

Title of meeting: Strategic Planning Group			Date: 28.02.22
			Time: 11:30-13:30
			Location: Microsoft Teams
Chair:	Rachael King		1
Action Log Recorder:			
Member	•	Attended	Apologies / No Apologies (NA)
Gail Anderson		✓	
Janice Annal			✓
Christina Bichan			✓
Lynda Bradford		✓	
Stephen Brown		✓	
Graeme Clark			NA
Angela Colborn-Veitch		✓	
Kirsty Cole			NA
Callan Curtis		✓	
Susan Dutton			NA
Maureen Firth		✓	
Morven Gemmill		✓	
Joyce Harcus			✓
Jacqui Hirst			NA
Wendy Lycett			✓
Jim Lyon			✓
Fiona MacKellar		✓	
Michelle Mackie		✓	
Dawn Moody		✓	
Danny Oliver			NA
Jim Quate		✓	
Pat Robinson		✓	







Valerie Stonehouse	✓	
Maureen Swannie	✓	
Andrew Trevett	✓	
Frances Troup		✓
Louise Wilson	✓	
Jay Wragg		✓
In attendance/By invitation		

	Agenda Item:	Issues Raised:	Action Agreed:	By Whom and When
1.	Welcome & Apologies	Attendees were welcomed and apologies noted as above.		
2.	Minutes of the meeting – 01.12.21	There were no outstanding actions and the minutes were approved as a true and accurate record.		
3.	Review JSNA Risk Register	It was explained that the Risk Register had been presented as a supporting document to the Joint Strategic Needs Assessment (JSNA). The Group was asked their thoughts on whether they found the Risk Register a useful document. One member advised that they did not find it useful and that many of the risks are already reflected in operational Risk Registers, therefore it felt like a duplication of work. They asked what recommendation would be made to the Integration Joint Board (IJB) to address these issues. In response to a question on how they felt the document might be presented, they advised the need to think about duplication and this		







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	being a strategic planning group where services are commissioned, and what the benefits would be in terms of this Group as a planning group.		
	Other feedback received was as follows:-		
	That it was helpful to see risks articulated in this way and that they would like to see who the owners of the risks are and how we are going to address the risks.		
	As the JSNA runs to 200 pages, this document brings to fore some of the key elements we should be thinking about in terms of our strategy moving forwards. However, they did agree that it is not this Group's remit to be monitoring the Risk Register and whilst it was important to see the key themes emerging, it was not necessarily a document to bring back to this meeting on a regular basis.		
	There is huge workforce capacity and demand in this document, which is a predictor of how we can manage the health of the population if we do not have the workforce to manage that demand. It was advised that there were established processes within the NHS for anything workforce related. It was agreed that a real risk is both human and financial.		
	Another member acknowledged their support and stressed that it was important to prioritise the content of the JSNA, whilst accepting there is overlap in the Risk Register, it helped prioritise those things we cannot afford to forget.		







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	That the broad sections were helpful but found the specifics a bit random. For example, high blood pressure is to be expected but there is no mention of rural deprivation, heating bills, etc. Another member agreed that fuel and poverty were all interlinked.		
	It was questioned why Kirkwall was the focus for deprivation when the isles feature very highly and it was advised that it was down to the availability of data at the time the JSNA was produced. However, that could be added to the Risk Register now that the data is available. It was agreed that as more data become available, anything significant should be shared with this Group. It was therefore suggested inviting Harry Johnson from Voluntary Action Orkney to a future meeting, which was agreed by the Chair.	Liaise with Gail Anderson to invite Harry Johnson to a future meeting.	D Hallworth
	The Chair summarised that the consensus was this was a useful document but to bear in mind the concerns raised. That a process is needed that allows up to date data to feed into this and the importance of an integrated approach to the Risk Register from both Orkney Islands Council and NHS Orkney. The Chair asked what our next steps should be.		
	Members were asked to keep the Risk Register at the forefront of their minds and to cross reference with this as we begin to bring through the strategic plan.		
	The Chair noted the absence of a service user or care representative at		







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		today's meeting and stressed the importance of their contributions to the agenda.		
4.	Community Mental Health & Wellbeing Fund – Projects Update	Gail Anderson gave a presentation entitled 'Communities Mental Health & Wellbeing Fund'. She explained that this was launched in October last year where £15 million was allocated by Scottish Government (SG) to 32 Third Sector Interfaces to meet the demand for local mental health and wellbeing projects. The focus was to support grass roots community groups and organisations to deliver activities for adults. There followed a discussion during which it was asked whether it was		
		likely that the funding would be extended to 2022/23, so we could start considering extending projects that were successful in the first round. However, it was advised that the process does not allow for reapplication. It was noted that whilst there were a lot of positives, there was concern expressed around the sustainability of the projects.		
		Gail advised there are local organisations who are specialists in this but that a collaborative approach is needed and that the projects can be revisited as we move into a new funding period. She noted that this would probably be April so there was not a great deal of time and that members should consider discussions with partner organisations now. Gail informed the Group that she has been very strong in letting the SG know that these short-term projects are not enough in themselves.		
		In summary Stephen Brown thanked Gail and her team for the work they have done and for the fact we have some clearly defined projects.		







