Fife Health & Social Care Partnership

www.fifehealthandsocialcare.org

Annual Performance Report

2025 - 2026

NHS Fife

Supporting the people of Fife together

Fife Council

Contents

Community Pharmacy, the School Nursing Team, and Community Occupational Therapy

A message from our Chair

As Chair of Fife Integration Joint Board, I am pleased to introduce this Annual Performance Report for 2025 - 2026. This report provides an open and honest account of how Fife Health and Social Care Partnership has performed over the past year, the progress we have made against national and local priorities, and the challenges we continue to face.

Across Scotland, health and social care services are under significant pressure, and Fife is no exception. Rising demand, continuing financial constraints and workforce pressures have tested our system throughout the year. As a Board, we have had to make difficult decisions while keeping a clear focus on our shared purpose - improving outcomes for the people of Fife and using public resources responsibly.

Despite these challenges, this report highlights many areas of progress and positive impact. It demonstrates the strength of partnership working across health, social work and social care, the third and independent sectors, and our communities. It also shows the commitment of staff and carers who continue to deliver high-quality, compassionate services in demanding circumstances. Importantly, the report reflects the experiences and voices of the people who use services, which remain central to our decision-making.

On behalf of the Board, I would like to thank all those who have contributed to the work set out in this report – our workforce, partners, carers, volunteers and members of our communities. I would also like to thank my fellow Board members for their continued commitment to strong governance, constructive challenge and collaborative leadership. Together, we remain committed to working openly, responsibly and in partnership to deliver the best possible outcomes for the people of Fife.

David Ross
Chair, Fife Integration Joint Board

Foreword

I am pleased to introduce the Annual Performance Report for Fife Integration Joint Board for 2025 - 2026. This report sets out how, over the past year, we have continued to work together to plan and deliver health and social care services that support people in Fife to live well, stay independent and remain connected to their communities.

Like many partnerships across Scotland, we have operated during another demanding year. Ongoing financial pressures, workforce challenges and increasing demand for services have required us to make difficult choices and stay focused on what matters most. Even in this context, there is much to be proud of. Throughout this report, you will see examples of strong partnership working, innovation and commitment to prevention, early intervention and community-based support, all shaped by the voices and experiences of the people who use our services.

This year also marks the final year of our Strategic Plan for Fife 2023 - 2026. As well as reporting on our performance against the nine National Health and Wellbeing Outcomes, this report reflects on the progress we have made over the last three years and the learning we will carry forward. Importantly, it also provides context for our new Strategic Plan for 2026 - 2029, which sets a clear direction for the next three years and reinforces our shared commitment to prevention, communities and digital innovation.

I would like to thank everyone who has contributed to the work highlighted in this report - our staff, unpaid carers, partners across statutory, third and independent sectors, community organisations and volunteers. I would also like to thank those who have shared their feedback and experiences, helping us to improve and refine how services are delivered. Your contribution is vital. As we look ahead, we remain committed to working collaboratively, reducing inequalities and building a more sustainable, integrated health and social care system for the people of Fife.

Lynne Garvey
Director of Fife Health and Social Care Partnership
Chief Officer, Fife Integration Joint Board

Introduction and Background

The Public Bodies (Joint Working) (Scotland) Act 2014 sets out how health and social care services must be integrated in Scotland. Every Integration Joint Board (IJB) must have a Strategic Plan that describes its vision, priorities, and how it will deliver the nine National Health and Wellbeing Outcomes locally. These plans are reviewed regularly to ensure they continue to meet the needs of local people and communities.

Fife Integration Joint Board is responsible for planning, resourcing, and overseeing a wide range of health and social care services across Fife. Over the last year, we have worked closely with partners and individuals to progress the 'Strategic Plan for Fife 2023 to 2026' and deliver the improvements set out in our Year Three Delivery Plan (2025).

To ensure transparency and accountability, all Integration Joint Boards are required to publish an Annual Performance Report. These reports provide an assessment of how well each IJB has planned and delivered its responsibilities.

This Annual Performance Report for Fife Integration Joint Board follows the structure of the nine National Health and Wellbeing Outcomes. This approach allows clear links between national indicators and local performance and enables comparisons over time, and with other health and social care partnerships across Scotland. The Annual Performance Report also highlights key improvements and innovations achieved over the past year. It recognises the outstanding effort and commitment of our employees, who work every day to support the people of Fife to live healthier and more independent lives.

The Strategic Plan for Fife 2023 to 2026, along with the supporting Delivery Plans and Annual Performance Reports, are all available on our website: www.fifehealthandsocialcare.org

Demographics

Fife has a population of 374,760

This is an increase of 1,190 people (0.3%) since 2023.
(National Records of Scotland, 2025)

With a life expectancy of 77 years, men in Fife are estimated to live 59 years in relatively good health.

Women are expected to have a longer life expectancy (81 years) and slightly lower healthy life expectancy (55 years).

(National Records of Scotland, 2024).

By 2043 Fife's population is expected to decrease to 364,164.

However, only younger age groups are expected to decrease, older age groups will see an increase in numbers.

People receiving Care at Home = 2,800 people.

People in Long Term Care = 2,500 people.

Fife Population:

Males = 48%

Females = 52%

There are approximately 45,000 people in the Fife Armed Forces Community (including serving personnel, reservists, veterans and family members).

(Scotland's Census, 2022)

There are 44,222 carers in Fife. (Scotland's Census, 2022)

This is an increase of 27% since the last census in 2011.

In Fife, almost 40% of adults aged 16 and over have a limiting long-term physical or mental health condition or illness.

Strategic Plan for Fife 2023 to 2026

In 2023, Fife Integration Joint Board (IJB) set out its vision and future direction for Fife's health and social care services in the 'Strategic Plan for Fife 2023 to 2026'. This included how the nine national Health and Wellbeing Outcomes for Health and Social Care would be delivered locally, along with the six Public Health Priorities for Scotland. The IJB's long term vision is **'to enable the people of Fife to live independent and healthier lives'**.

The Strategic Plan 2023 to 2026 had five strategic themes:

These priorities provided a framework for all of our work to support people and communities across Fife. This included our collaborations with other health and social care providers, particularly our partners in the third and independent sector, and the many thousands of carers who work hard to make a difference every single day. This table links the Partnership's strategic themes to the national Health and Wellbeing Outcomes and the examples provided in this report.

Strategic Theme	National Health and Wellbeing Outcomes	Relevant Examples in this Annual Performance Report
Local	1, 2, 3, 4, 5, 7, 8, 9	4, 7, 8, 9, 11, 12, 15, 16, 17, 18, 19, 20, 21, 24, 25, 26, 27, 28, 29, 30
Sustainable	1, 2, 3, 4, 5, 7 ,9	1, 6, 7, 8, 9, 10, 12, 16, 17, 18, 20, 21, 23, 24, 25, 26, 27, 28, 30
Wellbeing	1, 2, 3, 4, 5, 6, 7, 8, 9	1, 2, 3, 4, 5, 7, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 24, 25, 27, 30
Outcomes	1, 2, 3, 4, 5, 6, 7, 8, 9	5, 6, 7, 8, 9, 12, 14, 15, 16, 17, 18, 20, 21, 24, 25, 26, 27, 30
Integration	1, 2, 3, 4, 5, 6, 7, 8, 9	1, 5, 7, 8, 9, 12, 16, 17, 18, 20, 21, 24, 25, 27, 28, 29, 30

The Strategic Plan 2023 to 2026 was supported by annual delivery plans which provided a framework for the programme of work that was planned and delivered each year. Our Year Three Annual Report (2025) was approved by the IJB in March 2026. The Year Three Annual Report included an update on the actions completed in 2025 and an update on the overall implementation of the Strategic Plan over the last three years.

Moving forward, a new Strategic Plan has been developed for 2026 to 2029. The new Plan sets out what we want to achieve over the next three years and the approach that we will take to deliver better outcomes for people, and to build a stronger, more sustainable future for health and social care in Fife. The Strategic Plan 2026-2029, along with supporting documentation, was approved by the Integration Joint Board on 25th March 2026.

Our strategic priorities over the next three years are:

Prevention: People in Fife have the knowledge, support and confidence to live healthier, more independent lives for longer.

Communities: Work together with communities and our partners to support people, carers, and families to enjoy fulfilling, healthy, independent lives, with joined-up care that promotes wellbeing and connection.

Digital: Inclusive and innovative digital care that enhances wellbeing, independence, and connection.

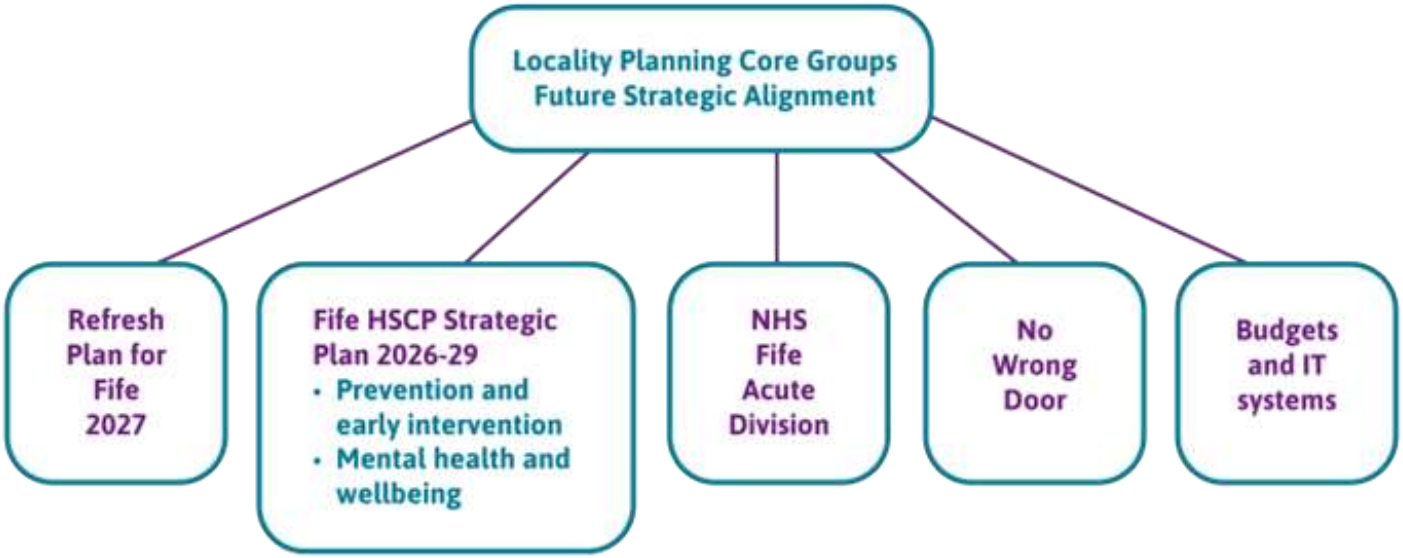
The Partnership's Annual Performance Report for 2026 to 2027 will provide an update on these new strategic priorities in July 2027.

The Strategic Plan for Fife 2026 to 2029, along with the Delivery Plans and the Annual Reports for 2023 to 2026, are all available on our website here: www.fifehealthandsocialcare.org/about-us/publications/

Locality Planning

Locality planning is more than a statutory requirement, it is a powerful way to bring communities, partners, and services together to create the conditions for true integration. Our Locality Priorities and Delivery Plans are not just about meeting targets; they are about delivering meaningful outcomes that improve lives across Fife.

The Public Bodies (Joint Working) (Scotland) Act 2014 provide a framework for an integrated health and social care, and in Fife, we have embraced this vision by establishing seven locality groups aligned to Fife Council's local area committees. These groups are the driving force behind a collaborative approach that ensures decisions are made where they matter most close to the people and communities we serve.



For more information please contact: hscplocalityplanning@fife.gov.uk.

These are some of the areas of work progressed by locality planning groups during 2025 to 2026.

