

Minute of the Third Sector Forum meeting held at 11am on Thursday 27<sup>th</sup> March 2014 in the McGillivray Room, Kirkwall Library.

**Present:** Sheila Garson (VAO), Gail Anderson (VAO), Mike Cooper (Care & Repair), Pat Shields (Orkney InfoNet & Access Panel), Sue Sulat (Pickaquoy Trust and WAO), Caron Jenkins (Age Concern Orkney), Peter Cockburn (Kirkwall Bowling Club), Peter Scott (VAO), Benjamin Lindsey (British Red Cross), Frazer Campbell (Blide Trust), Gerd Peters (Scottish Health Council), Granville Solloway (Heart Support Group).

In attendance: Rachel Peace and Cecily Cromby (minutes)

## 1 Welcome

Sheila welcomed those present and thanked them for attending

## 2 Apologies

Apologies had been received from Erika Copland, Michelle Koster, Simon Gordon, Andy Spence-Jones, Hillary Allen, Jan Judge, Michael Moar, Helen Castle and Jack Moodie.

## 3 Minutes of the last meeting

Subject to the following amendment the minutes were approved as a true and accurate record.

Member feedback – Item 6(h) Amend from (Kirkwall bowling club) 'is closed until the 3<sup>rd</sup> week of March' to '...until the 3<sup>rd</sup> week of April'.

### 4 Matters arising

**Item 5 (7e) Wise Group** – A bid has been submitted and a response received stating that they are not looking for a fully formed project. Gail will explore further.

**Item 6 (g) Single Point of Referral Workshop** – It was clarified that The Single Point of Referral Workshop is exploring how to establish a single point of contact for Social Services and NHS with Third Sector representatives involved in the work.

# 5 Patient Advice and Support Service (PASS)

Unfortunately Hilary Allen was unable to attend to speak about PASS. A PASS case study (confidential) and report had been circulated to members. Gail advised that Hilary would welcome questions or feedback on both.

Gerd Peters reported that the Scottish Government is working with the NHS to encourage an open and transparent complaints procedure. He informed the group that NHS staff encourage feedback from patients and relatives to enable them to learn from mistakes. Complaints should be viewed as a learning opportunity rather than as a method of 'landing staff in it'.

It was noted that Freedom of Information legislation enables the press to access case studies.

## 6 Partnership Feedback

## a) CPP Steering Group:

## a. Facilitated sessions

Two useful and productive meetings have been held and the group identified 3 priorities:

- 1. <u>A vibrant economic environment</u>. Concentrating on reducing the impact of geographic disadvantage, enhancing natural advantages, increasing the economies of the outer isles and improving connectivity. Will work with the Our Islands Our Future agenda.
- 2. <u>A sustainable community</u>. Concentrating on enhancing social sustainability and improving access to services and facilities. There is recognition that this is already in place in Orkney and so maintenance is more of an issue than implementation.
- 3. <u>Positive aging</u>. Concentrating on the positive contribution to society made by older people and recognising that not all older people are in need of services. Looking to enhance support and care service delivery. This will be interwoven with the reshaping care for older people agenda.

Gail will keep the group informed of progress.

# b. Scottish Government Audit

The CPP has put itself forward for audit. There was a visit a few months ago and the full audit will take place in the near future. Gail will keep the group informed.

# b) GIRFEC (Getting It Right For Every Child) Third Sector National Project

GIRFEC is both a philosophy and a framework. The Third Sector National Project aims to recognise the work that the Third Sector does with children and encourage more involvement within community planning. Agreed actions were being carried out. All Third Sector organisations working with children and young people have been surveyed to find out what age groups they work with and what data they gather (health and care services are also being surveyed). Focus groups will be held when the data is available to identify how these organisations can contribute to the Integrated Children's Service Plan. If successful the approach could be used as a model for other thematic groups in Community Planning.

It was noted that The Children and Young People (Scotland) Bill is formalising some systems that are already in place, such as the named person.

