailed as follows:
- 3.3.1 Care at Home (CAH) overspend £4.878m, movement (£0.401m)

The main variance is due to £3.298m overspend on Care at Home packages due to more packages being commissioned than budgeted offset partly by an underspend in Direct Payments (£0.665m). £0.791m overspend on Travel and Fleet, £0.226m overspend on Meals on Wheels and (£0.231m) vacancies.

£1.335m relates to the under achievement of the Single-Handed Care saving of £1.5m in total, this is an increase of £0.185m since December due to less than an anticipated savings being achieved in the short timescale to March and after deducting training and equipment costs.

The movement relates to a reduction in projected costs for Direct Payments and an increase in vacancies.

3.3.2 Older People Residential & Daycare – overspend £1.668m, movement (£0.526m)

The main variance is due to Agency costs across Care Homes of £2.363m and £0.716m on Catering and Cleaning charges for infection control. This cost is partially offset by vacancies (£0.962m) and over-recovery of residential income (£0.484m). Close monitoring of Agency is ongoing.

The movement is due to deferred income relating to previous financial years.

3.3.3 Older People Nursing & Residential – overspend £3.345m, movement (£2.492m)

There is a net overspend on long term care beds of £0.638m due to a greater number of beds being utilised than budget available and bad debt charges of £0.270m.

£2.5m relates to the under achievement on Re-provision of Care Home beds saving. This is an increase of £0.5m since December.

The movement mainly relates to an increase in financial assessment income and deferred income relating to previous financial years. There has been a slight reduction in long term bed numbers since December.

3.3.4 Occupational Therapy (OT) & Fife Equipment Loan Store – overspend of £0.730m, movement £0.009m

The overspend is mainly due to the increased cost of equipment in the Loan Store and an increase in demand and costs for OT Housing Adaptations.

Equipment such as beds, dynamic mattresses, riser recliner chairs, toileting and bathing equipment have all increased in price as has shipping costs and are all essential to support hospital discharge and prevent admission into hospital or long-term care.

3.4 **Integrated Professional & Business Enabling** has a provisional overspend of £0.982m, movement (£0.178m).

The overspend is related to staffing, shortfall on the pay award and non-achievement of savings. The movement is due to the changes in the projected amount of savings.

4.0 Progress on Budget Savings

- 4.1 This section covers revenue budget savings for Social Care for Adults and Older People, detailing achievements against the current year approved budget savings at March 2025.
- 4.2 Of the overall IJB savings plan £39m, £20m of savings were achieved, leaving a shortfall of £19m. Fife Council Health and Social Care's allocation was £11.870m along with previously unmet savings of £5m (£4m was funded by reserves last year and £1m made on a temporary basis), giving total savings of £16.870m which were required to be met in 2024-25 to balance the IJB budget. The provisional outturn position is delivery of £6.743m (40%) of target savings in 2024-25, leaving unachieved savings of £10.127m (60%).

5.0 Position after Risk Share

5.1 The risk share agreement means that the council is obligated to meet 39% of the overall IJB overspend. The overall provisional position of the IJB at March, both NHS and Fife Council, is an overspend of £34.016m.

The risk share stipulates that any remaining overspend is to be funded 61% (£20.894m) from NHS and 39% (£13.122m) from Fife Council. The terms of this agreement mean that Health will transfer £4.728m to Fife Council per Appendix 2.

6.0 Conclusions

6.1 The provisional outturn for Social Care for Adults and Older People for the 2024-25 financial year as at March 2025 is overspend of £18.199m, £4.728m has been received from the NHS as per the directions of the IJB leaving a net provisional overspend of £13.471m for Fife Council which includes the variances relating to Contracts and Housing.