You can find more details for each locality in our Locality Planning Sway here: https://sway.cloud.microsoft/rQT4ou6BjlsjODSD?ref=email

Locality Planning Event

The Health and Social Care Partnership's Locality Planning Event, held on 15th January 2026, brought together more than 110 delegates from across Fife's public, voluntary and community sectors to strengthen collective understanding of locality planning and its contribution to improved health and wellbeing outcomes. Representatives from NHS Fife, Fife Council, Public Health Scotland, Police Scotland, the third sector, university partners and community organisations attended, reflecting the breadth of collaborative commitment across the system.

The event focused on key themes aligned to the Partnership's Strategic Plan, including prevention, community-based support and digital inclusion. Discussions highlighted shared priorities such as strengthening early intervention, improving support for unpaid carers, enhancing community capacity and reducing siloed working. Delegates also emphasised the need for more integrated digital systems, simplified access pathways and expanded 'no wrong door' models to ensure citizens receive timely, coordinated support. Feedback indicated a significant increase in participants' understanding of locality planning and a renewed confidence in how they can actively contribute to this agenda.

Overall, the event was viewed as highly successful, providing valuable opportunities for networking, learning and cross-sector engagement. Presenters highlighted innovative local initiatives, while facilitated discussions enabled practical reflection on how to embed collaborative, place-based approaches across Fife's seven localities. The strong participation and positive feedback demonstrate the continuing appetite for integrated working and the shared ambition to improve outcomes for communities across Fife.

Awards and Achievements

Scottish Digital Health and Care Awards

Fife Council and Totalmobile won the Technology Enabled Independent Living Award for their initiative, *Delivering Safer and More Independent Living Through Technology*, which highlights how Care at Home Services have been transformed using Totalmobile's Field First platform and the Carelink solution.

Professional Achievement

Community Nursing Long Service Award being presented to Christine Burrows, Practice Nurse (Long term conditions) based at Glenwood Health Centre.

Royal Caledonian Horticultural Society - Dr Andrew Duncan Medal

Peter Sinclair, Occupational Therapist and Garden Lead in our Adult Mental Health Services, was awarded the Dr Andrew Duncan Medal by the Royal Caledonian Horticultural Society. This prestigious award recognises outstanding and distinguished service to horticulture.

NHS Fife 2025 Staff Awards

Community Health Champion – School Nursing Team

NHS Fife 2025 Staff Awards

Outstanding Contribution

Helen Skinner (Dementia Nurse Consultant)

Inspiration Award

Jamie Hinley (Senior Charge Nurse, Ward 1 – Queen Margaret Hospital)

NHS Fife 2025 Staff Awards

Chair's Award – Janet Thomas (Occupational Therapy/Physiotherapy Team Lead)

Equality Outcomes

Fife Health and Social Care Partnership is committed to promoting dignity, equality and independence for the people of Fife. As part of the development work for our Strategic Plan, we reviewed and updated our equality outcomes. These are our equality outcomes for 2023 to 2026.

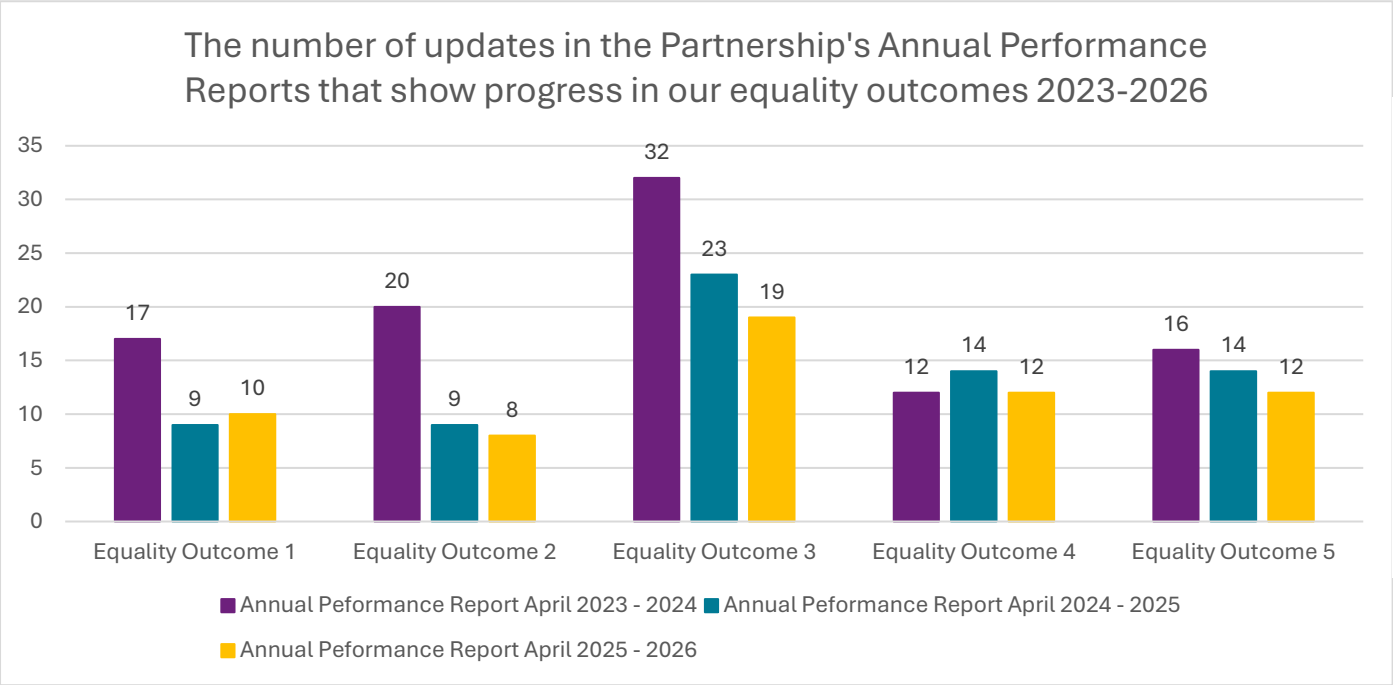
1. Improved collection and use of equality data, including protected characteristics, to support service planning and delivery, and promote mainstreaming of equality rights.
2. Individuals with lived experience of inequality and exclusion will have more opportunities to get involved and share their views, concerns, and suggestions for improvement across the Partnership.
3. Increased collaboration with communities and partners that have experience and expertise working with groups that have a protected characteristic, leading to improved health outcomes for individuals, their families and carers.
4. Greater diversity and an inclusive workforce culture, with employees from all backgrounds and cultures reporting that they feel increasingly valued.
5. Improved understanding and better relations between individuals and groups who share a protected characteristic, and those who do not.

In April 2023, Fife Integration Joint Board approved and published its 'Mainstreaming the Equality Duty and Equality Outcomes Progress Report' in accordance with the Equality Act 2010. This report included the new equality outcomes as part of the Strategic Plan 2023 to 2026. To continue to meet the obligations of the Act, the Integration Joint Board must comply with a number of specific duties including:

- Publish a report on the mainstreaming the equality duty at least every two years.
- Publish a report on the progress made to achieve the equality outcomes at least every two years.

Fife Integration Joint Board published a new 'Mainstreaming the Equality Duty and Equality Outcomes Progress Report' in January 2025. This includes updates on the progress made towards achieving the equality outcomes listed above. The full document is available here: https://www.fifehealthandsocialcare.org/about-us/publications/

Many of the updates in the Partnership's Annual Performance Reports are linked to the implementation of the Partnership's equality outcomes. This graph highlights the number of updates that support each equality outcome over the last three years. Some updates support more than one equality outcome.



Fife Health and Social Care Partnership have a dedicated area for equalities on our website where you can find lots of information about equalities, including our published Equality Impact Assessments, as well as information about equality, diversity and inclusion.

This is a link to the webpage: https://www.fifehealthandsocialcare.org/about-us/equalities/

Our Performance

This section of the Annual Performance Report provides an assessment of our performance over the last year in relation to the National Health and Wellbeing Outcomes for Health and Social Care. Further information on the national health and wellbeing outcomes is available here: **www.gov.scot/publications/national-health-wellbeing-outcomes-framework**

In this report, each of the nine national outcomes is linked to the relevant national integration indicator(s) and includes Fife's performance information for the financial years 2024-2025, and 2025-2026. The national integration indicators are reported in the Scottish Health and Care Experience (HACE) Survey commissioned by the Scottish Government. The Survey is run every two years and is sent out by post to a random sample of people who are registered with a General Practitioner (GP) in Scotland. It asks people about their experiences of accessing and using health and social care services. The information collected enables comparisons with different health and social care partnerships across Scotland, and across different years. The information provided in this report is from the 2026 HACE Survey.

For some national integration indicators, calendar year 2025 is used as a proxy for 2025-2026 due to the national data for 2025-2026 being incomplete. We have done this following guidance issued by Public Health Scotland which was communicated to all health and social care partnerships. Using the more complete calendar year data for 2025 improves the consistency of reporting between different health and social care partnerships. Further information on the national integration indicators, including Fife's performance over the last five years is included in Appendix 3.

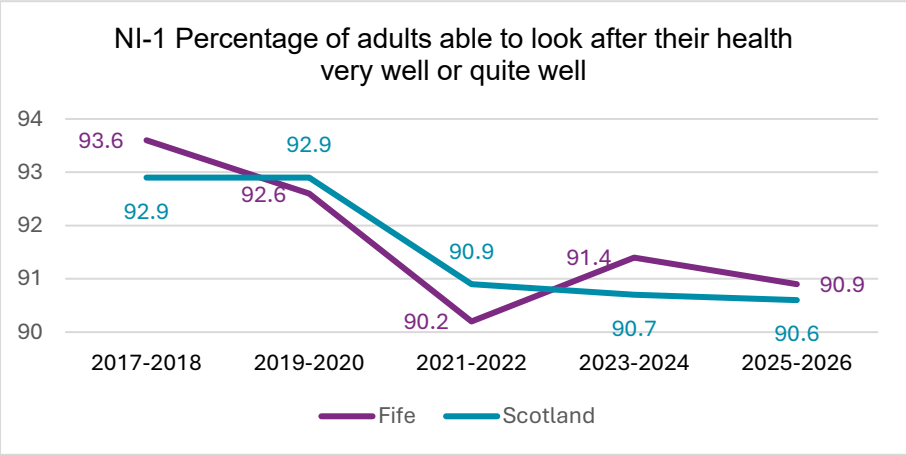
In this report, the performance information for each outcome is supported with local examples and updates on our key activities and achievements over the last year. Some of these updates may be relevant to more than one outcome, they have been grouped under the most relevant national outcome.

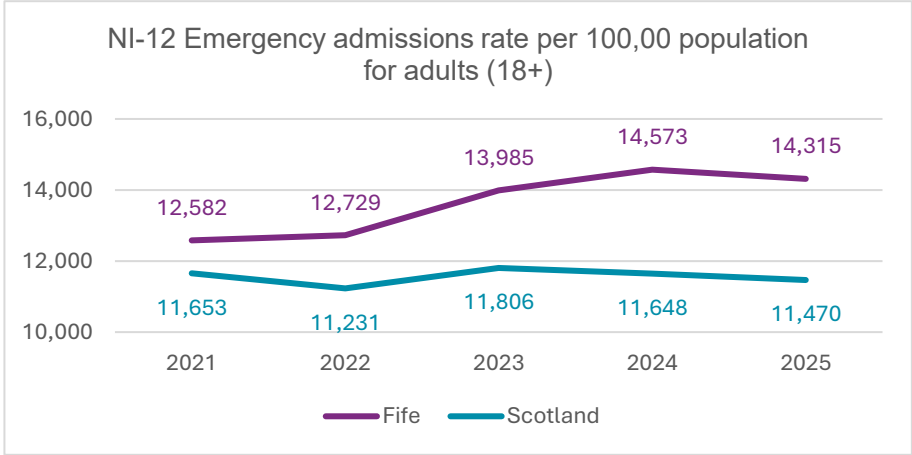
Outcome 1: Health and wellbeing are improved

People are able to look after and improve their own health and wellbeing and live in good health for longer.