## c) Parenting Strategy Working Group

The Working Group has met on several occasions to draft a Parenting Strategy. The group has equal Third Sector and statutory membership. A workshop is being held on 28<sup>th</sup> April for all those involved in delivering children and family services and will be asked to comment on and revise the draft aims.

# d) Joint Commissioning Strategy and Change Fund Group (JCS/CFG)

A document providing guidance on the development of a Joint Strategic Plan and health and social care integration had been circulated to members. Attention was drawn to appendix two which gave a list of tasks to be completed by April 2015. Gail informed members that work was progressing. It has been suggested at a recent meeting that the Orkney Health and Care Committee could, with the additional members required, take on the role of the required Strategic Planning Group. Work to gather information to inform the Plan would continue and workshops will be held during the year to gather the views of the third sector and the public. It was noted that NHS Orkney and OIC have not yet made a decision on the Integrated Model that they will adopt. The suggestion in the guidance that there should be two locality areas might prove difficult in Orkney given the small population.

Gail had submitted a paper to the Community Planning Partnership Steering Group requesting the establishment of a Data Sharing Working Group. Barriers to data sharing had been raised by all sectors and services as an issue for effective partnership work and service delivery.

Frazer informed the group that feedback at a national event looked favourably on Change Funds being allocated to Orkney.

### e) Learning Community Inspection

A recent inspection of the learning community located around Kirkwall Grammar School provided very positive initial verbal feedback. The main points were: a vibrant community with a culture of volunteering, effective community organisations delivering services, highly responsive approach to meeting learners' needs and strong network with positive relationships. Of the four aspects inspected, two received scores of 'very good' and two of 'good'.

### f) Adult Protection Committee

The Adult Protection Committee is responsible for the strategic overview of adult protection in Orkney and provision of training (CD Rom available from Edwina Cook, VAO). The Committee have revised their constitution and did not at first include third sector representation in the membership list. That oversight has been addressed.

The Group had found it difficult to gather information about adult protection processes within community organisations therefore the information it held represented police and social work. Gail suggested a questionnaire asking how many people had used the CD Rom with additional questions as required. Benjamin noted that all Red Cross staff receive training and PVG check. Sue noted that this will be relevant to the new Lifestyle Centre at the Pickaquoy Centre.

## g) Welfare Reform Update

The most recent update had been circulated to the group for noting. Sheila noted the premium call rate number for the new service and suggested Gail raise that at the next Welfare Reform Working Group meeting.

### h) Members Feedback

**Frazer Campbell (Blide Trust)** reported that he had recently attended an Emerging Leaders course run by the Social Enterprise Academy. He commented that the course on leadership and management was very good and would recommend to anyone looking at expanding a social enterprise. Gail will feed back to Edwina.

**Peter Scott (VAO)** reported that it has been noted at VAO Board meetings that support for patients leaving hospital, particularly the Balfour, could be improved. Benjamin advised that the Red Cross will be interested in this.

**Sue Sulat (Pickaquoy Trust and WAO)** reported that the new Lifestyle Centre is on schedule to open in early 2015. She noted that there is some uncertainty about the user group, originally Keelylang but may now include St Colms. The original plan was for a day care service with facilities available to the public outside these hours, but the service may have to extend its hours to those of the Pickaquoy Centre. Although there are some concerns, it is an exciting project and will be good for the groups based in the centre.

**Caron Jenkins (Age Concern Orkney)** reported that Age Concern is very busy, especially the 'here to help' service which is receiving a number of referrals. They are taking on new staff, advertising for two part-time and one relief post and Rachel is going full time as the service delivery and finance co-ordinator from

next week. She advised that the Board are fully engaged in a review of all services which should give a clearer picture of how to develop strategy.

**Peter Cockburn (Kirkwall Bowling Club)** advised that they are opening in April. They are hoping to apply for grants for new balls for primary school students and hoping to discuss children's training sessions with Papdale School. He noted that additional coaches/staff may be needed to cope with extra sessions for children. The Disability Forum has three sessions booked in June/July and Rousay Development Trust is looking to arrange training sessions.