List of Appendices

Appendix 1: Social Care – Revenue Budget 2024-25

Appendix 2: Risk Share

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| MARCH 2025 | | | | | | Appendix 1 |
|--|--|---|---|---|---|--|
| PEOPLE AND COMMUNITIES HEALTH AND SOCIAL CARE | | PROVISIONAL OUTTURN 2024 - 25 £m | VARIANCE £m | VARIANCE % | PREVIOUS REPORTED VARIANCE £m | MOVEMENT FROM PREVIOUS REPORTED VARIANCE £m |
| TOTAL COST OF SERVICES | 236.563 | 254.210 | 17.646 | 7.46% | 20.399 | (2.753) |
| LESS: CORPORATELY MANAGED ITEMS | 1.926 | 1.373 | (0.552) | -28.68% | 0.000 | (0.552) |
| SERVICE MANAGED NET BUDGET | 234.638 | 252.836 | 18.199 | 7.76% | 20.399 | (2.200) |
| ANALYSIS OF SERVICE MANAGED BUDGET | | | | | | |
| INTEGRATED COMMUNITY CARE SERVICES INTEGRATED COMPLEX AND CRITICAL SERVICES H&SC PROFESSIONAL AND BUSINESS ENABLING FC CONTRACTS | 119.189 115.282 (1.711) 1.878 | 129.810 121.531 (0.730) 2.226 | 10.621 6.248 0.982 0.348 | 8.91% 5.42% -57.36% 18.54% | 13.978 4.903 1.159 0.359 | (3.357) 1.345 (0.178) (0.011) |
| HEALTH AND SOCIAL CARE | 234.638 | 252.836 | 18.199 | 7.76% | 20.399 | (2.200) |
| H&SC PAYMENT FROM HEALTH PER RISK SHARE | 0.000 | (4.728) | (4.728) | 0.00% | (5.320) | 0.592 |
| TOTAL | 234.638 | 248.108 | 13.471 | 5.74% | 15.079 | (1.608) |
| | | | | | | |
| | | OUTTURN 2024 · | | | PREVIOUS REPORTED | MOVEMENT FROM PREVIOUS REPORTED |
| SUBJECTIVE GROUPING | BUDGET 2024-25 | OUTTURN 2024 - 25 | VARIANCE fm | VARIANCE | REPORTED VARIANCE | PREVIOUS REPORTED VARIANCE |
| SUBJECTIVE GROUPING SERVICE MANAGED NET BUDGET | BUDGET | OUTTURN 2024 · | VARIANCE £m 18.199 | VARIANCE | REPORTED | PREVIOUS REPORTED VARIANCE £m |
| | BUDGET 2024-25 £m | OUTTURN 2024 - 25 £m | £m | % | REPORTED VARIANCE £m | PREVIOUS REPORTED VARIANCE £m (2.200) |
| SERVICE MANAGED NET BUDGET | BUDGET 2024-25 £m 234.638 | OUTTURN 2024 - 25 £m 252.836 | £m 18.199 | % 7.76% | REPORTED VARIANCE £m 20.399 | PREVIOUS REPORTED VARIANCE £m (2.200) (4.891) (0.388 0.035 0.035 0.284 2.959 |
| SERVICE MANAGED NET BUDGET INCOME EXPENDITURE EMPLOYEE COSTS PREMISES RELATED EXPENDITURE TRANSPORT RELATED EXPENDITURE SUPPLIES & SERVICES THIRD PARTY PAYMENTS TRANSFER PAYMENTS | BUDGET 2024-25 £m 234.638 (100.594) 111.324 4.544 2.694 10.054 195.965 10.609 | OUTTURN 2024 - 25 £m 252.836 (108.888) 110.010 4.504 4.580 12.820 217.674 12.098 | 18.199 (8.294) (1.315) (0.040) 1.886 2.766 21.710 1.489 | % 7.76% 8.24% -1.18% -0.88% 69.99% 27.51% 11.08% 14.04% | REPORTED VARIANCE £m 20.399 (3.402) (0.926) (0.075) 1.851 2.482 18.751 1.728 | PREVIOUS REPORTED VARIANCE £m (2.200) (4.891) (0.388) 0.035 0.035 0.284 2.959 (0.239) |
| SERVICE MANAGED NET BUDGET INCOME EXPENDITURE EMPLOYEE COSTS PREMISES RELATED EXPENDITURE TRANSPORT RELATED EXPENDITURE SUPPLIES & SERVICES THIRD PARTY PAYMENTS TRANSFER PAYMENTS | 234.638 (100.594) 111.324 4.544 2.694 10.054 195.965 10.609 0.042 | 0UTTURN 2024 - 25 £m 252.836 (108.888) 110.010 4.504 4.580 12.820 217.674 12.098 0.039 | 18.199 (8.294) (1.315) (0.040) 1.886 2.766 21.710 1.489 (0.003) | % 7.76% 8.24% -1.18% -0.88% 69.99% 27.51% 11.08% 14.04% -6.86% | (0.926) (0.075) 1.851 2.482 18.751 1.728 (0.010) | PREVIOUS REPORTED VARIANCE £m (2.200) (4.891) (0.388) 0.035 0.035 0.284 2.959 (0.239) 0.007 2.691 |
| SERVICE MANAGED NET BUDGET INCOME EXPENDITURE EMPLOYEE COSTS PREMISES RELATED EXPENDITURE TRANSPORT RELATED EXPENDITURE SUPPLIES & SERVICES THIRD PARTY PAYMENTS TRANSFER PAYMENTS SUPPORT SERVICES CHARGES | BUDGET 2024-25 £m 234.638 (100.594) 1111.324 4.544 2.694 10.054 195.965 10.609 0.042 335.232 | OUTTURN 2024 - 25 £m 252.836 (108.888) 110.010 4.504 4.580 12.820 217.674 12.098 0.039 361.724 | £m 18.199 (8.294) (1.315) (0.040) 1.886 2.766 21.710 1.489 (0.003) 26.493 | % 7.76% 8.24% -1.18% -0.88% 69.99% 27.51% 11.08% 14.04% -6.86% 7.90% | (0.926) (0.075) (0.075) (0.075) (0.482) (0.075 | PREVIOUS REPORTED VARIANCE £m (2.200) (4.891) (0.388) 0.035 0.035 0.284 2.959 (0.239) 0.007 |

| | | | Actual | | | |
|---|---------|----------|-------------|-------------------|--------------|--------------|
| | | | Overspend | | Overspend | Reallocation |
| | | | by | Risk Share | Adjusted for | between |
| Overall Position | Budget | Forecast | Partnership | Contribution | Risk Share | Partners |
| | £m | £m | £m | % | £m | £m |
| Total H+SC - per ledger (incl Risk Share) | 234.638 | 252.836 | 18.198 | | | |
| | | | | | | |
| Total Fife Council H+SC - before Risk Share | 234.638 | 252.836 | 18.198 | | | |
| Less: | | | | | | |
| Fife Council Contracts Team (not included in IJB) | 1.878 | 2.226 | 0.348 | | | |
| Fife Council H+SC (relevant to IJB) | 232.760 | 250.610 | 17.850 | | | |
| Add: | | | | | | |
| Total Housing | 1.633 | 1.633 | 0.000 | | | |
| Resource Transfer | 52.806 | 52.806 | 0.000 | | | |
| Total relevant to Risk Share agreement | 287.199 | 305.049 | 17.850 | | | |
| | | | | | | |
| Fife Council position for Risk Share agreement | 287.199 | 305.049 | 17.850 | 39% | 13.122 | -4.728 |
| NHS Position for Risk Share agreement | 457.316 | 473.482 | 16.166 | 61% | 20.894 | 4.728 |
| IJB Total | 744.515 | 778.531 | 34.016 | 100% | 34.016 | 0.000 |