Indicator	Title	Latest Data	Fife	Scotland
NI - 1	Percentage of adults able to look after their health very well or quite well.	2025-2026	90.9%	90.6%
NI - 11	Premature Mortality Rate per 100,000 persons.	2024	434	426
NI - 12	Emergency admission rate (per 100,000 population).	2025	14,315	11,470

NI-1: In Fife, the percentage of adults able to look after their own health increased during 2023-2024 (to 91.4%). Although this dropped slightly during 2025-2026 to 90.9%, this is still higher than the Scotland rate of 90.6%.





NI-12: Fife has a consistently higher rate than Scotland for emergency admissions. The rate has generally been increasing if Fife in recent years, however recent data (2025) shows that the number of emergency admissions per 100,00 in Fife has reduced slightly to 14,315.

1. Feed Your Mind Podcast – ‘Snack Smart, Feel Better’

> Discover how what you eat can lift your mood and boost your wellbeing. The goal is to provide you with the knowledge, skills, confidence and motivation to make and choose healthier more sustainable snacks.

In support of the Snack-tember initiative led by the British Nutrition Foundation, the Nutrition and Dietetics Service worked in partnership with the Health Promotion Service to develop, deliver and promote a dedicated add-on episode to the existing Feed Your Mind podcast series.

The Feed Your Mind podcast aims to highlight food as a key contributor to overall wellbeing and mental health, providing accessible, evidence-based nutrition messages to the population of Fife. Building on this established digital resource, the Snack-tember episode focused specifically on the links between sustainability, wellbeing and healthier snack choices, supporting people to make informed and practical food decisions that align with both personal and planetary health.

This work demonstrates effective integration between Dietetics and Health Promotion, maximising reach by embedding new content within an existing, trusted platform rather than creating a standalone resource. It also supports NHS Fife priorities around digital transformation, prevention, and public mental wellbeing, with potential for future collaborative episodes to be developed using the same model.

The podcast episode was promoted via NHS Fife communication channels and signposted to relevant food and health resources through the NHS Fife website: https://www.nhsfife.org/services/all-services/nutrition-and-clinical-dietetics/feed-your-mind-podcast/

2. North East Fife Tackling Loneliness Test of Change and Fife Wide Campaign

In February 2026, the *Small Steps to Connect* Loneliness Campaign was launched as part of a North East Fife Test of Change (TOC). The campaign sought to build on existing local efforts to address health inequalities and mitigate the growing public health risks associated with social isolation and loneliness. The TOC commenced in August 2025, with the formal campaign launch aligning with *Time to Talk Day* on 5 February 2026 - a national anti-stigma campaign led by See Me - reinforcing the importance of open conversations about mental health and wellbeing.

Loneliness is a common and deeply human experience that can affect people at any stage of life and arises from a wide range of circumstances. It often reflects a mismatch between the connections we have and those we need or desire. Loneliness can impact confidence, wellbeing and our ability to reach out to others. While widely experienced, loneliness can be difficult to acknowledge or discuss due to stigma. Prolonged loneliness is associated with significant impacts on both physical and mental health, including reduced wellbeing, diminished confidence, and increased risk of longer-term health conditions.

Although aspects of loneliness are addressed implicitly through community development and mental health supports, it is rarely discussed explicitly. Stigma can prevent individuals from acknowledging their experiences or seeking support. The TOC and associated campaign therefore aimed to increase visibility, reduce stigma, and create safe opportunities for people to recognise and respond to loneliness through small but meaningful steps to connect.

The campaign sought to contribute to change at three interconnected levels:

Individual level	**Community level**	**System level**
• Increased awareness of the impact of loneliness on health and wellbeing. • Reduced stigma in talking about loneliness. • Greater confidence to initiate connection • Improved knowledge of local. opportunities for connection and support.	• Increased community group capacity to host and facilitate conversations. • Greater visibility of local activities and community assets. • Increased reach locally to those affected by loneliness.	• Improved collaboration across local partners. • Earlier identification and signposting. • Contribution to a more preventative mental health and wellbeing model of care.

The Test of Change and associated campaign were designed as a front-line, light-touch, low-cost intervention within North East Fife, with potential for wider promotion across Fife.

Phase One: Test of Change – Local awareness session delivery

The working group delivered four awareness sessions with a range of local community groups and teams within North East Fife. Engagement with these groups supported refinement of the awareness session and accompanying materials to ensure they were locally relevant and accessible. Groups were consulted regarding the proposed session content and agreed to a facilitated session within their own settings. Participating groups included:

- Cupar Youth Group, YMCA
- Cupar Community Café, Fife Council CLD
- St Andrews Carers Group, Fife Carers
- Balmullo Carers Community Cafe

Each session incorporated a short presentation, facilitated group discussion and a call to action through a 'pledge' to take small steps to tackle loneliness. Feedback and reflections were gathered from group leads and participants to inform evaluation of the TOC and shape the subsequent campaign phase.

Interaction with the sessions was positive, engagement with the webpage pledges has been encouraging. Overall, the evaluation and reflections on the TOC indicate that participants not only understood and engaged with the topic, but also demonstrated a clear appetite for open and honest discussion about loneliness.

Across the four awareness sessions, 37 pledges were collected.

Examples include:

- Speaking to neighbours or other dog walkers.
- Reaching out to quiet or isolated people.
- Making more time for friends.
- Attending community groups regularly and encouraging others to participate.
- Showing kindness to oneself.

Phase Two: Campaign Launch

Learning and materials developed during Phase One were used to design a webpage and social media content: https://www.fifehealthandsocialcare.org/news-updates/news/2026/02/small-steps-to-connect-together-we-can-tackle-loneliness/

The webpage incorporates an interactive element, encouraging individuals and organisations to make a public 'pledge' to support action on loneliness. Pledge engagement provides both qualitative insights and web-based analytics to inform evaluation. The pledges have been published to showcase involvement and encourage wider participation.

Individual level	Community level	System level
• Increased awareness and understanding of the impact of loneliness. • Creation of psychologically safe spaces for open discussion. • Reduction in stigma through normalised conversation. • Translation of discussion points into practical, self-directed pledges.	• Demonstrated willingness and eagerness of groups to engage with structured conversations about loneliness. • Strengthened collaboration across locality partners. • Development of a scalable self-delivery pack and downloadable resource. • Establishment of a public-facing webpage to extend reach beyond facilitated sessions.	• Improved cross partner collaboration within the NEF locality. • Highlighted opportunities for early intervention, prevention and clearer signposting. • Highlighted potential to strengthen links between community assets and statutory services.

Interaction with the sessions was positive, engagement with the webpage pledges has been encouraging. Overall, the evaluation and reflections on the TOC indicate that participants not only understood and engaged with the topic, but also demonstrated a clear appetite for open and honest discussion about loneliness. Within first two weeks of the webpage launch, 13 online pledges were received. Examples include:

- Checking in on neighbours.
- Making an effort to talk to more people in everyday settings.
- Making eye contact and initiating friendly conversation.
- Offering a chat to people when out and about.

3. Health Promotion Wellbeing Toolkit Programme: Two-year evaluation 2025-2026

The Health Promotion Service completed a detailed review and evaluation on the effectiveness and value placed on the Wellbeing Toolkit resources and webpages. The Wellbeing Toolkit was launched in 2023 (as part of Mental Health Awareness Week), which has provided two years of data, user feedback and project work to analyse.

The purpose of the Wellbeing Toolkit is to provide self-care support to help individuals manage their mental health and wellbeing using a range of practical, evidence-based tools, models and resources. The hard copy and webpages provide all relevant information to support wellbeing in one place.

The two-year evaluation provided an opportunity to understand the value placed on the resource from organisations point of view and a public point of view.

The data analysis showcased that the Wellbeing Toolkit has supported individuals gain the confidence to access services independently, fostering self-worth and self-reliance. The evaluation demonstrates that people are reflecting on their own wellbeing, discussing it with family and friends, sharing the resource, and supporting each other to build resilience. In turn, these actions help enhance societal awareness of mental health, aligning with strategic goals to reduce stigma and promote equality.

To celebrate the success of the Wellbeing Toolkit and to plan the next delivery plan:

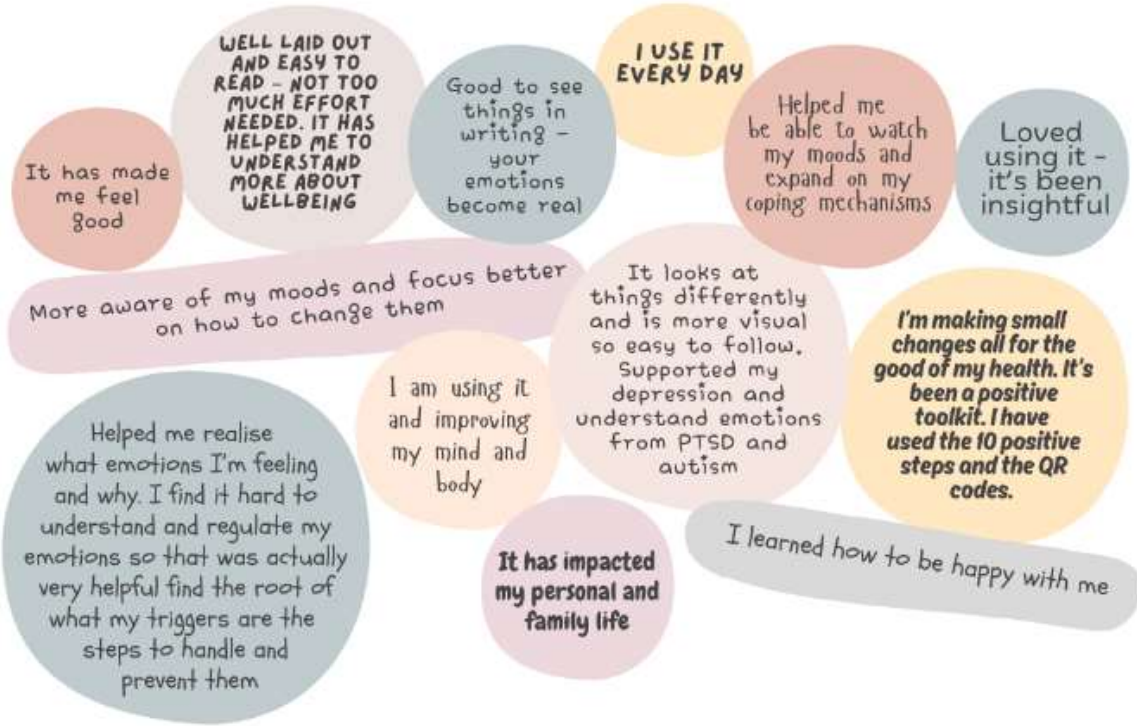
1. A workshop was designed to invite those who had ordered and issued the Wellbeing Toolkit between 2023 and 2025 to review the Wellbeing Toolkits journey, its impact, its future direction and engage participants in discussions on improving content, accessibility, and usage across Fife.
2. A consultation activity supported by the FVA lived experience team and members of the public who self-ordered the Wellbeing Toolkit was designed to gather wider thoughts and suggestions on improving content, accessibility, and usage across Fife.

These activities have supported the updated design and content of the Wellbeing Toolkit, which will be relaunched in April 2026.

The Success in Numbers

The two-year data analysis demonstrated that, as of March 2026, there have been 6000 hard copies of the Wellbeing Toolkits issued as part of a supported conversation with a practitioner. Over 110 practitioners have placed orders to use within 70 different public and third sector organisations and services, including:

- Maternity Services
- Children and Young People Services
- Employability Services
- Befriending Services
- Stop Smoking Service
- Community Development
- Adult Basic Education (ESOL)
- Social Work Services
- Education
- Criminal Justice Service
- Young Carers



Analysis shows that health and social care services in all localities are issuing the Wellbeing Toolkit. The majority of evaluation forms were returned from women (87%) aged 40-59 (52%) with Glenrothes (26%) being the highest returning locality.

This diagram on the right shows some of the feedback received.

You can find more information here: https://www.nhsfife.org/services/all-services/health-promotion-service/mental-health-improvement/wellbeing-toolkit/

4. Fife Whole Family Wellbeing Multi-Agency Sleep Project

The Whole Family Wellbeing (WFW) Multi-Agency Sleep Project is a Fife-wide early-intervention workforce development initiative designed to improve outcomes for children, young people and families experiencing sleep difficulties through a whole-system, preventative approach.

