



*Working together to make a real difference*

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## Strategic Planning Group

Minutes | 16 August 2024 | 1000 | Teams

**Present:** Stephen Brown (Chair), Janice Annal, Helen Sievwright, Shaun Hourston-Wells, Darren Morrow, Yvonne McPhee, Morven Brooks, Drew Mayhew, Garry Reid, Graham Lindsay, Louise Wilson, Ruth Lea (Item 3), Shaun Stockan (Item 3), Grant Laidlaw (Item 3), Lucas Fawcett (Item 3) and Stephanie Johnston (notes)

**Apologies:** Issy Grieve, Morven Gemmill, John Daniels, Frances Troup, Sam Thomas, Davie Hall, Ryan McLaughlin, Carolyn Henderson and Diane Young.

### 1. Welcome and Apologies

Stephen welcomed everyone to the meeting and the apologies were noted.

### 2. Minutes from previous SPG

The minutes were agreed as an accurate reflection of the meeting.

It was noted that colleagues from Housing would attend a future meeting to provide an update.

### 3. Getting It Right For Everyone (GIRFE) Project Update

Grant Laidlow, Strategic Planning Manager, formally thanked the Orkney team for their commitment and support to the GIRFE project. It was noted that ensuring a remote, rural and island perspective included in the design was really important.

It was advised that following the first lot of engagement, 144 person centred journey maps were developed, 300 ideas from the communities highlighted, 40 initiatives developed and 200 further developed by policies in Scottish Government.

It was highlighted the challenges of systems not speaking to each other, lack of a point of contact and the person feeling like they are constantly being referred to different services without knowing why. There are also challenges with language being used with individuals being treated as if they were a system resulting in them feeling like a burden and the limited ability to process information or have the ability to return and ask for further information.

After working with the Pathfinders, and lived experience individuals, the first tool has been developed. 'My Team' will essentially ensure that the individual is the owner of their plan, they understand what will happen and the outcomes. 'Team Around The Person' will enable everyone to work together as a team, to be involved and work with the individual to make decisions. This would not just be the traditional multi-disciplinary team but could include other key people from Housing, Benefits etc based on the needs and outcomes of the individual. Grant gave a brief overview of



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the principles for Community Hubs and the role of community connectors, which was noted as being very similar to the work of Community Led Support. The benefits of this approach were highlighted.

From a national perspective the next step is to test the toolkits in areas such as delayed discharges, adult support and protection etc. The learning from this will be shared and in Autumn, it is hoped, the approach will be published. Following this the intention is to try and implement the national approach with all areas of Scotland utilising this by 2025.

Ruth shared that while the process at times was challenging, it had been a positive experience to be able to keep individuals involved in the process. The team have done a lot of engagement and have tried to focus on the ferry-linked isles to ensure that any issues, or possible solutions, would work in their communities. There has been some 'live' testing locally of the 'My Team' tool. What the team heard was that individual knew who were coming in and out to see them, but there was uncertainty on what they do, where to go for issues. The individual felt they were a passive participant, and felt like things were happening to them, not with them. In the 'live' testing there was work done to establish who is in 'My Team', identify who can coordinate.

Ruth advised that another key area of feedback was that while face to face appointments were the ideal, there was agreement that if it reduced travel, a virtual appointment was okay as long as the conditions were right i.e. there was a trusted person with them, that someone else could manage the technology, and for some that this was not in their home i.e. GP practice etc.

Following a query around the transition from children to adult services and the available tools to support this. It was agreed Ruth would provide Darren further information. **Action:** Ruth.

Drew updated that the Scottish Ambulance Services are currently looking at different pathways such as looking at how to link services, how to support delivering services in a homely setting which would fit in well with the GIRFE work. It was agreed that an update on this work would be brought to a future meeting. **Action:** Drew.

It was agreed that there would be helpful learning from the other themes that could be of benefit. It was also agreed that it would be helpful to have a discussion how GIRFE, Community Led Support and the Islands Wellbeing Project could work more effectively. **Action:** Morven B, Shaun and Ruth.

Thanks were given to Grant, Lucas and the national team as well as Ruth, Shauna and the local team.

#### **4. Discussion on Latest Health and Wellbeing Indicators – Orkney Performance**

The Accounts Commission published a report in July in relation to progress of IJBs with a particular focus on finance and performance. It was noted that as part of this the integration indicators have been updated and profiled. It was advised that a report on the key highlights from the report would be presented to the next meeting of the Integration Joint Board.

There are 18 national indicators, 1 to 9 relate to the Health and Care Experience Survey which is undertaken every two years and indicators 11 to 19 are from Public Health Scotland. There are no direct comparisons for seven of the indicators due to the wording being amended from the previous reporting period.

16 indicators Orkney is performing within the top 10 of areas and 2 indicators are within the bottom 10 of areas.

It was noted that indicator 8 (percentage of carers who feel supported to continue in their caring role) has reduced from the previous reporting period. Following discussion, it was suggested that this may be due to carers being unaware of supports available, rather than poor services. It was suggested that flyers in the Orcadian and having someone in the Hospital once a week may be easy solutions. Shaun agreed to raise this at the next Carers Strategy Group. **Action:** Shaun. It was also suggested if there is need for carer Champions in different areas may be useful.

In respect of indicator 17 (Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections) it was advised that although there has been improvements Orkney is still below the average. It was advised that due to Pandemic, some services have had their annual inspections for the first time since 2018/19. The Social Work and Social Care Governance Board will be commencing to scrutinise inspection data in more depth.

It was agreed that if anyone had any comments in respect of the indicators, or how to address them, to get in touch with Stephen. **Action:** all. It was highlight that it is the testament to staff that services continue to perform well, with the challenges being faced, and the need to recognise all the good work which is happening.

#### **5. AOCB**

None.

#### **6. Date of Next Meetings**

Friday, 13 September (Additional – In Person): 1100-1300, St Magnus Centre.

Friday, 27 September: 1100-1300, Teams.