



Third Sector Health and Social Care Forum

Note of Meeting

7th September 2021 from 2pm—4pm

Held via Zoom

Working together to put our sector first
Dumfries and Galloway's Third Sector Interface

In attendance: Claire Brown (TSDG), Beth McWilliam, (TSDG), Ananda Allan (Performance and Intelligence Manager, NHSDG), Liz Forsyth (Strategic Planning Programme Manager, NHSDG), Tracy Parker (Workforce Planning and Systems Manager, NHSDG), Karen Garrott (Stroke Association Scotland), Alex Thorburn (DG Mental Health Association), Debbie Cochrane (Stewartry Care), Kalpana Ratnam-Roarty (User and Carer Involvement), Siobhan McDonald (Home Energy Scotland).

Apologies: Emma Scott (Support in Mind Scotland), Pamela Deans (D&G Advocacy Service), Paula Cochrane (Capability Scotland)

1. Update on Strategic Commissioning Plan Consultation

- *Presentation by Liz Forsyth (Strategic Planning Programme Manager) click [HERE](#) for presentation*

Questions/ Comments

- Little mention of the Feeley report throughout the Strategic Commissioning Plan Consultation document; importance of lived-experience. A discussion ensued around the importance of engaging lived-experience in the development of policy.

In response it was suggested that there is a general ethos of Feeley and a human-rights based approach throughout the SCP but acknowledged that concerns r.e. links with Feeley came out strongly throughout the consultation period. Engagement around the SCP had already begun prior to Feeley recommendations being published so this is what has progressed. Had Feeley been published prior to the SCP it is likely to have had a stronger, more obvious presence.

Lived experience was reflected in the consultees; comments have been blunt and any comments relating to specific services within the NHS will be passed directly onto service leads.

It was acknowledged that Feeley is a radical document in terms of social care; can't expect things to change quickly; it will take time to filter down and come to fruition. Once finalised the SCP will bridge the gap between now and what the future looks like under Feeley. The SCP will always be looking to the future. A 'transition' document to get from where we are now to where we need to be. A lot will need to happen along the way.

Action: Please forward any additional comments to Liz Forsyth on

Elizabeth.Forsyth@nhs.scot

- What does the editing process following the consultation look like?

An editorial group is created to help theme the comments. Labour intensive comment in which all comments are considered and sorted by section. If a comment doesn't relate to the SCP but relates to lived experience then it will be sifted out and passed on to the relevant department. Weight will be given to numerous comments of the same theme; however it is important to note that all comments are considered and 'off piste' comments can illicit a 'why didn't we think of that?' reponse. All insights and comments from the editorial group are noted and considered

Format:

'You said we did...'

'You said we didn't because..... but we did 'this' instead.'

The importance of language was discussed, to prevent language becoming a barrier to engagement or understanding. Alex described a glossary of terms that he has compiled in relation to his work on human rights. Ananda agreed to revisit the glossary in the SCP to ensure that it continues to make sense.

Action: Alex to share Human Rights Glossary.

2. Development of a Performance Management Framework

- *Discussion with Ananda Allan, Performance and Intelligence Manager*

The Performance Management Framework is a companion document to the SCP. A strategic document which lays out relevant legislation and guidance and performance reporting for the Health and Social Care Partnership. The document contains roles and responsibilities of the Partnership and anchors how each part of the Partnership works in relation to the Integration Scheme. It also lays out how and when performance is reported, and the escalation of poor performance - how it is dealt with. It considers service delivery, not quality or finance.

Ananda is doing some engagement with stakeholders who are involved in performance to take back to IJB for consideration. This includes what people would like to see in terms of content, particularly in relation to representation of the wider Partnership to health and social care. Want to move beyond simply case studies; look for input from wider partners in relation to 'is integration working?'; 'how could it work better?'. Consider the 'so what?' question—reflect on commissioned services and take positive steps to engage with seldom heard voices

Members can contribute by attending drop-in sessions on MS Teams which will be held weekly until middle of October or feedback can be sent directly to Ananda/ Liz Forsyth. All comments will be considered in a similar approach to the development of the SCP.

Drop-in Sessions:

- Tuesday 7 September 1pm – 2pm
- Tuesday 14 September 1pm – 2pm
- Tuesday 21 September 1pm – 2pm
- Tuesday 28 September 2pm – 3pm
- Tuesday 5 October 2pm – 3pm
- Tuesday 19 October 2pm-3pm

3. Development of HSCP Workforce Plan

- *Presentation by Tracy Parker (Workforce Planning and Systems Manager) click [HERE](#) for presentation*

In 2016 there was a requirement to develop an Integration Workforce Plan; now keen to align the workforce plan with the SCP to demonstrate how the workforce relates to the strategic commissioning intentions. The workforce plan will be for 3 years and will be delivered in the same timeline as the SCP, to be finalised and published in April 2022

The workforce plan contains 5 key themes, each with ambitions and high level actions:

Theme 1– Attracting, recruiting and retaining.

Theme 2- High quality training and development including interdisciplinary and cross-sector working and training.

Theme 3- Building on, consolidating and promoting health and wellbeing for the people who deliver care and support.

Theme 4- improve workforce communication and engagement.

Theme 5- Creating a culture that embeds human rights, equity and equality.

Discussion included the following points:

- How do we reflect the role of the wider third sector in early intervention and prevention in workforce planning?
- Cross sector working
- How do we reconcile worklife balance and recruitment challenges facing social care ?
- How do we readdress the public perception of social care which can act as a barrier to entering social care as a career—low pay, unexciting, cost-driven straight jacket which restricts doing what they want to do due to cost. During pandemic NHS seen as heroes, but social care not recognised.

- Disparity in relation to terms and conditions between sectors; unable to address locally quickly
- Longer term ambition to address pay gap—levelling up of pay and conditions
- Look at commissioning contracts—introduce flexibility around pay; time and task can be prohibitive
- Introduce case studies on career sites to demonstrate career progression and highlight other wider benefits of working in social care
- Social care experiencing biggest crisis we've ever been in—need to do something
- Movement between sectors—third sector often used as an entry level stepping stone to move on to better paid positions in statutory sector
- Are pressures of Covid reflected in the plan? In context of the plan reference is made to the pandemic and staff absence through anxiety, stress and depression; it is reflected also in Theme 3 which refers to the national health and wellbeing hub. Have tried to recognise that staff are working through unprecedented times.

Please note, the draft Themes are high level themes that form part of a larger plan.

Actions: Forum members are asked to comment on the themes and whether these reflect members' experiences by the *end of September*. Comments can be sent to Tracy at tracy.parker6@nhs.scot

4. AOCB

There were no other items of business.