During 2025–2026, the project achieved substantial progress against its objectives and delivered several areas of good practice, including:

- Establishment and leadership of a multi-agency stakeholder group, meeting fortnightly to drive delivery, supported by regular coordination meetings with Sleep Action.
- Delivery of Sleep Awareness training to 392 staff across NHS, education, social work and third sector services, significantly increasing workforce reach and capacity.
- Completion of Sleep Counsellor training (12 staff) by November 2025, strengthening specialist and targeted sleep support for children, young people and families, particularly those with additional needs.
- Successful implementation of a whole-system workforce development approach, reinforcing the message that *'sleep is everyone's business.'*
- Demonstrable improvements in staff confidence, knowledge and skills, evidenced through pre- and post-training evaluation data.
- Strong qualitative impact evidenced through family and practitioner feedback, highlighting improvements in children's sleep routines, parental wellbeing, practitioner confidence and partnership working.
- Strengthened multi-agency collaboration, with partners reporting high levels of satisfaction with coordination, communication and shared purpose.
- Development of clear sustainability and legacy intentions, including plans for networks, refresher training, resources and integration into wider health promotion activity.

Evaluation evidence demonstrates marked improvements in workforce confidence, knowledge and skills, alongside positive feedback from families and practitioners, highlighting improved sleep routines, parental wellbeing and partnership working.

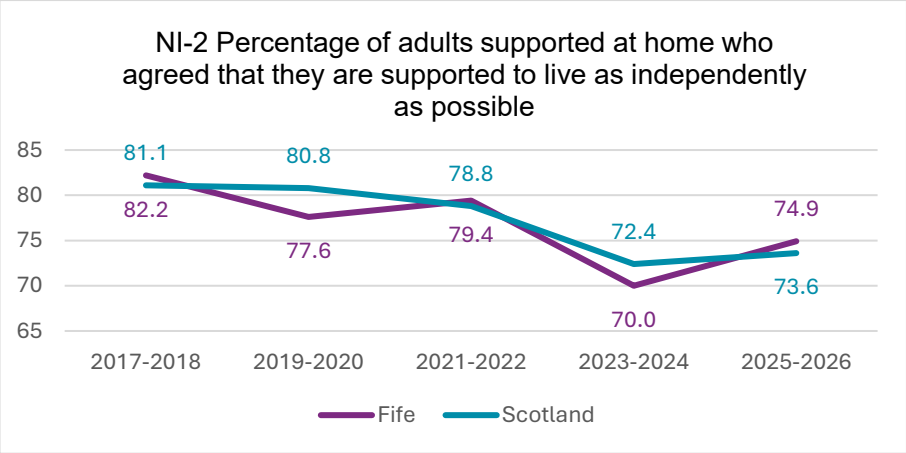
Overall, the project demonstrates how targeted Whole Family Wellbeing investment can deliver measurable workforce change, improved early intervention capacity and positive outcomes for children and families, while also generating valuable learning for future system-wide initiatives.

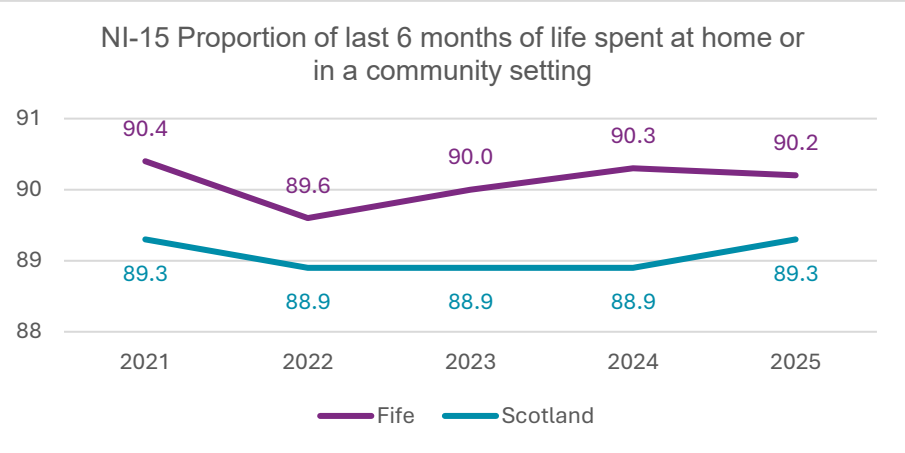
Outcome 2: Living in the community for longer

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.

Indicator	Title	Latest Data	Fife	Scotland
NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible.	2025-2026	74.9%	73.6%
NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided.	2025-2026	61.3%	63.9%
NI - 15	Proportion of last 6 months of life spent at home or in a community setting.	2025	90.2%	89.3%

NI-2: Fife's rate (74.9%) has improved since 2023-2024 and is now slightly higher than Scotland (73.6%).





NI-15: Both Fife and Scotland are very similar for percentage of last 6 months of life spent at home or in a community setting. For the most recent data, (2025) Fife is slightly higher than Scotland (90.2% and 89.3% respectively).

5. Community Led Support Service

Community Led Support (CLS) provides early intervention, holistic, non-clinical support using a 'good conversation' approach. By focusing on the social factors that impact health, such as loneliness, housing challenges, and financial pressures, CLS helps people access the right support at the right time, preventing issues from escalating and easing pressure on statutory services. The service is delivered by Link Workers, who work alongside people to understand what matters to them and connect them to the most appropriate community-based support.

The model brings together The Well, Improving the Cancer Journey, and Link Life Fife, offering a seamless continuum of support for adults across Fife. Together, these services strengthen prevention, early intervention, and longer-term wellbeing, helping people stay independent and connected within their communities.

Community Led Support is built on strong cross-sector collaboration, working closely with primary and secondary care, social work and social care, and a wide range of third-sector, independent, and community organisations. This joined up approach reduces duplication, improves access, and ensures people receive timely, appropriate support. CLS also plays an active role in Fife Council's No Wrong Door initiative by contributing to the Triage Test Site, ensuring individuals are linked quickly and effectively to the right support through integrated early intervention and prevention.

The CLS Service continues to show measurable impact across Fife, improving outcomes for individuals, reducing pressure on statutory services, and aligning strongly with national and local health and social care priorities. With its emphasis on collaboration, prevention, and sustainability, CLS is well-placed to continue expanding its reach and supporting the strategic shift toward community-based support.

Further information is available on our website here: https://www.fifehealthandsocialcare.org/your-community

In 2025-2026 a total of 6074 referrals were received (this is a 24% increase from 2024-2025) with 5795 people supported across Community Led Support.

CollaboRATE - Meeting the needs of those accessing the service

Monitoring and evaluating the Community Led Support service continues to be essential in shaping our service and workforce development and ensuring we provide support that truly meets people's needs. Since the introduction of the evidence-based tool CollaboRATE in 2024, it has now become fully embedded in everyday practice. CollaboRATE enables us to measure the quality of shared decision-making during interactions between Link Workers and the people accessing the service.

The tool comprises three core questions - Understand, Listen and Include- with a maximum combined score of 27. During 2025, Community Led Support received 258 completed responses, an increase of 170 (193%!) from the previous year. The average score achieved was 25, demonstrating that people engaging with the service continue to feel heard, involved, and included in decisions about their support.

CollaboRATE also offers an important opportunity for individuals to provide additional feedback, which further enhances learning and contributes to ongoing service improvement. These are some examples of the feedback received.

'I had been really stressed about my health and finances but after the support from Improving Cancer Journey, I feel things are on an even keel. Thank you'.

'Link Worker was very good and gave me lots of options and having the follow ups was really good. I was listened to and to have an outside perspective which helps, so I was not feeling like I was overthinking'.

'Link Worker got me in touch with SAMH, I had found it difficult to access a lot of services. The Link Worker was marvellous and very patient and got back to me right away with the information. Someone who can gather information for you and explain what the service was about and if I would like a referral, it was just great'.

6. Empowering People With Diabetes: Podiatry Leads Community Foot Health Events Across Fife

Last year, the Podiatry Service launched a new series of community-based events designed to support people living with diabetes who have been identified as having a moderate risk foot score. With two successful events already delivered—first in Cowdenbeath and most recently in Levenmouth—plans are now underway to roll out these sessions across Fife on a recurring basis.

Why Focus on Moderate-Risk Foot Health?

National guidance emphasises the importance of diabetic foot surveillance, ensuring that people receive personalised foot-health advice aimed at preventing ulceration and reducing the risk of amputation. However, recent reviews identified challenges, including low engagement and high 'Did-Not-Attend' (DNA) rates at surveillance appointments. For over 2,000 people in Fife identified as moderate risk, a new approach was needed to better support understanding, self-management, and access to care.

Benefits of a Multidisciplinary Healthcare Presence

A key strength of these community events has been the involvement of a wide range of healthcare professionals, creating a truly holistic approach to diabetes care. The presence of services such as Retinopathy Screening, Diabetes Specialist Nursing, Smoking Cessation, Dietetics, and Active Options enables attendees to receive comprehensive, joined-up advice in a single setting. This multidisciplinary input reinforces the interconnected nature of diabetes management—highlighting how foot health, eye health, blood glucose control, nutrition, smoking behaviours, and physical activity collectively influence overall wellbeing and long-term outcomes.

By engaging with multiple professionals at once, individuals gain a clearer understanding of how different lifestyle and clinical factors contribute to their personal diabetes risk. This supports earlier behaviour change, strengthens preventative strategies, and promotes consistency of messaging across disciplines. It also helps identify unmet needs, improves referral pathways, and encourages people to take proactive steps before problems escalate—ultimately reducing pressure on acute services and improving patient safety.

Carers and family members benefit too, gaining confidence in supporting across different aspects of diabetes self-management. This whole-person, whole-system approach is essential in reducing the risk of complications and ensuring individuals feel supported beyond foot care alone.

Event 1: Cowdenbeath—Laying the Foundations

Using the Diabetes Database, 220 moderate-risk individuals within the Cowdenbeath locality were identified and invited to the first event at the Benarty Centre. Around 34 people attended, rising to 55 including carers and family members. A range of health professionals supported the event, including Retinopathy Screening, Diabetes Specialist Nursing, Smoking Cessation, Dietetics, and Active Options.

Questionnaire results showed significant improvements in knowledge and confidence, including increased understanding of neuropathy, poor circulation, hyperglycaemia impacts, and—most notably—who to contact for a foot health concern, rising from 34.5% to 89%.

Event 2: Levenmouth—Growing Momentum

The second community event, delivered in Leven, exceeded expectations with high attendance and overwhelmingly positive feedback. Questionnaire findings will be published once collated.

Building a Staged, Sustainable Approach

Together, these developments support a broader model of diabetic foot care across Fife, including low-risk screening via CTAC, moderate-risk community engagement, and opportunistic surveillance for high-risk groups.

Looking Ahead

By taking these events into local communities, the Podiatry Service is empowering more people with diabetes to feel informed, confident, and proactive in managing their foot health—and strengthening preventative care for years to come.

7. Distress Brief Intervention (DBI) Project

The Distress Brief Intervention Service (DBI) is making a difference to people in distress across Fife. DBI is provided by Scottish Action for Mental Health (SAMH) on behalf of the Fife Health and Social Care Partnership, it is a mental health service that provides two weeks of immediate, compassionate support to people in distress.

The DBI Project was completed with the service rolled out across all localities. A Business Case demonstrated excellent evaluation of the service and secured long term funding to sustain and embed the service into business as usual. Frontline colleagues, such as Primary Care teams, Police Scotland and the Scottish Ambulance Service, ease the distress of those they come into contact with through a compassionate person centred-approach and when appropriate, refer them to the additional support from the DBI Service provided by SAMH. The DBI service will then contact the person within 24 hours and, over the next two weeks, work closely with them. The person who has been referred receives support to complete a distress management plan, develop coping strategies, and establish connections with people and organisations within their local community.

Frontline staff who are trained feel more comfortable and confident in dealing with people in distress and can help provide initial distress reduction, meaning on occasions there may be no need for a referral to SAMH for further support.