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		He noted he would be keen to see what the second tranche might look like and advised that everything will be done at national level to provide assurance around the funding element. He advised it will be up to this Group to think through how we ensure we preserve these projects moving forwards.		
5.	Terms of Reference (ToR)	Updated ToR had previously been circulated for comment and if adopted by the Group today would be recommended to the IJB to be formally amended. It was noted that the post of Strategic Planning and Performance was to be added to the membership. Following feedback it was agreed to add a line that shows the importance of recognising an evidence-based approach to our decision-making. Also to recognise that workforce planning cannot take place without the input of professional bodies and trade unions.	To update ToR taking note of today's discussion and submit to IJB.	S Brown
6.	Vice Chair	At the previous meeting the Group had been asked to indicate their willingness to take on the role of Vice Chair of the SPG. Members were again asked to contact Stephen Brown or Rachael King if anyone was willing to take on this role.	Contact Stephen Brown / Rachael King if wish to be considered for Vice Chair of SPG.	All
7.	AOCB	It was explained that the purpose of this agenda item was to encourage the Group to feel free to indicate and raise issues outwith the agenda. Maureen Swannie provided an update on the drafting of the strategic plan, which is due the end of March. She advised that four people volunteered to be part of a writing group, they compared and contrasted		







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	plans already in place across Scotland and came to an agreement on the content. They looked at mental health and wellbeing, older people and support in their own homes, carers, community led support, prevention and early intervention. She explained that the plan is to bring these into a similar format so it is easy for communities to read and once aligned will compile it into a document to share with the Group by the middle of next week. It will contain an action plan with links embedded into the document.	Draft strategic plan to be shared with the SPG.	M Swannie 09.03.22
	The Chair noted that we are all acutely aware of what is happening in Ukraine at the moment and to be mindful of the impact on young people; first the pandemic and then their fears for the future. It was agreed this was clearly a factor that needed to be taken in account.		
	The Chair reminded the Group to think on how the strategic plan links back to the risk register. It was suggested that the focus should be on outcomes rather than processes. That there was always a tendency to deliver these services to those who least need them and questioned what services would be going into areas of deprivation. Maureen advised that there has been a focus on outcomes and under every priority there is a section stating, "we will do". She advised that the services near to those in need will come under the community support aspect. The need to ensure a joined-up approach was highlighted.		
	It was agreed that we need to be outcome focused, with room for a different way of thinking. Childhood healthy weight and obesity was put forward as areas to look at, and in relation to child poverty and fuel		







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	poverty it was suggested that the kinds of food being offered in the food banks could be an innovative piece of work.		
	Further discussion took place around food poverty and Gail Anderson advised that some months ago there was a third sector group established to focus on this, who received funding to take it further. The focus of this was a scoping exercise around food poverty and food dignity, and the aspiration is we work in partnership to reduce the need for food poverty. A multi-agency short-term group was set up, which included experts by experience. She advised they received a tremendous response and will make recommendations to be put into a strategy. There were so many themes to disadvantage and poverty that the Community Planning Partnership agreed to create a poverty strategy for Orkney.		
	It was advised that MSK (musculoskeletal) injuries were the highest cost of absence from work and the need to enable our working adults to provide opportunities for them to be active and to eat well. It was noted if we cannot keep our adults in work, how can they afford to feed their families.		
	In relation to people's mental health, it was advised that according to data from Orkney Islands Council there has been a significant reduction of staff absenteeism due to work-related stress but an increase in non-work-related stress.		
	In relation to SPG meetings going forwards, the Chair noted the need to		







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		ensure attendance at these meetings, although it was appreciated that people have other commitments on their time. Valerie Stonehouse welcomed Diane Young who commences on the 3 April as Service Manager for Mental Health.		
8.	Date of next meeting	It was asked whether these meetings should revert to quarterly. Following discussion it was agreed that the next meeting would be in 6 weeks' time and thereafter occur every 8 weeks.	Meetings to be scheduled for 2022.	D Hallworth