25 September 2025 Agenda Item No.15

2025-26 Revenue Budget Projected Out-turn – Health & Social Care

Report by: Lynne Garvey, Director, Health & Social Care Partnership

Eileen Rowand, Executive Director, Finance & Corporate Services

Wards Affected: All

Purpose

The purpose of this report is to give members an update on the 2025-26 projected out-turn at June 2025 for Fife Council Social Care Services for Adults and Older People.

Recommendation(s)

Committee is asked to consider the current financial performance and activity as detailed in the report.

Resource Implications

None

Legal & Risk Implications

The Service requires to manage the risk to individual clients and the community in Fife whilst undertaking its statutory duties within the budget approved by the Council for 2025-26.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None

1.0 Background

- 1.1 The purpose of this report is to advise Members of the Health & Social Care projected outturn for 2025-26, taking in to account the actual expenditure incurred. Explanations of major variances are highlighted at Section 3. This is the first monitoring report to the Scrutiny Committee for the 2025-26 financial year.
- 1.2 Section 4 of the report summarises the progress on delivery of approved budget savings and provides an explanation of any variances to the delivery of the savings target.
- 1.3 Section 5 of the report summarises the Risk share apportionment for each Partner.

2.0 IJB

- 2.1 IJB Budget
- 2.1.1 The Health & Social Care Partnership (H&SCP) consists of parts of NHS, Social Care for Adults and Older People and an element of Fife Council Housing, specifically adaptations to houses. It does not include any social care expenditure incurred through Education & Children's Services. The budget is managed by the Integration Joint Board (IJB).
- 2.1.2 The IJB budget was approved on 26 March 2025. The cost to deliver services at existing levels required more funding than was currently available from both partner organisations and therefore a £29m package of savings plan to close the funding gap was presented and approved at that meeting. Additional allocations are awarded in year through Health budget allocations and the current budget for 2025-26 as at June is £783.475m.
- 2.1.3 Total reserves of £2.494m are held by Fife Council on behalf of the IJB. This is made up of £0.574m reserves that are ear-marked for specific use e.g. Mental Health and Anti-Poverty and, £1.138m of committed reserves which is to cover the cost of replacing existing Analogue Community alarms with Digital alarms and Housing Adaptations. £0.782 of general reserves are available for use in 2025-26.
- 2.2 IJB Integration Scheme
- 2.2.1 To reflect the partnership working between the NHS and Fife Council through the Health & Social Care Partnership, an agreement has been reached on how any overspends should be shared between the partners. This is known as the risk share agreement and is part of the Integration Scheme. The share of Fife Council funds is 38% and NHS funds 62% regardless of where the overspend is incurred. Fife Council has set-aside £5.5m for Health and Social Care which has been incorporated into the forecasted position.
- 2.2.2 The H&SC Partnership is managed by the Integration Joint Board (IJB). Included in the budget is the recognition that resources will transfer from the NHS as more care is moved from a hospital setting to a home or homely setting. The budget and

- projected outturn includes projected income from NHS of £8.500m for this transfer of resources.
- 2.2.3 Expenditure of £1.596m on adaptations to houses by Fife Council Housing Services is included in the overall budget for IJB. Housing expenditure is reported to this Committee in the Communities Finance reports and is therefore out with the scope of this report.
- 2.2.4 Part of the budget within Fife Council Social Care is excluded from the overall budget managed by IJB. The excluded element is the Contracts team, who manage the commissioning of services. The budget for this area is £1.947m, forecasted expenditure of £2.099m resulting in a overspend of £0.152m. The overspend relates to staffing and additional maintenance costs for the SWIFT system. As this is not part of the budget managed by IJB, 100% of any over- or under-spend is funded by Fife Council.

3.0 Major Variances for Social Care

- 3.1 The budget allocated to Fife Council for Social Care for Adults and Older People is £249.932m which includes the budget for Contracts Team of £1.947m.
- 3.1.1 The projected overspend prior to risk share for Social Care for Adults and Older People within Fife Council is £0.410m or 0.16% of the net service managed budget. A summary is detailed in Appendix 1.
- 3.2 **Integrated Complex and Critical Care** has a projected underspend of (£2.566m). The main variances are detailed as follows:
- 3.2.1 Adults Placements overspend £0.282m

(£0.688m) relates to an underspend on adult's packages as per H&SC Controcc system and there is an over-recovery projected on nursing and residential income (£0.254m). £1.035m is due to increased demand for taxis transporting service users to college or day care provision.

Transformational Transport saving of £0.560m is currently forecasted to underachieve by £0.186m.

3.2.2 Adults Supported Living – underspend (£2.363m),

Within Community Support Services – vacancies are being held whilst the future design of the service is established.

