

***Text requirements are: Font – Arial; Font Size – 12; Text Alignment – Left***

***Please delete all instruction in red once document is finished***

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| **Meeting Title:** | | | | | **Meeting Name** |
| **Meeting Date:** | | | | | **Date** |
| **Agenda Item No:** | | | | | **1** |
| **Report Title:** | | | | | **Title of Report** |
| **Responsible Officer:** | | | | | **Full Name and Title of Responsible Lead Officer** |
| **Report Author:** | | | | | **Full Name and Title of Report Author** |
| **1** | **Purpose *(Please select the most appropriate item(s) from section and delete the others)*** | | | | | |
|  | **This Report is presented to the Board for:**   * Assurance * Discussion * Decision * Direction | | | | | |
|  | **This Report relates to which of the following National Health and Wellbeing Outcomes: *(delete as appropriate):*** | | | | | |
|  | 1 People are able to look after and improve their own health and wellbeing and live in good health for longer.  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.  3 People who use health and social care services have positive experiences of those services, and have their dignity respected.  4 Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.  5 Health and social care services contribute to reducing health inequalities.  6 People who provide unpaid care are supported to look after their own health and wellbeing, including to reduce any negative impact of their caring role on their own health and well-being.  7 People who use health and social care services are safe from harm.  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.  9 Resources are used effectively and efficiently in the provision of health and social care services. | | | | | |
|  | **This Report Aligns to which of the Integration Joint Board 5 Key Priorities: *(delete as appropriate):*** | | | | | |
|  | * Working with local people and communities to address inequalities and improve health and wellbeing across Fife. * Promoting mental health and wellbeing. * Working with communities, partners and our workforce to effectively transform, integrate and improve our services. * Living well with long term conditions. * Managing resources effectively while delivering quality outcomes. | | | | | |
| **2** | **Route to the Meeting** | | | | | |
|  | This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.   * Committee/Group/Meeting Name, date written as 1 January 2022. Include any key feedback in support of or influencing amendment to the final paper being presented to the IJB. * Committee/Group/Meeting Name, date written as 1 January 2022. Include any key feedback in support of or influencing amendment to the final paper being presented to the IJB. | | | | | |
|  | **Route Following the Meeting *(This is for Senior Leadership Team use only and will not be included in the main report to Committees/IJB):*** | | | | | |
|  | Please provide details of where report will go once discussed at this meeting eg SLT Formal (Assurance/Business/Strategic); Governance Committee (specify which); Integration Joint Board – or Not Applicable if dealt with at this meeting.   |  |  | | --- | --- | | SLT Assurance |  | | SLT Business |  | | SLT Strategic |  | | Audit & Assurance |  | | Finance, Performance & Scrutiny |  | | Quality & Communities |  | | Integration Joint Board |  | | Not Applicable | Issue Dealt With | | | | | | |
| **3** | **Report Summary** | | | | | |
|  | **3.1** | **Situation**  *Provide a concise statement of the situation. Why is this being brought to the meeting’s attention? What is the strategic context? What are members being asked to do? (Cross-reference with Recommendation Section below).* | | | |
|  | **3.2** | **Background**  *Provide pertinent information relating to the situation. Summarise issues of significance and relevant legislation.* | | | |
|  | **3.3** | **Assessment**  *Provide analysis of the situation and considerations. Assess the current position, identifying any organisational risks, stakeholder considerations and evidence base to help inform decision making. This section should be the bulk of the paper.* | | | |
|  | | **3.3.1** | **Quality / Customer Care**  *Describe any positive and negative impact on quality of care and services.* | | |
|  | | **3.3.2** | **Workforce**  *Describe any positive and negative impacts on staff, including resources, staff health and wellbeing.* | | |
|  | | **3.3.3** | **Financial**  *Describe the financial impacts (capital, revenue and efficiencies) and how this will be managed.* | | |
|  | | **3.3.4** | **Risk / Legal / Management**  *Describe relevant risk assessments/mitigations or legal matters.* | | |
|  | | **3.3.5** | **Equality and Diversity, including Health Inequalities** *State how this supports the Public Sector Equality Duty, Fairer Scotland Duty and the Board’s Equalities Outcomes.* | | |
|  | |  | An impact assessment has been completed and is available at …. **Or** An impact assessment has not been completed because ….. | | |
|  | | **3.3.6** | **Environmental / Climate Change**  *Describe any positive or negative impacts on the environment/ climate change and how this supports the aims of the Fife Community Planning Partners Climate Change (Sustainable Energy and Climate Change Action Plan 2020 – 2030*  [ClimateActionPlan2020\_summary.pdf (fife.gov.uk)](https://www.fife.gov.uk/__data/assets/pdf_file/0032/39587/ClimateActionPlan2020_summary.pdf) | | |
|  | | **3.3.7** | **Other Impact**  *Describe other relevant impact.* | | |
|  | | **3.3.8** | **Communication, Involvement, Engagement and Consultation** *If relevant, the Integration Joint Board has carried out its duties to involve and engage:*   * *Communities and the public in line with the agreed participation and engagement strategy* * *Our partners, Fife Council, NHS Fife, Third Sector and Independent Sector)* * *Our Services and Professional Leads, where appropriate (e.g. Senior Leadership Team, Integrated Professional Advisory Group and Strategic Planning Group):*   *State how this has been carried out and note any meetings that have taken place.* | | |
|  | |  | * Stakeholder/Group Name, date written as 1 January 2022. * Stakeholder/Group Name, date written as 1 January 2022. | | |
|  | **4.4** | **Recommendation**  *State the action being requested. Use one of the following directions for the meeting. No other terminology should be used.* | | | | |
|  |  | * **Assurance –** assure members of current position * **Discussion** – examine and consider the implications of a matter * **Decision** – agree / disagree * **Direction** – issuing of a clear and concise Direction to partners | | | | |
| **5** | **List of Appendices** | | | | | |
|  | The following appendices are included with this report:  Appendix 1 – Document Title  Appendix 2 – Document Title  **Please do not embed documents into this SBAR** | | | | | |
| **6** | **Implications for Fife Council** | | | | | |
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| **7** | **Implications for NHS Fife** | | | | | |
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| **8** | **Implications for Third Sector** | | | | | |
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| **9** | **Implications for Independent Sector** | | | | | |
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| **10** | **Directions Required to Fife Council, NHS Fife or Both (must be completed)** | | | | | |
|  | |  |  |  | | --- | --- | --- | | **Direction To:** | | | | **1** | **No Direction Required** |  | | **2** | **Fife Council** |  | | **3** | **NHS Fife** |  | | **4** | **Fife Council & NHS Fife** |  | | | | | | |
|  |  | | | | | |
| **11** | **To Be Completed by SLT Member Only (must be completed)** | | | | | |
|  | |  |  | | --- | --- | | **Lead** |  | | **Critical** |  | | **Signed Up** |  | | **Informed** |  | | | | | | |
| **Report Contact** | | | |  | |
| **Author Name:** | | | | **Name** | |
| **Author Job Title:** | | | | **Job Title** | |
| **E-Mail Address:** | | | | **E-Mail Address** | |