DBI provides an early intervention strategy that can prevent distress from escalating. Without it, opportunities for early intervention will be missed, potentially leading to more severe mental health issues in the long term.

Those referred to the services experienced a reduction in their levels of distress with people supported stating:

> ‘By the time I finished working with DBI I was surprised that we had managed to get to the point we had. Although this issue I was having and causing me the stress couldn’t be fixed quickly, you helped me to find ways to cope with my stress and manage my ways of thinking. You also helped me to see things from different angles and perspectives and helped me to find solutions that could ease my stress. And I will also use the techniques and resources for any life stressors I experience from now on. So…from someone who in the beginning couldn’t see a way forward, I would definitely recommend trying this service as it definitely helped me!’

> ‘Working together to reach a goal left me feeling less isolated, gave me the opportunity to be challenged and to challenge my own thoughts. I was given feedback, and I felt appreciated and listened to.’

> ‘The biggest thing I have taken from the 2 weeks is how beneficial talking about my feelings and thoughts has been.’

‘I've realised there is no answer at the end of a wine bottle, but with support from DBI I have been able to find my answers.’

‘Calls with you really helped me put things into perspective when I needed it most.’

‘Every day I knew we had a session together; I got a boost of motivation.’

‘Knowing I can speak to someone away from my friends and family has removed pressure I was putting on myself that I didn't even realise. It has been a great release and knowing I am not dealing with my distress on my own.’

‘I have made more positive changes in the last 2 weeks working with DBI than I feel I have done with psychiatric help over the last 5 years.’

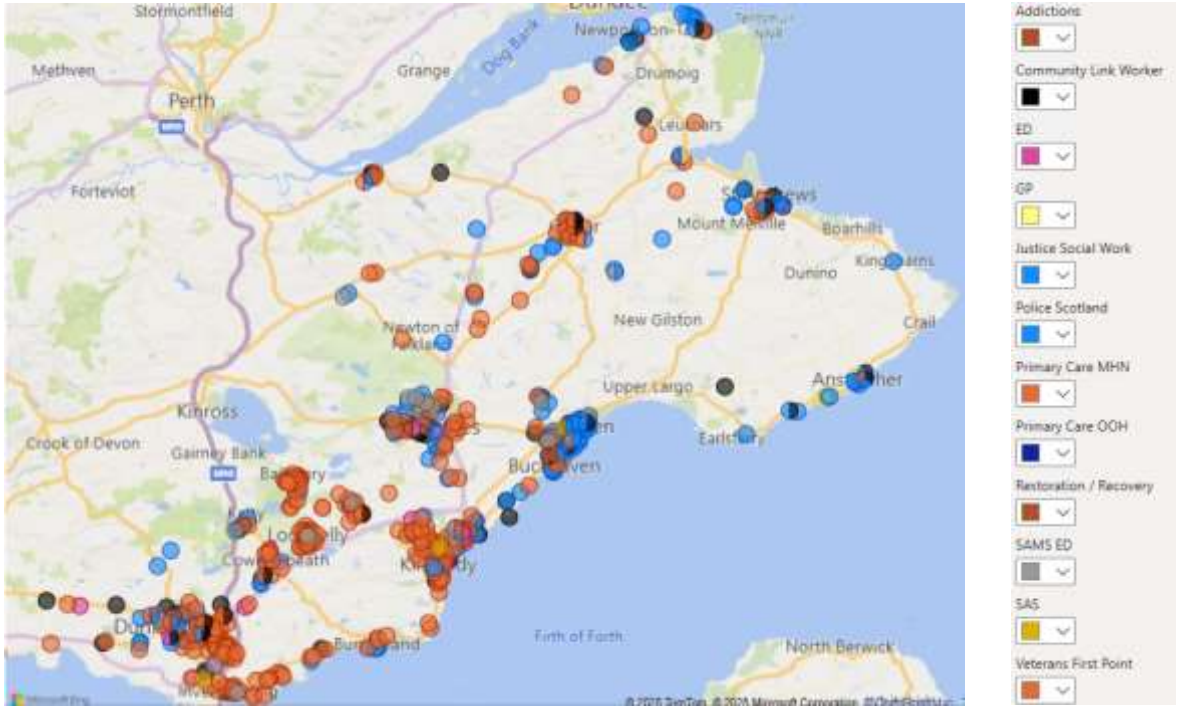
‘I can't believe how far I've come over the past 2 weeks; you are great at what you do, keep it up!’

DBI training has been rolled out to 83 frontline staff during 2025-2026 in local pathways throughout Fife by SAMH.

This map shows the locations of the service bases with staff trained to make referrals to the DBI service provided by SAMH.

During 2025-2026 there were 793 referrals were made to the SAMH DBI service.

The map below shows the locations of DBI referrals made to SAMH through local pathways.



These are some quotes from services who have referred people to DBI:

‘Excellent, rapid service.’

‘Quick response from the DBI Team. Patient benefited from DBI management plan and having a focus. A very good service reassured me that a swift response was being put in place for patients requiring this service.’

‘The patients quite often talk about the coping strategies and management plan which has been implemented and they benefit from this.’

‘I feel it is good how DBI can provide one to one consistent support to patients and feel I will continue to refer patients for intensive support.’

‘I have referred many patients to DBI because I feel that the service offers intensive support, establishes contact quickly-within 24 hours, plans the support with the patient, explores coping strategies and provides the patient a plan of their input which we also get a copy of and can recap on the strategies of needed. SAMH have been really helpful towards myself too, if ever I have had any queries or questions SAMH have always replied and it’s really good to have that contact.’

‘It is a great resource to be able to offer people who are often experiencing acute distress. I have referred people who have been assaulted, have witnessed distressing deaths or are experiencing acute life stressors. DBI feels like a really good bridge between immediate peer or professional support especially for those people for whom formal mental health support is neither appropriate nor available.’

8. Home First – Single Handed Care

Single Handed Care was part of the transformational work stemming from the Home First Strategy. The delivery had a person centre at its heart, which was fully integrated with a multi-disciplinary team approach to achieve and maintain optimal functionality, whilst ensuring better outcomes for the service users/patients and their family/carers. The main goal was to reduce, where appropriate, the number of double up packages of care by transitioning to Single Handed Care (SHC), supported by technical advances in moving and handling techniques and provision of specialised equipment.

Single Handed Care - Case Study 'Laura'

Laura's Background

- 78 years old, bed bound for a year with no transfers or mobilising, COPD (Chronic Obstructive Pulmonary Disease) and reduced muscle tone in legs.
- Package of care four times a day two carers attending to personal care, meals, continence management and medication prompts.
- Laura wished to be able to adjust her position in bed independently and possibly transfer from her bed to a wheeled chair.

Process

Linzi established with Laura, that her medication was delivered in a pharmacy filled Nomad, that she was able to easily recite medication times, and which medication she takes. Linzi assessed Laura's physical baseline ability by requesting certain movements from Laura, while she was still in bed and observing Laura carry these out. Laura was able to 'Bridge' her body. The strength of Laura's legs was measured by Linzi having Laura push against her hand with her foot. Laura was able to demonstrate Rolling onto her Side and On Side Hold both independently.

Linzi assisted Laura with preparing her working area, moving her over bed table, manoeuvring the wheelchair as close to where Laura would be sat. Verbally guided Laura in her profiling her bed to facilitate her sit on edge of bed, Linzi wished to allow Laura the independence, so rather than instructing her on how to move, she asked Laura to do in whatever way she felt was most natural. Linzi positioned herself, knelt directly facing Laura, as a reassurance against falling.

Outcome

- Laura agreed that she did not require Level 2 assistance from a Support Worker to manage her medication and indeed can medicate herself.
- Laura determined what she felt were her remaining needs that would still require support. Laura has reduced her package of care to twice a day with one carer supporting.
- Laura recognised herself there was no requirement for two carers to attend, through encouragement and minimal support along with practical demonstrations to maximise her own strengths and independence.
- Laura and her husband discussed the meal preparation component of her support which was to reduce carer stress, but this has not materialised and therefore they wish to remain independent with this.
- Laura has achieved her set goals of:
  1. Independent change of position and transferring into alternative seating - unlocking so much potential for Laura.
  2. Improving her skin integrity.
  3. Changing her position in bed and onto alternative seating independently.
  4. More natural and dignified management of her own continence.
  5. With the assistance of family/friends to go out to her garden, to visit family and friends, and to access her local community and beyond.

Overall, Single Handed Care was a successful project, achieving its main objective of reducing the number of packages of care or carers, whilst still delivering high quality and person centre tailored solutions for those service users who were deemed to be suitable following an enhanced assessment process.

'This has been a great experience. Working with you guys has been an absolute pleasure, the positivity and can-do attitude was what got us there. So, thank you.'

'Thank you everyone for including third sector organisations in the project as it has helped to open up discussions about training and techniques for carers and has been a stepping stone to continue discussions around SHC.'

You can find more information on Single Handed Care in this Sway 'The Right Care for You':
https://sway.cloud.microsoft/IFTJmicDXUg9hIlS?ref=Link&loc=mysways

This is a link to a video which was shared with Fife Integration Joint Board on 31st July 2025: https://www.youtube.com/watch?v=_AfzLoGLVPo

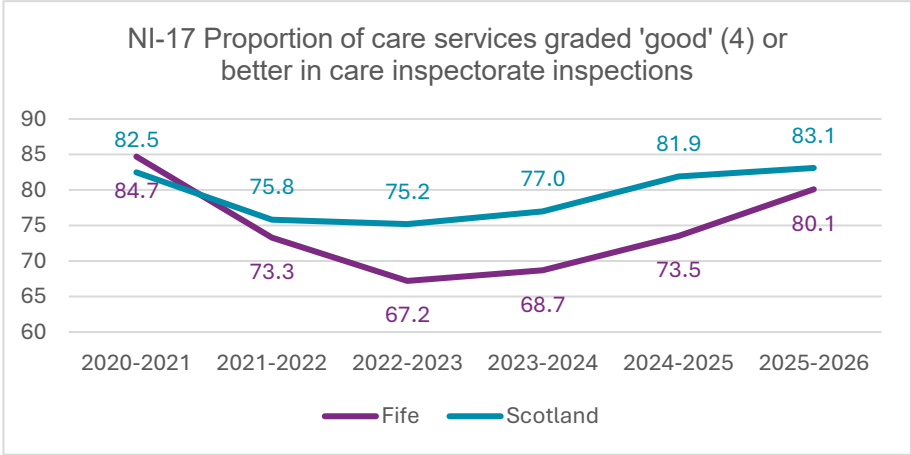
Outcome 3: Positive experiences of services

People who use health and social care services have positive experiences of those services, and have their dignity respected.

Indicator	Title	Latest Data	Fife	Scotland
NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated.	2025-2026	62.5%	65.0%
NI - 5	Total percentage of adults receiving any care or support who rated it as excellent or good.	2025-2026	64.8%	72.1%
NI - 6	Percentage of people with positive experience of the care provided by their GP practice.	2025-2026	67.1%	70.7%
NI - 17	Proportion of care services graded 'good' (4) or better in Care Inspectorate inspections.	2025-2026	80.1%	83.1%

NI-17: During 2022-202, both Scotland and Fife saw a drop in the percentage of care services rated good or better by the Care Inspectorate. Since then, figures have significantly improved, in 2025-2026 the Fife figure was 80.1% compared to Scotland at 83.1%.

Please note results for indicators 2, 3, 4, 5, 7 and 9 for 2023-2024 and 2025-2026 are not comparable to previous years due to changes in survey wording. Also results for 2019-2020 and 2021-2022 for indicators 2, 3, 4, 5, 7 and 9 are comparable to each other, but not directly comparable to figures in previous years due to changes in survey wording and methodology.



Further information on Care Inspectorate inspections across Fife is available on page 86 of this report.

9. Participation and Engagement

Over the past year, Fife Health and Social Care Partnership has worked to design and improve services around what matters most to people. We listened to the experiences of people who use services, unpaid carers, communities and staff across Fife, and used this insight to shape service improvements and inform longer-term planning. Between 1st April 2025 and 31st March 2026, we progressed 26 engagement projects. Eleven were completed and we are already helping to shape improvements, while fifteen are underway to inform future service and strategic planning.