3.2.3 Social Care Fieldwork Teams – underspend (£0.416m)

The underspend mainly relates to staffing due to delays in recruitment.

- 3.3 **Integrated Community Care Services** has a projected overspend of £3.091m. The main variances are detailed as follows:
- 3.3.1 Care at Home (CAH) overspend £1.691m

The main variance is due to £0.682m overspend on Care at Home packages due to more packages being commissioned than budgeted. £0.780m overspend on Travel and Fleet, £0.258m overspend on Meals on Wheels, offset partly by vacancies (£0.168m).

Transformational Transport saving of £0.190m is currently forecasted to underachieve by £0.064m.

3.3.2 Older People Residential & Daycare – overspend £0.842m

The main variance is £0.750m on Catering and Cleaning charges for infection control.

3.3.3 Occupational Therapy & Fife Equipment Loan Store – overspend of £0.665m

The overspend is mainly due to the increased cost of equipment in the Loan Store £0.300m and an increase in demand for OT Housing Adaptations £0.425m.

Equipment such as beds, dynamic mattresses, riser recliner chairs, toileting and bathing equipment have all increased in price as has shipping costs and are all essential to support hospital discharge and prevent admission into hospital or long-term care.

3.4 **Integrated Professional & Business Enabling** has a projected underspend of (£0.267m). The main variances are detailed as follows:

The underspend is mainly due to vacancies which are being held to support the current financial position.

4.0 Progress on Budget Savings

- 4.1 This section details revenue budget savings for Social Care for Adults and Older People, detailing achievements against the current year approved budget savings as at March.
- 4.2 Of the overall IJB savings plan £29.424m, £27.197m is expected to be achieved, leaving a shortfall of £2.227m. Fife Council Health and Social Care's allocation was £6.875mm along with previously unmet savings of £9.118m, giving total savings of £15.993m which require to be met in 2025-26 to balance the IJB budget. The service expects £15.743m (98%) to be achieved leaving unachieved savings of £0.250m relating to the Transforming Transport saving. Alternative savings are being considered.

5.0 Position after Risk Share

5.1 The risk share agreement means that the council is obligated to meet 38% of the overall IJB overspend. The overall projected position of the IJB at June, both NHS and Fife Council, is an overspend of £5.657m.

The risk share stipulates that any remaining overspend is to be funded 62% (£3.507m) from NHS and 38% (£2.150m) from Fife Council. The terms of this agreement mean that Fife Council will transfer £1.892m to the NHS per Appendix 2.

6.0 Conclusions

6.1 The projected outturn for Social Care for Adults and Older People for the 2025-26 financial year as at June 2025 is an overspend of £0.410m, £1.892m will be transferred from Fife Council as per the directions of the IJB leaving a net projected overspend of £2.302m for Fife Council which includes the variances relating to Contracts and Housing.

List of Appendices

Appendix 1: Social Care – Revenue Budget 2025-26

Appendix 2: Risk Share

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| BUDGET MONITORING REPORT SUMMARY PEOPLE AND COMMUNITIES HEALTH & SOCIAL CARE | | | Ар | pendix 1 |
|--|-------------------------|----------------|---------|---------------|
| JUNE 2025 | Current Budget £m | Forecast £m | £m | Variance % |
| Total Cost of Services | 252.139 | 252.550 | 0.410 | 0.16% |
| Less: Corporately Managed Items | 2.208 | 2.208 | 0.000 | 0.00% |
| Service Managed Net Budget | 249.932 | 250.342 | 0.410 | 0.16% |
| Analysis of Service Managed Budget | | | | |
| Integrated Community Care Services | 126.923 | 130.014 | 3.091 | 2.44% |
| Integrated Complex & Critical Services | 121.947 | 119.381 | (2.566) | (2.10%) |
| H&SC Professional & Business Enabling | (0.885) | (1.152) | (0.267) | 30.16% |
| FC Contracts | 1.947 | 2.099 | 0.152 | 7.80% |
| Health & Social Care | 249.932 | 250.342 | 0.410 | 0.16% |
| H&SC Payment to Health Per Risk Share | 0.000 | 1.892 | 1.892 | 0.00% |
| Total | 249.932 | 252.234 | 2.302 | 0.92% |

| Subjective Grouping | Current Budget | Forecast | | Variance |
|---|-------------------|-----------|---------|----------|
| | £m | £m | £m | % |
| Service Managed Net Budget | 249.932 | 250.342 | 0.410 | 0.16% |
| Income | (108.843) | (109.323) | (0.480) | 0.44% |
| Expenditure | | | | |
| Employee Costs | 120.557 | 116.270 | (4.288) | (3.56%) |
| Premises Related Expenditure | 4.120 | 4.179 | 0.059 | 1.44% |
| Transport Related Expenditure | 2.778 | 3.859 | 1.081 | 38.92% |
| Supplies & Services | 10.181 | 12.533 | 2.352 | 23.10% |
| Third Party Payments | 209.948 | 211.634 | 1.686 | 0.80% |
| Transfer Payments | 11.180 | 11.180 | 0.000 | 0.00% |
| Support Services Charges | 0.010 | 0.010 | 0.000 | 0.00% |
| · | 358.774 | 359.665 | 0.891 | 0.25% |
| Health & Social Care | 249.932 | 250.342 | 0.410 | 0.16% |
| H&SC Payment from Health Per Risk Share | 0.000 | 1.892 | 1.892 | 0.00% |
| Total | 249.932 | 252.234 | 2.302 | 0.92% |