**Benjamin Lindsey (British Red Cross)** reported that the Red Cross are busy at present. The Red Cross have implemented a new First Aid learning strategy encompassing a new style of first aid delivery with clear and basic explanations. He advised that 'Every Day First Aid' sessions are available free of charge to community groups. He reported that the Red Cross are about to sign an understanding with OIC on the Rest and Recovery Service. Emergency response volunteers are needed for events and will be provided with training.

**Granville Solloway (Heart Support Group)** reported that the numbers joining the Heart Support Group were going up, which can be seen as both a good and bad thing.

**Mike Cooper (Care and Repair)** reported that Orkney Care and Repair are in the process of negotiating further funding. He noted that they have received some funding from OIC to contribute to a third handyman.

**Gerd Peters (Scottish Health Council)** noted that the CAB run PASS and they are very good at it. He advised that case studies are being done nationally and the public are being encouraged to provide feedback. The Orkney PASS scheme does not yet have a Steering Monitoring Group, whose role will be to provide support to the PASS worker when taking decisions about case studies. He advised that the Health Service need to drive this. Gerd would like Third Sector and public representation on the group which would meet 2-4 times a year.

Gerd reported that a recent inspection highlighted that nationally Third Sector and statutory organisations would like more evaluation and training guidelines and that the SHC could provide training on this. Gail noted that the North Alliance have money for practitioners training which could be used to fund this. The SHC could look at how HIS provide training.

Gerd noted that HIS is now charged with the Older Peoples Care Inspection and advised that the Third Sector and the public should be encouraged to engage. It was noted that the Connecting Communities Project and Age Concern Orkney had discussed how to capture older people's voices and concerns.

Gerd highlighted the importance of patients and relatives providing feedback/complaints to NHS Orkney so that it can be used to improve the

service. He noted that all feedback should be seen as positive and useful. Caron noted that terminology is important and that patients/relatives should see it as 'feedback', with the hospital distinguishing 'complaint' from 'feedback'. Pat noted that blue boxes have been placed around the Balfour for anonymous comments. Granville highlighted that there are generally two types of complaint: those involving bad treatment of a patient by staff and those relating to staff shortages and access issues.

**Pat Shields (Info-net Orkney and Access Panel)** informed the group about the role of Info-net Orkney. She advised that she is attending training in Thurso next month on behalf of the Access Panel and that the Scottish Disability Forum Conference is taking place in Aviemore later this year. The Access Panel now have a Facebook page.

## 7 AOCB

- a) **Reshaping Care for Older People** Gail noted that the Scottish Government Audit found that Change Fund activity had not yet achieved the planned impact, although in many local authority areas relationships between third and statutory sectors had become more productive.
- b) **Orkney Fair Trade** Gill Smee had advised that Orkney Fair Trade need to maintain a portfolio of evidence of Fair Trade Activities across the community to maintain accreditation. Gail will circulate information.

Action: Gail

- c) **Single Outcome Agreement** Gail noted that this will be revised this year and she will keep members updated.
- d) **Connecting Communities Project** Gail informed the group that the Connecting Communities Project had launched the Directory of Services for Adults. In addition to the printed copy the information can be accessed on-line from the national ALLISS database. It was noted that there were gaps in the first edition of the printed directory but it was hoped that additional organisations and services would be included in the future. **Orkney Communities Website** - Gerd noted that this appears to have been updated.
- e) **Global work of Third Sector** Benjamin noted that he recently attended the National Red Cross Assembly at which there was a teleconference with the president of the Syrian Red Crescent. The Red Crescent reminded delegates that the conflict in Syria has now been going on for three years and that the only operational ambulances left are those funded by the DEC. This highlights the important work of the Third Sector globally as well as locally.

### 8 Date of next meeting

22<sup>nd</sup> May 2014 at 11am.