These are highlights from the eleven completed engagement projects:

91 Engagement Sessions delivered

11 Online Sessions

80 Face-to-face Sessions

2,715 people have shared their views:

742 people attended face-to-face engagement sessions

48 people attended online engagement sessions

1,925 people responded to online surveys

51 people registered as members of Fife Wide Public Engagement Forum

The Forum offers a welcoming space for people to influence key work and to share feedback.

Key achievements this year

- The Participation and Engagement Team email network is for people who want to have a voice in issues that matter most to them across health and social care. By joining the network, members receive updates on live engagement opportunities, helping them to stay informed and take part in shaping service and decision in their community. Since April 2025, the email network has increased by 43%, with a membership of 468 people.
- Ongoing support for the Fife Carers Forum (led by Fife Carers Centre) is helping shape the new Adult Carer Support Plan and improving recognition of carers. Of the people we engaged with, 45% identified as unpaid carers, with 13 requesting an Adult Carer Support Plan, and 53 seeking information or support.
- Local voices, and community priorities, have actively shaped the development of the new Strategic Plan 2026-2029.
- Extensive feedback from over 300 people is informing Fife's Local Dementia Action Plan.
- Development of Fife's Bairns' Hoose, shaped by children and families, includes co-design of the vision, layout, and engagement frameworks to create a supportive, therapeutic environment.
- The Community Hospitals Transformation Programme gathered patient, staff and community insights to modernise rehabilitation pathways.
- The Patient Safety Oversight Group continues improving inpatient mental health safety through lived experience involvement.
- Feedback from over 1,200 people informed improvements to Urgent Care, especially around clarity of access routes and transport challenges.
- A six-month Test of Change in North East Fife explored access to mental health support, informing a new Mental Health and Wellbeing Strategy for Fife.
- Community Pharmacies gathered feedback from over 300 people, showing improved awareness of services and areas for better communication.
- Staff feedback is guiding updates to digital mental health resources Access Therapies Fife and Moodcafé.

Fife Wide Public Engagement Forum

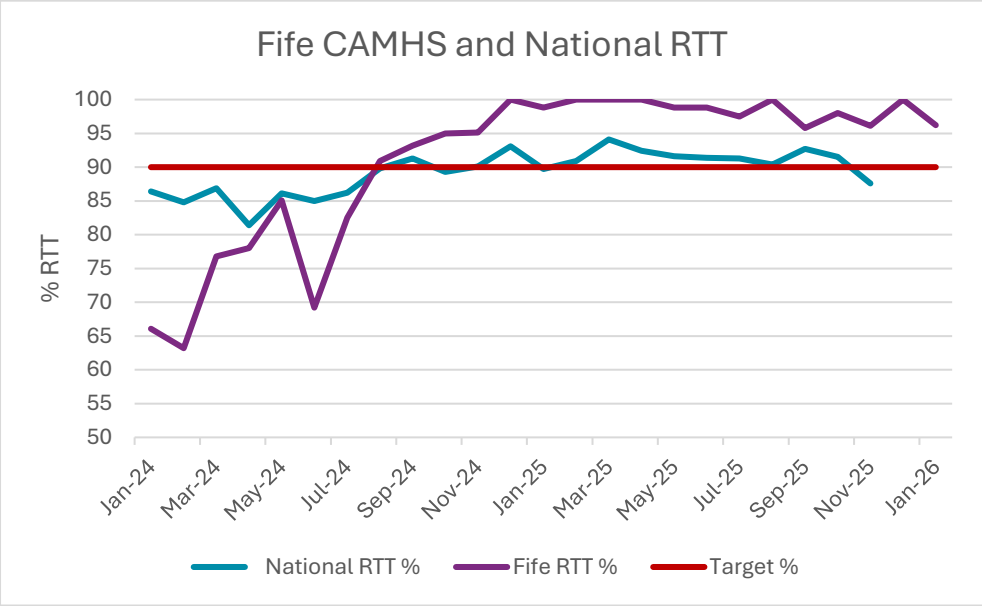
10. CAMHS Referral to Treatment Target (RTT)

Our main aim over the past year has been to sustain the Referral to Treatment (RTT) target whilst ensuring children and young people are seen as quickly as possible without compromising the quality of care. Fife Child and Adolescent Mental Health Service (CAMHS) has successfully achieved the Scottish Government RTT standard, with 90% of children and young people starting treatment within 18 weeks of referral, and has sustained this performance consistently since August 2024.

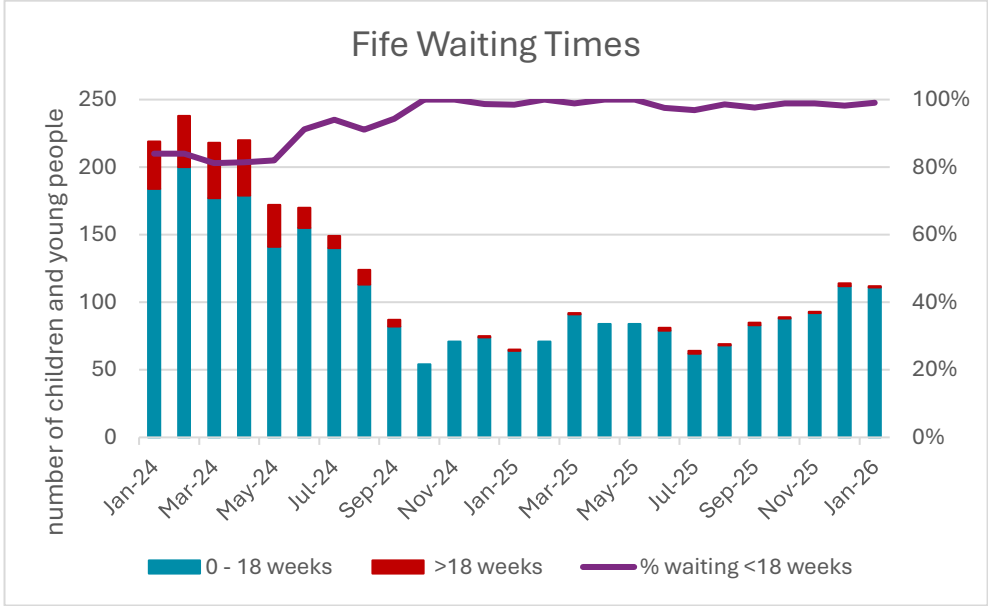
To reach and maintain this achievement, we have continued to build on previous initiatives and service improvements, including:

- Offering early morning and evening appointments to increase flexibility and reduce waiting times.
- Supporting families to attend appointments through telephone reminders and the offer of easy rescheduling where needed.
- Strengthening referral screening to ensure children and young people are directed to the right support at the right time.
- Providing clear signposting when CAMHS is not the most appropriate service.
- Offering a Primary Assessment of Need Appointment (PANA) when further assessment is needed to determine the best support.
- Supporting timely discharge so that new children and young people can access treatment without delay.
- Expanding training opportunities to maintain and grow clinical skills.
- Providing targeted support across teams, including Care Experienced Teams, to manage demand and clinical risk.
- Delivering early intervention training for the wider workforce to build confidence in managing distress and risk.
- Developing a parent/carer group programme to share strategies for supporting young people's mental health and wellbeing.

Our focus going forward is to continue meeting the Referral to Treatment Target over the long term, while delivering high quality, compassionate, and person-centred care that meets the needs of children, young people, and their families.



Fife CAMHS - Referral to Treatment Target



Fife CAMHS - Number of children and young people waiting for treatment

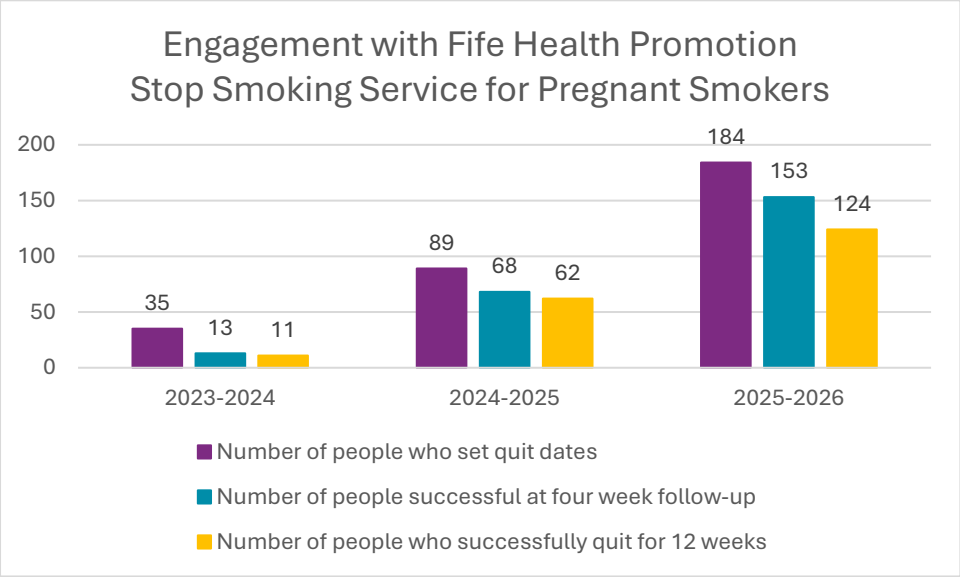
The waiting list for Fife Child and Adolescent Mental Health Service has reduced significantly since January 2024, with almost all children and young people waiting less than 18 weeks since June 2024.

11. Smoking Cessation - Maternity services support for pregnant smokers

Tobacco dependence during pregnancy poses significant risks to both mother and baby, including increased rates of stillbirth, preterm birth and low birth weight. Effective support to help pregnant women stop smoking is therefore essential.

Our work has been to increase engagement with pregnant smokers and support them through a stop smoking programme. This includes:

- **Specialist Advisors:** Dedicated staff provide personalised support tailored to the needs of pregnant women and their partners.
- **Quit Your Way Service:** A free, confidential, and specialised service offering support to stop smoking during pregnancy.
- **Convenient Support:** Offers phone support or in-home visits, allowing for flexible options that suit the user.
- **NRT Access:** Eligible individuals can receive vouchers for free nicotine replacement therapy (NRT) products, including patches, gum, and lozenges.
- **Family Support:** Support is extended to partners and other family members to create a smoke-free environment.
- **Referral Pathway:** Midwives can directly refer expectant mothers to the service, or people can self-refer by calling 0800 025 3000.



We have improved the successful quits of pregnant smokers from 62 in 2024-2025 to 124 in 2025-2026. This achievement has been possible due to the commitment and consistency of the specialist Smoking Cessation Team along with the collaborative work and support from Fife Maternity Services.

This project and ongoing work continue to identify opportunities to support pregnant smokers and maximise benefits for families in Fife.

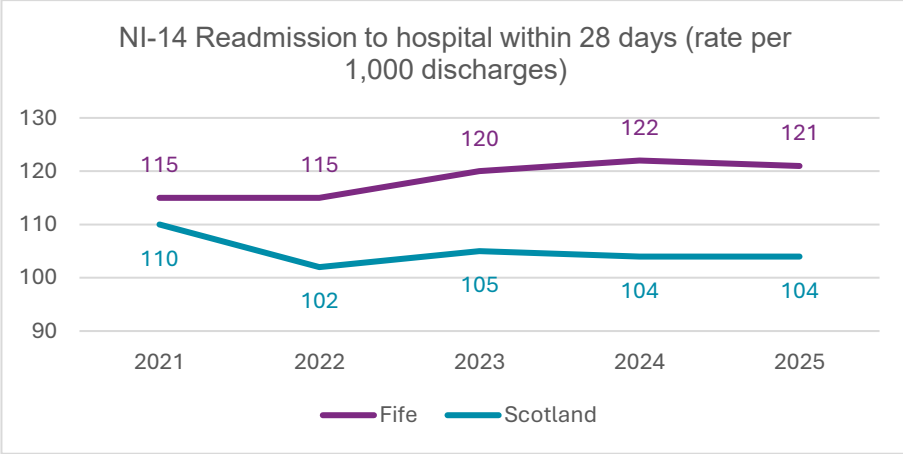
Further information is available here: https://www.nhsfife.org/services/all-services/health-promotion-service/stop-smoking-service/

Outcome 4: Quality of life is maintained and/or improved

Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.