Risk Share allocation between Fife Council and NHS June 2025 Monitoring

| | | | Actual Overspend | | Overspend | Reallocation |
|---|---------|----------|---------------------|--------------|--------------|--------------|
| | | | by | Risk Share | Adjusted for | between |
| Overall Position | Budget | Forecast | Partnership | Contribution | Risk Share | Partners |
| | £m | £m | £m | % | £m | £m |
| Total Fife Council H+SC - before Risk Share | 249.932 | 250.342 | 0.410 | | | |
| Less: | | | | | | |
| Fife Council Contracts Team (not included in IJB) | 1.947 | 2.099 | 0.152 | | | |
| Fife Council H+SC (relevant to IJB) | 247.985 | 248.243 | 0.258 | | | |
| Add: | | | | | | |
| Total Housing | 1.596 | 1.596 | 0.000 | | | |
| Resource Transfer | 51.824 | 51.824 | 0.000 | | | |
| Total relevant to Risk Share agreement | 301.405 | 301.663 | 0.258 | | | |
| Fife Council position for Risk Share agreement | 301.405 | 301.663 | 0.258 | 38.0% | 2.150 | 1.892 |
| NHS Fife June position | 482.07 | 487.469 | 5.399 | 62.0% | 3.507 | -1.892 |
| IJB Total | 783.475 | 789.132 | 5.657 | 100% | 5.657 | 0.000 |

People and Communities Scrutiny Committee

25 September 2025

Agenda Item No. 16



2024-25 Capital Plan Provisional Outturn – Health & Social Care

Report by: Eileen Rowand, Executive Director, Finance and Corporate Services

Lynne Garvey, Director, Health and Social Care Partnership

Wards Affected: All

Purpose

The purpose of this report is to provide an update on the Health and Social Care Capital Investment Plan and advise on the provisional out-turn for the 2024-25 financial year for People and Communities Scrutiny Committee.

Recommendation(s)

The Committee is asked to consider the current performance and activity across the 2024-25 Financial Monitoring as detailed in this report.

Resource Implications

None.

Legal & Risk Implications

None.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None.

1.0 Background

- 1.1 Based on current information, this report summarises the provisional capital outturn as at 31 March 2025 for the areas falling under the scope of this Committee.
- 1.2 Appendix 1 shows an analysis of specific projects in the current capital investment plan which have a budget greater than £5m and analyses total project cost rather than only in year spend.
- 1.3 Appendix 2 details the forecast expenditure against budget for each project.
- 1.4 Slippage is the term used to describe projects that are expected to spend less than the budget allocation in a particular year due to a delay in timing on the delivery of the project. This is not uncommon in the capital programme and the reasons for this can be wide and varied. Advancement is the term used to describe projects that are expected to spend more than the budget allocation in a particular year due to an acceleration of the budget from future years.

2.0 Issues, Achievements & Financial Performance

2.1 Major Projects – Potential Risks and Actions

- 2.1.1 Appendix 1 has been updated with the additional funding approved through the Capital Plan Review and shows a Nil variance. This means that all current projects should be able to be completed within their existing budget.
- 2.1.2 Across the Capital Investment Plan there continues to be risk that both the timing and the costs of projects are adversely affected by the current economic climate. Inflationary increases have had a significant impact, and these have been reflected in the Plan. Monitoring of the impact of any additional costs on projects will continue and any significant impact on timescales and associated risks will be reported to this committee. Where appropriate, any known impact on timing of delivery of projects has been built in to the rephased plan and the overall scale of any additional costs or further delays has been considered as part of the review of the Capital Investment Plan approved in February 2025.

2.2 Progress/Achievements

2.2.1 As both the 2024-25 March outturn report and the 2025-26 June report are being presented at this Committee – progress and achievements will be reported on the June report.

2.3 Financial Performance – 2024-25 Provisional Outturn

2.3.1 The significant variances (+/- £0.500m) are explained below-

Re-provision of Care for Older People (Appendix 2) - (£5.493m) slippage is mainly due to the reprofiling of the construction spend on Cupar Care Home which reflects the delay in the on-site works. There is no change to the agreed overall budget envelope for the project, the main spend will now be in the early part of 2025-26 rather than late 2024-25.

3.0 Conclusions

- 3.1 The total 2024-25 approved programme for the areas in scope of the Health & Social Care Scrutiny Committee is £8.217m. The level of provisional expenditure is £2.344m, resulting in slippage of (£5.873m) which is mainly due to the Care Homes and slippage in the minor works programme.
- 3.2 The management of capital resources require us to look across financial years, as well as within individual years. The current year performance is only a snapshot of the existing plan, and the Directorate will adjust expenditure levels within future years of the plan to accommodate the advancement or slippage of projects.

List of Appendices

- 1. Total Cost Monitor
- 2. Capital Monitoring Report

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FIFE COUNCIL
PEOPLE & COMMUNITIES SCRUTINY COMMITTEE
HEALTH & SOCIAL CARE
CAPITAL INVESTMENT PLAN 2024-33
TOTAL COST MONITOR - MAJOR CAPITAL PROJECTS

| Project | Service | Original Approved Budget £m | Current Project Budget £m | Projected | Variance £m | Variance % | Current Project Status | Expected Project Completion Date |
|-----------------------------------|-----------------------|--------------------------------------|------------------------------------|-----------|----------------|---------------|------------------------|----------------------------------|
| | | | | | | | | |
| Methil Care Home | Opportunities for All | 6.620 | 9.392 | 9.392 | 0.000 | 0% | Current Project | 2024-25 |
| Cupar Care Home | Opportunities for All | 5.580 | 10.254 | 10.254 | 0.000 | 0% | Current Project | 2025-26 |
| Anstruther Care Home | Opportunities for All | 6.145 | 12.490 | 12.490 | 0.000 | 0% | Current Project | 2027-28 |
| Glenrothes Respite Provision | Opportunities for All | | 5.503 | 5.503 | 0.000 | 0% | Current Project | 2027-28 |
| Total Major Projects over £5.000m | | 18.345 | 37.639 | 37.639 | (0.000) | 0% | | |

FIFE COUNCIL
PEOPLE & COMMUNITIES SCRUTINY COMMITTEE
HEALTH & SOCIAL CARE
CAPITAL INVESTMENT PLAN 2024-33
MONITORING REPORT MARCH 2025

Actual Projected Projected Current to Date Budget Variance Outturn as Expenditure £m £m £m % of Plan Adult Services (Resources) 0.335 0.048 (0.287)14% Older People's Residential/Day Care 0.070 0.020 29% (0.050)Re-Provision Of Care For Older People 7.769 2.276 (5.493) 29% Telehealth Care 0.043 0.000 (0.043)0% TOTAL EXPENDITURE 8.217 2.344 (5.873) 29%

People and Communities Scrutiny Committee

25 September 2025

Agenda Item No. 17



2025-26 Capital Plan Projected Outturn – Health & Social Care

Report by: Eileen Rowand, Executive Director, Finance and Corporate Services

Lynne Garvey, Director, Health and Social Care Partnership

Wards Affected: All

Purpose

The purpose of this report is to provide an update on the Health and Social Care Capital Investment Plan and advise on the projected out-turn for the 2025-26 financial year for People and Communities Scrutiny Committee.

Recommendation(s)

The Committee is asked to consider the current performance and activity across the 2025-26 Financial Monitoring as detailed in this report.

Resource Implications

None.

Legal & Risk Implications

None.

Impact Assessment

An EqIA has not been completed and is not necessary as no change or revision to existing policies and practices is proposed.

Consultation

None.

1.0 Background

- 1.1 Based on current information, this report summarises the projected capital outturn as at 30 June 2025 for the areas falling under the scope of this Committee.
- 1.2 Appendix 1 shows an analysis of specific projects in the current capital investment plan which have a budget greater than £1m and analyses total project cost rather than only in year spend.
- 1.3 Appendix 2 details the forecast expenditure against budget for each project.
- 1.4 Slippage is the term used to describe projects that are expected to spend less than the budget allocation in a particular year due to a delay in timing on the delivery of the project. This is not uncommon in the capital programme and the reasons for this can be wide and varied. Advancement is the term used to describe projects that are expected to spend more than the budget allocation in a particular year due to an acceleration of the budget from future years.

2.0 Issues, Achievements & Financial Performance

2.1 Major Projects – Potential Risks and Actions

- 2.1.1 Appendix 1 shows a small overspend of £0.041m in relation to Methilhaven final billing.
- 2.1.2 Across the Capital Investment Plan there continues to be risk that both the timing and the costs of projects are adversely affected by the current economic climate. Inflationary increases have had a significant impact, and these have been reflected in the Plan. Monitoring of the impact of any additional costs on projects will continue and any significant impact on timescales and associated risks will be reported to this committee. Where appropriate, any known impact on timing of delivery of projects has been built in to the rephased plan and the overall scale of any additional costs or further delays has been considered as part of the review of the Capital Investment Plan approved in February 2025.

2.2 Progress/Achievements

- 2.2.1 Methil Site operational from July 23.
- 2.2.2 Cupar Site the current programme position as of 15th August is 69 weeks on site, approx. 89% progress of the build. The timber kit and roof installation are complete, and window installation has commenced as has the underfloor heating. Operationally work has commenced on staffing models / rota's, consultation with the Care Inspectorate, and planning with Suppliers for purchasing furniture and fittings. Preclosure work for the old Care Home has also commenced. The delay of 8–12 weeks previously reported is likely to impact on the project timeline, although the delivery team continues to work to mitigate these delays. The original September 2025 Construction completion date is likely to be the end of December 2025, with an 8-week fit out period to end of February 2025.

- 2.2.3 Anstruther Site preparing to submit the Planning Application, this work incorporates Housings redesign to make their element of the project more affordable. The redesign now incorporates 16 flats instead of 12 and omits the two bungalows and adjusts the design of the communal areas.
- 2.2.4 Glenrothes Adult Respite Provision the business case was approved by Cabinet Committee. An initial feasibility review and site-specific factors has been completed. Additional works is expected to start shortly to reinstate approximately 70m of internal foul and surface water drainage infrastructure which were removed during demolition of the former Forward Centre. A separate project to investigate the external drainage connections into the Michael Woods Sports & Leisure facility to clarify potential implications for the new care home's drainage strategy has also commenced. It is expected that the Architect will have prepared an initial concept design in the next few weeks.