Indicator	Title	Latest Data	Fife	Scotland
NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life.	2025-2026	68.2%	71.7%
NI - 14	Emergency readmissions to hospital within 28 days of discharge (rate per 1,000 discharges.	2025	121	104

NI-14: Fife has a consistently higher rate than Scotland for emergency readmissions within 28 days. The rate has decreased slightly in Fife during 2025 to 121 per 1,000 discharges. The Scotland rate has remained the same at 104.



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12. CAMHS ‘Things to try’ online self-help resources

The Child and Adolescent Mental Health Service (CAMHS) ‘Things to try’ web page brings together a wide range of resources to support the mental health and wellbeing of children and young people. It provides links to alternative services, practical tools, information and advice to support people with self-help. The resources are aimed at children and young people, parents and carers, and professionals.

The web page is organised into three sections:

- Apps (links to a range of apps to support with mental health and wellbeing),
- Online resources (links to other websites with resources and advice) and
- Self-help topics (pages written by CAMHS with information and support for specific mental health issues).

In February 2026, we have completed an update of the entire Self-help topics section.

The first stage of this work involved establishing which mental health topics are currently relevant - what are the areas of need. The Primary Mental Health Workers (PMHWs) in the CAMHS Early Intervention Service (EIS) looked at the presenting problems they see in their assessment appointments and at the issues being raised by professionals when they contact the EIS consultation line. There were 21 self-help topics identified.

Based on this background work, some topic pages were removed, some refreshed, and some new topics added. For each topic page, we have written a description and outline of the topic, and have researched other services and resources, to provide links to other sources of support and self-help. For 13 of the topics, we have also created new Sways, which contain more detailed information, strategies and advice on how to help children and young people with that topic.

This work has been completed with input from several teams in the service: CAMHS EIS, Dietetics, CAMHS Urgent Response Team, Core CAMHS and CAMHS Project Team.

A link to Things to try is sent out with opt-in letters, and Primary Mental Health Workers signpost families and professionals to these pages following appointments and consultations.

This is a link to the webpage: https://www.nhsfife.org/services/all-services/child-and-adolescent-mental-health-service-camhs/things-to-try/

13. Development and Implementation of a Neonatal Dietetic Service

Prior to the establishment of the Neonatal Dietetic Service, previous audits of growth in neonatal infants indicated catch up growth was delayed and occurred at around 12-18 months corrected age. Following the establishment of a neonatal inpatient/outpatient dietetic service, in 94% of infants, catch up growth was demonstrated at six months corrected age. This is a significant improvement which will contribute to future neurodevelopmental attainment.

The focus for the project in relation to Best Start was to standardise nutritional care for neonatal inpatients and outpatients throughout Fife. This involved developing nutritional protocols and guidance (for example, on the use of breastmilk fortifier and vitamin and iron supplementation) and contributing to a 'Once for Scotland' approach to documentation and guidance with the aim that all babies should receive the same level of care throughout Scotland.

Collaborative working with the Multidisciplinary Team (MDT) – including Community MDT, and Community Neonatal Liaison Nurses (CNLN) - has led to the earlier discharge home of some infants requiring nasogastric tube feeding and a team supportive approach to the establishment of breastfeeding. Targeted support and specialist advice is now provided to infants and families at the MDT high risk baby clinics and at neonatal dietetic clinics throughout Fife ensuring equity of access to services and improved quality of care. Nutritional care based on standard protocols and guidelines has resulted in improved consistency in various areas of practice including:

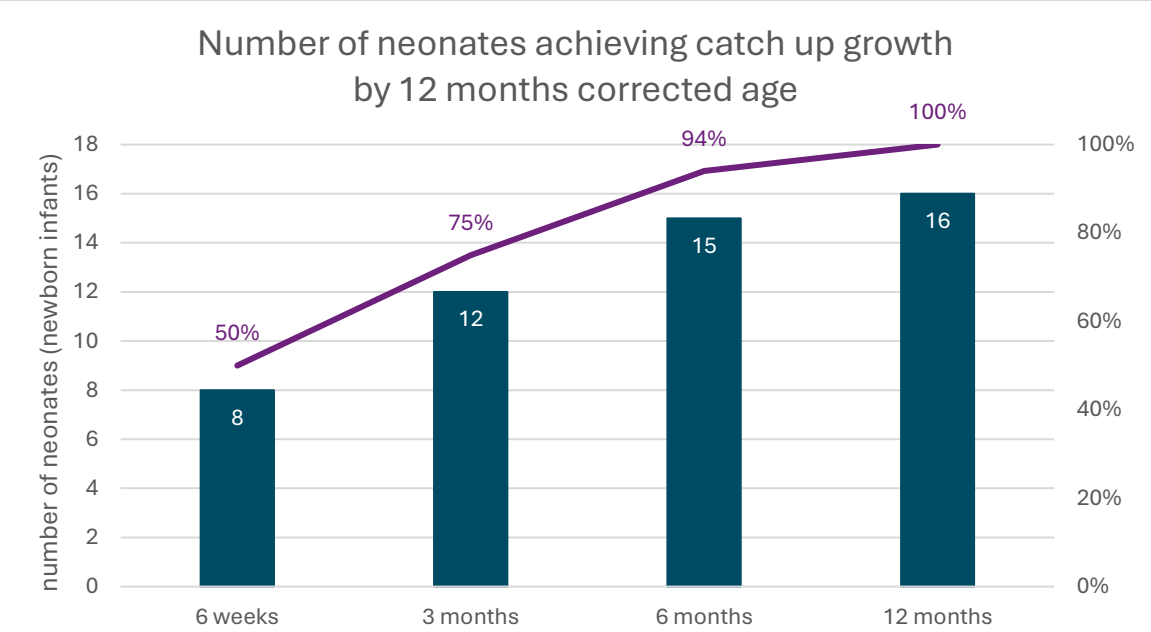
- anthropometric measurements
- enteral tube feeding progression
- use of breastmilk fortifier
- vitamin and iron supplementation
- and the management of metabolic bone disease.

Early nutritional intervention within neonatal care in Fife is now robust and proactive with the timely repatriation of infants from other centers which supports family centered care and prevents readmission for nutrition and/or growth-related issues.

Improved catch-up growth was seen during the project when the results were compared with earlier audit data on preterm babies discharged from the neonatal unit in Victoria Hospital, Kirkcaldy.

Consultant neonatologists and Community Neonatal Liaison Nurses, as well as parents and families have provided excellent feedback regarding the Neonatal Dietetic Service. Feedback highlights the overall improvements in nutritional care from the beginning of a neonate's journey through, if required, the high-risk baby clinic until they are two years corrected age. The Community Neonatal Liaison Nurses report feeling more supported and confident in providing nutritional care through regular meetings, patient specific discussions, and escalating issues as required with the neonatal dietitians.

Collaborative working with other professionals within neonatal care has hugely supported the success of this project.



Number of neonates achieving catch up growth by 12 months corrected age

14. Evaluation of Shockwave Therapy in managing foot/ankle conditions

Extracorporeal shockwave therapy (ESWT) is a widely used non-invasive treatment in orthopaedic and musculoskeletal (MSK) medicine. It is a valuable tool for promoting healing in soft tissue and bone. Radial shockwaves are used to treat superficial structures, delivering; rapid, high energy, short acoustic waves into the tissues and this encourages regeneration and tissue repair.

NHS Fife Podiatry Service offers Radial ESWT (rESWT) as an additional therapy for MSK disorders of the foot and ankle. Patients are referred for rESWT in line with NHS Fife Foot Pain Pathways. RESWT is used as an additional treatment where patients continue to be impacted by pain despite intervention.

We evaluated the impact of Shockwave Therapy through an audit, looking at both Visual Analogue Scale (VAS) and MOxFQ (which is a validated Patient Reported Outcomes Tool).

Aim

To evaluate the effectiveness of rESWT in reducing MSK foot and ankle pain.

Treatment Protocol

1 x weekly for 4 weeks.

6 week follow up appointment.

Further 2 sessions offered as required/appropriate (criteria VAS 3>).

Method

All patients attending for rESWT over a 9-month period were asked to complete MOxFQ pre and post treatment, and VAS scores were recorded pre and post treatment.

Data was then splint into individual conditions (Plantar Fasciitis, Plantar Fibroma and Achilles Tendinopathy (Mid Portion). 94 patients in total were included.

Data was excluded from the final audit results and write up, where there was incomplete data, due to; aspects of data not being collected by the Podiatrist (VAS and/or MOxFQ), patients being lost to follow up or not completing the initial 4-week block of treatment. 34 patients were excluded.

Key Results:

- Improved VAS and MOxFQ scores across all treatment groups.
- Plantar Fasciitis and Achilles Tendinopathy had the largest proportion of treatments carried out.
- Plantar Fasciitis treatment resulted in 54.56% of patient reporting a VAS <3 post treatment and Achilles tendinopathy 50% of patients reporting a VAS <3 post treatment.

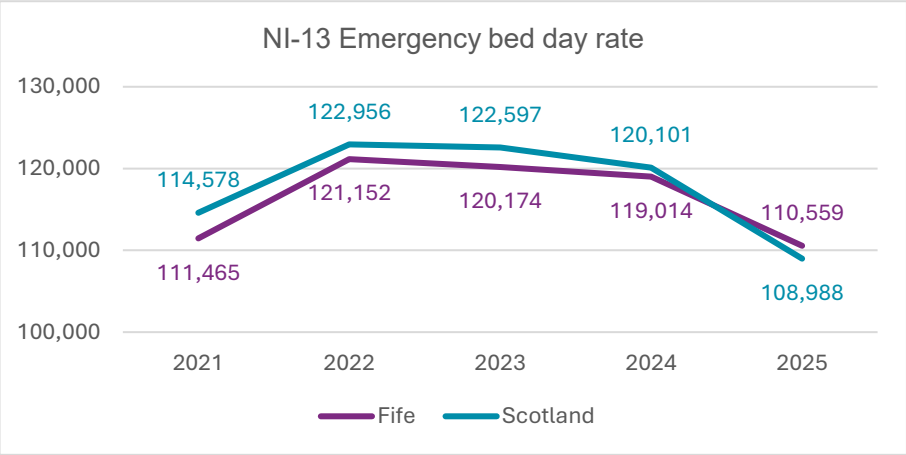
Musculoskeletal pathways have now been updated to support access to Shockwave Therapy for patients who are most likely to benefit from this treatment. This information has been shared at National Foot and Ankle Conference and Royal College of Podiatry Conference to share and inform practice out with Fife.

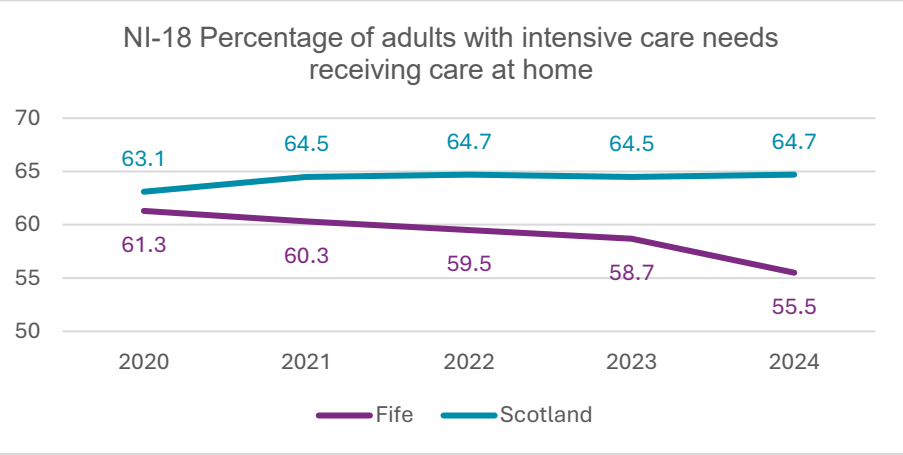
Outcome 5: Health inequalities are reduced

Health and social care services contribute to reducing health inequalities.