2.3 Financial Performance – 2025-26 Projected Outturn

2.3.1 There are no significant variances (+/- £0.500m)

3.0 Conclusions

- 3.1 The total 2025-26 approved programme for the areas in scope of the Health & Social Care Scrutiny Committee is £8.345m. The level of projected expenditure is £8.335m, resulting in slippage of (£0.010m) in the minor works programme.
- 3.2 The management of capital resources require us to look across financial years, as well as within individual years. The current year performance is only a snapshot of the existing plan, and the Directorate will adjust expenditure levels within future years of the plan to accommodate the advancement or slippage of projects.

List of Appendices

- 1. Total Cost Monitor
- 2. Capital Monitoring Report

Report Contact

Ashleigh Allan
Finance Business Partner
Finance Service

E-mail:ashleigh.allan@fife.gov.uk

FIFE COUNCIL
PEOPLE & COMMUNITIES SCRUTINY COMMITTEE
HEALTH & SOCIAL CARE
CAPITAL INVESTMENT PLAN 2025-35
TOTAL COST MONITOR - MAJOR CAPITAL PROJECTS

| Project | Service | Original Approved Budget £m | Current Project Budget £m | Projected Outturn | Variance | | Current Project Status | Expected Project Completion Date |
|-----------------------------------|-----------------------|--------------------------------------|------------------------------------|----------------------|----------|-------|------------------------|----------------------------------|
| Methil Care Home | Opportunities for All | 6.620 | 9.392 | 9.433 | 0.041 | 0.44% | Current Project | 2024-25 |
| Cupar Care Home | Opportunities for All | 5.580 | 10.254 | 10.254 | 0.000 | 0.00% | Current Project | 2025-26 |
| Anstruther Care Home | Opportunities for All | 6.145 | 12.490 | 12.490 | 0.000 | 0.00% | Current Project | 2027-28 |
| Glenrothes Respite Provision | Opportunities for All | | 5.503 | 5.503 | 0.000 | 0.00% | Current Project | 2027-28 |
| Total Major Projects over £5.000m | | 18.345 | 37.639 | 37.680 | 0.041 | 0.11% | | |

FIFE COUNCIL
PEOPLE & COMMUNITIES SCRUTINY COMMITTEE
HEALTH & SOCIAL CARE
CAPITAL INVESTMENT PLAN 2024-33
MONITORING REPORT JUNE 2025

| Expenditure | Current Budget £m | to Date | | Variance | Projected Outturn as % of Plan |
|---------------------------------------|-------------------------|---------|-------|----------|--------------------------------------|
| A July Committee (December) | 0.400 | 0.000 | 0.000 | (0.400) | 400/ |
| Adult Services (Resources) | 0.160 | 0.000 | 0.030 | (0.130) | 19% |
| Older People's Residential/Day Care | 0.141 | 0.000 | 0.170 | 0.029 | 121% |
| Re-Provision Of Care For Older People | 7.826 | 0.425 | 7.917 | 0.091 | 101% |
| Telehealth Care | 0.218 | 0.000 | 0.218 | 0.000 | 100% |
| | | | | | |
| TOTAL EXPENDITURE | 8.345 | 0.425 | 8.335 | (0.010) | 100% |

25 September 2025

Agenda Item No. 18



People & Communities Scrutiny Committee Workplan

Report by: Eileen Rowand, Executive Director Finance & Corporate Services

Wards Affected: All

Purpose

This report supports the Committee's consideration of the workplan for future meetings of the Committee.

Recommendation(s)

It is recommended that the Committee review the workplan and that members come forward with suggestions for areas of scrutiny.

Resource Implications

Committee should consider the resource implication for Council staff of any request for future reports.

Legal & Risk Implications

Committee should consider seeking inclusion of future items on the workplan by prioritising those which have the biggest impact and those which seek to deal with the highest level of risk.

Impact Assessment

None required for this paper.

Consultation

The purpose of the paper is to support the Committee's discussion and therefore no consultation is necessary.

1.0 Background

1.1 Each Scrutiny Committee operates a workplan which contains items which fall under three broad headings: performance reporting, planning; and improvement work. These items will often lead to reactive rather than proactive scrutiny. Discussion on the workplan agenda item will afford members the opportunity to shape, as a committee, the agenda with future items of business it wishes to review in more detail.

2.0 Conclusions

2.1 The current workplan is included as Appendix one and should be reviewed by the committee to help inform scrutiny activity.

List of Appendices

1. Workplan

Background Papers

The following papers were relied on in the preparation of this report in terms of the Local Government (Scotland) Act, 1973:-

None

Report Contact

Helena Couperwhite Committee Services Manager Telephone: 03451 555555 Ext. No. 441096 Email- helena.couperwhite@fife.gov.uk

| People and Communities Scrutin | People and Communities Scrutiny Committee of 20 November 2025 | | | | | |
|---|---|-----------------------------|---|--|--|--|
| Title | Service(s) | Contact(s) | Comments | | | |
| Gypsy Traveller Encampments | Housing Services | Paul Short | agreed at agenda planning to move to November 2025 to tie in with the end of travelling season and November thereafter | | | |
| 2025 Chief Social Work Annual Report | Children and Families and Criminal Justice Services | James Ross-fc-d1 | | | | |
| 2025 Citizen Advice & Rights Fife Performance Report | Communities and Neighbourhoods Service | Gill Musk | | | | |
| Communities & Neighbourhoods Annual Report | Communities and Neighbourhoods Service | Paul Vaughan | | | | |
| Fife Coast & Countryside Trust Annual Report | Fife Coast & Countryside Trust (FCCT) | Jeremy Harris | | | | |
| CLD Plan | Communities | Sarah Roxburgh, Tricia Ryan | | | | |
| Children & Families/Criminal Justice Annual Service Review Report | Children and Families and Criminal Justice Services | James Ross-fc-d1 | | | | |

| People and Communities Scrutiny Committee of 15 January 2026 | | | | | |
|--|------------------------------------|------------------------------|----------|--|--|
| Title | Service(s) | Contact(s) | Comments | | |
| Grenfell Update Report following cabinet committee | Housing Services | John Mills | | | |
| Fife Golf Trust Annual Report | Fife Golf Trust (FGT) | Paul Vaughan, lain Evans | | | |
| Fife Sports & Leisure Trust Annual Report | Fife Sports & Leisure Trust (FSLT) | Paul Vaughan, Emma Walker-sl | | | |
| On-Fife, Fife Cultural Trust Annual Report | Fife Cultural Trust | Heather Stuart | | | |

| People and Communities Scrutiny Committee of 12 March 2026 | | | | | |
|--|--------------------------------|---------------------------|----------|--|--|
| Title | Service(s) | Contact(s) | Comments | | |
| Fife Duty of Candour Annual | Children & Families & Justice | James Ross-fc-d1,Jennifer | | | |
| Report | Social Work | Rezendes | | | |
| Police Scotland Local Policing | Police Scotland | Derek McEwan | | | |
| Plan - Annual Report | | | | | |
| Scottish Fire & Rescue Service | Scottish Fire & Rescue Service | Lee Turnock | | | |
| Annual Report | | | | | |
| Fife Community Safety | Housing Services | Patricia Spacey | | | |
| Partnership Annual Report | | | | | |
| Public Protection Annual Report | Communities | James Ross-fc-d1 | | | |
| | | | | | |
| Armed Forces Covenant Report | Planning | Carol Connolly | | | |
| (Annual update) | - | - | | | |

| People and Communities Scrutiny Committee of 21 May 2026 | | | | | |
|--|---|------------------|----------|--|--|
| Title | Service(s) | Contact(s) | Comments | | |
| Outcomes of care inspectorate & grading processes | Health and Social Care | Lynne Garvey | | | |
| Fife Corporate Parenting Board | Education | James Ross-fc-d1 | | | |
| Allotment & Growing Strategy Update Report | Communities and Neighbourhoods Service | Paul Vaughan | | | |

| People and Communities Scruting | y Committee of 20 August 2026 | | |
|---------------------------------|-------------------------------|---------------|----------|
| Title | Service(s) | Contact(s) | Comments |
| Housing Services and Safer | Housing Services | Mhairi Mullen | |
| Communities Annual Performance | - | | |
| Report | | | |
| Health & Social Care Annual | Health and Social Care | Lynne Garvey | |
| Performance Report | | | |

| People and Communities Scrutiny Committee of 20 August 2026 | | | | | |
|---|-------------------------------|-----------------|----------|--|--|
| Title | Service(s) | Contact(s) | Comments | | |
| Customer & Online Services | Customer Services Improvement | Diarmuid Cotter | | | |
| Annual Performance Report | Service | | | | |
| Temporary and Supported | Housing Services | Gavin Smith | | | |
| Accommodation Strategy - | | | | | |
| Reducing Reliance on Hotels | | | | | |

| People and Communities Scrutiny Committee of 29 October 2026 | | | | | |
|---|--|------------------|----------|--|--|
| Title | Service(s) | Contact(s) | Comments | | |
| Chief Social Work Annual Report | Social Work Services | James Ross-fc-d1 | | | |
| Citizen Advice & Rights Fife Annual Report | Citizens Advice & Rights Fife (CARF) | Gill Musk | | | |
| Communities & Neighbourhoods Annual Report | Communities and Neighbourhoods Service | Paul Vaughan | | | |
| Fife Coast & Countryside Trust Annual Report | Fife Coast & Countryside Trust (FCCT) | Jeremy Harris | | | |
| Children & Families/Criminal Justice Annual Service Review Report | Children and Families and Criminal Justice Services | James Ross-fc-d1 | | | |

| People and Communities Scrutiny Committee of 21 January 2027 | | | | | |
|--|------------------------------------|----------------|----------|--|--|
| Title | Service(s) | Contact(s) | Comments | | |
| Fife Golf Trust Annual Report | Fife Golf Trust (FGT) | lain Evans | | | |
| Fife Sports & Leisure Trust Annual Report | Fife Sports & Leisure Trust (FSLT) | Emma Walker-sl | | | |
| OnFife - Fife Cultural Trust Annual Report | Fife Cultural Trust | Heather Stuart | | | |

| People and Communities Scrutiny Committee of 4 March 2027 | | | | | |
|---|--------------------------------|----------------------------------|----------|--|--|
| Title | Service(s) | Contact(s) | Comments | | |
| Fife Duty of Candour Annual | Health and Social Care | Avril Sweeney, Jennifer Rezendes | | | |
| Report | | | | | |
| Police Scotland Local Policing | Police Scotland | Derek McEwan | | | |
| Plan | | | | | |
| Scottish Fire & Rescue Service | Scottish Fire & Rescue Service | Lee Turnock | | | |
| Performance Report | | | | | |
| Fife Community Safety | Housing Services | Patricia Spacey | | | |
| Partnership | | | | | |
| Armed Forces Covenant Report | Place | Carol Connolly | | | |
| | | | | | |