Indicator	Title	Latest Data	Fife	Scotland
NI - 13	Emergency bed day rate (per 100,000 population).	2025	110,559	108,988
NI - 18	Percentage of adults with intensive care needs receiving care at home.	2024	55.5%	64.7%

NI-13: In recent years Fife had a consistently lower rate than Scotland for emergency bed days per 100,000 population. The Fife rate increased slightly in 2025 and is now 110,559 compared to the Scotland rate of 108,988.





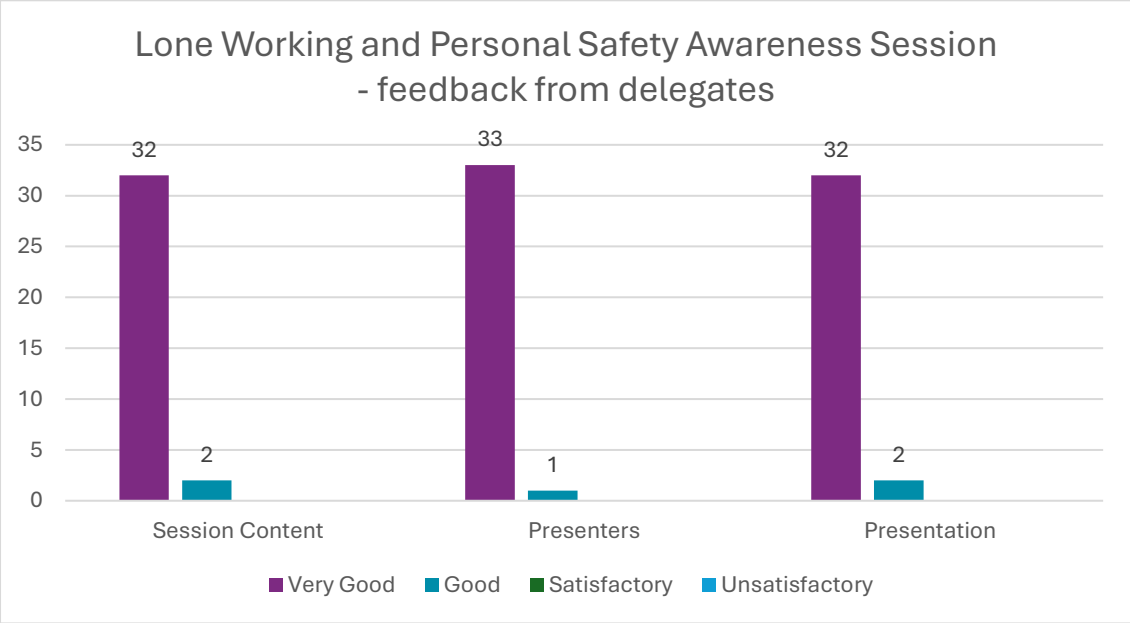
NI-18: Fife has tended to have a slightly lower rate of adults with intensive needs receiving care at home compared to Scotland, and the gap has been widening in recent years. In 2024, the Fife figure was 55.5% compared to 64.7% in Scotland.

15. Lone Working and Personal Safety

The Fife Health Promotion Service Workplace Team Annual Needs Assessment Survey 2024 highlighted the requirement for workforce Lone Working and Personal Safety guidance with 66% of respondents requesting support.

Fife Health Promotion Service Workplace Team, Police Scotland Fife Division, and Fife Council Safer Communities collaborated to host a bespoke awareness session for Fife workplaces to attend.

- 34 delegates attended from 15 different Fife based organisations.
- All 15 of these organisations now benefit from increased Personal Safety and Lone Working knowledge to support improved workforce health, safety and wellbeing.



This graph shows the delegate experience of the session obtained by evaluation feedback; all of the delegates selected ‘very good’ or ‘good’.

16. Mental Health and Wellbeing in Fife Schools

Around half of all mental health conditions begin by the age of 14, rising to 70% by age 18. Schools are therefore a vital setting for prevention and early intervention—helping ensure young people learn in environments that are safe, inclusive and free from stigma.

In January 2025, Fife Health and Social Care Partnership's Health Promotion Service partnered with Fife Council's *Our Minds Matter* programme to provide mental health and wellbeing training and resources to pupils and staff across Fife high schools. The work aligns with many local and national strategic priorities particularly the Partnerships Prevention and Early Intervention Strategy 2024-2027 and Mental Health and Wellbeing Strategy 2026-2029 '*Let's talk about mental health'*.

Alongside direct delivery in schools, the programme has contributed to wider system change. This includes involvement in the Fife Suicide Prevention Multi-Agency Core Group and the Young Person's Reference and Decider Skills Group, helping ensure that young people's voices shape local approaches.

Reach and Activity to date:

The *See Me See Change* Programme—focuses on reducing stigma and improving understanding of mental health—this national programme has been delivered to:

- 18 staff across nine high schools
- over 120 pupils across eight high schools

Participating schools include St Andrews, Balwearie, Kirkcaldy, Dunfermline, Queen Anne, Beath and St Columba's High Schools.

As a result, each school is developing a whole-school action plan to:

- Tackle mental health stigma.
- Promote wellbeing for pupils and staff.
- Create peer support opportunities for senior pupils.

Impact

1. Building staff confidence: In-service training on suicide prevention and anxiety management has strengthened staff capacity to support young people.
2. Curriculum Development: See Me See Change has been incorporated into the new PSE guidance in Fife to ensure that anti-stigma is at the core of pupils learning about mental health.
3. Amplifying pupil voice: Young people's perspectives are increasingly invited to feed into service development, including contributing questions and priorities in commissioning processes.
4. Growing peer support: For example, at Kirkcaldy High School, pupil-led wellbeing drop-in sessions now attract an average of 20 young people each week, providing a safe and supportive space for discussion and connection.

This work is helping to create a more open, supportive culture around mental health in Fife schools—where young people feel better equipped to understand their wellbeing and seek help when they need it. Quotes from pupils after *See Me See Change* training:

'It was very good and I enjoyed myself'

'I really enjoyed it and can't wait for further training'

'It was really detailed and filled my knowledge about mental health and a lot more'

17. Adult Services (Resources) - Fife Community Support Services

Fife Community Support Service (FCSS) provides flexible, community and buildings-based support for adults aged 16 to 65+ years with a range of needs including learning disabilities, physical disabilities, sensory impairments, autism spectrum disorders and other related requirements. The service aims to progress people's life skills, develop and maintain friendships, enhance their confidence and promote their independence. This helps them to lead full and meaningful lives as valued citizens within their own communities. These are some examples of new developments and popular activities offered during 2025-20 26 which demonstrate FCSS's person-centred approach, focus on service user wellbeing and commitment to personal outcomes:

1. A new singing group was established at the Robert Gough Centre, Leven in February 2025. Following the popularity of a similar activity at St. Clair Centre, Kirkcaldy and inspired by evening community choirs, two Community Support Assistants worked alongside service users to introduce something which could be enjoyed during FCSS support hours. Participants choose the songs together and two service users are supported to compile folders of lyrics to be used by the group. Due to growing demand and popularity, the activity has moved to a larger room and meets weekly to practice, explore new song suggestions and agree collectively on additions to the set list. The singing group promotes listening skills, helps build a sense of achievement and boosts the confidence and self-esteem of those who take part.

2. FCSS hosted an Open Day at Fife Cycle Park in October 2025, in partnership with Disability Sports Fife. Using accessible bikes from neighbouring Lochore Meadows helped to ensure the event was inclusive and accessible to all, while accessing the Cycle Park provided a safe and supported environment for everyone to participate at their own pace. Following dedicated training in the use of adapted bikes, FCSS staff were able to support approximately 20 service users to take part and enjoy the experience.

Photo: Ijaz Ali Anwar, Neil McEwan, Jessica Keltie and Linda Stewart

3. FCSS service users enjoyed three barge trips this year, hosted by the charity Seagull Trust Cruises. Departing from Ratho, the boats are fully accessible and operated by trained volunteers, with room for up to 12 passengers on board (including FCSS staff).

   This is a very popular event offering many benefits, including the sensory stimulation of being out on the water and enjoyment of the natural surroundings. There is the opportunity to interact with the crew and learn about how the boat operates, boosting confidence by participating in new experiences and bringing people together to create lasting memories.

Matthew's Experience:
'Not every day you get the opportunity to spend time on a barge with your friends … We had a great day with lots of laughter.'

Photos: Matthew Nicolson, Sean Ferguson and Aneela Rafiq

4. An Autumn Fun Day was held at St. Clair Centre, Kirkcaldy just before Halloween. Open to all service users, the event ran as a drop-in throughout the day, with many dressing up in costumes to join in the fun. A range of games and activities were set up around the main hall, including cake decorating, card making and the popular 'wrap the mummy' competition. Service users played an active and vital role in preparing for the event, helping to decorate the room and photo area, which built a real sense of ownership and achievement and created a lively and engaging atmosphere on the day.

   Photo: Steven McLean

5. Speech and Language Therapy (SALT) worked in partnership with FCSS to plan and deliver two pilot Chat Groups in August 2025. These were designed around the needs of those attending, recognising and supporting different communication styles by using a range of accessible tools and methods. This enabled everyone to take part and express themselves in ways that were comfortable for them, promoting confidence, inclusion and meaningful participation. Following positive feedback and engagement, a further 11 groups were delivered throughout 2025-2026 and these have proved very popular, with just over half (56%) of service users attending at least one group.

In accordance with the Health and Social Care Standards, the Scottish Social Services Council (SSSC) Codes of Practice and the Health and Care (Staffing) (Scotland) Act 2019, FCSS continue to promote continuous learning and development for staff. Training is shaped around the individual needs of the people who access the service, ensuring staff are equipped with the skills, knowledge and confidence to carry out their role effectively and deliver safe, high-quality support. FCSS also deliver four full-day staff development sessions a year, providing a platform to connect, share good practice, build knowledge and celebrate the positive impact their work has on the lives of the people they support.

The Equality Act 2010, the Human Rights Act 1998, the Equality and Human Rights Commission (EHRC) and the Accessible Information Standards emphasise that accessible communication is a legal and ethical obligation and that everyone has the right to receive information in a way that can understand. The Accessible Information Team (AIT) produce a range of accessible materials such as easy read documents, communication tools and video resources to assist a variety of departments. Most of the team members have identified disabilities, bringing valuable lived experience to their supported role. During 2025-2026, the Team have produced a number of resources to support FCSS, including keyrings with symbols and videos to enhance Signalong activities, helping staff and service users to learn the signs and promoting engagement and inclusion.

FCSS continue to support recruitment and alternative employment pathways, such as The King's Trust and Foundation Apprenticeships, offering students the opportunity to gain meaningful work experience in a social care setting by shadowing experienced staff. During 2025-2026, FCSS welcomed two students through The King's Trust, with one continuing to work within the service after securing a Foundation Apprenticeship placement. Building on the positive outcomes achieved in recent years, FCSS looks forward to welcoming and supporting new cohorts over the period ahead.

Adult Services (Resources) – Deaf Communication Service

The Deaf Communication Service (DCS) are a small team with many years of practical experience supporting members of the community who are D/deaf, hard of hearing, deafened, deafblind, people newly diagnosed with hearing loss and users of British Sign Language (BSL). They work to remove barriers to communication by providing information, advice and support to individuals, families, carers, the public, employers, employees, service providers and other organisations about hearing loss. Their aim is to improve understanding, raise awareness, and enhance the quality of life for the people they support.
DCS work to actively promote BSL awareness and inclusion across Fife. Key achievements in 2025-2026 include:

Translation services

- BSL translation of the Fife Council weekly news summary. This is available via the intranet and ensures that D/deaf or hard of hearing staff have access to the briefing in their own language.
- Translation of key Fife Council documents into BSL for various departments (Adult Protection and HR).
- Providing guidance about the BSL translation process, giving individuals and partners a clearer understanding of how it works, what to expect and how to make a request for services.
- Production of a variety of written materials and BSL translations for various partnership agencies.

Assessments

- Joint working with NHS Fife Audiology providing a monthly specialist clinic at Victoria Hospital, Kirkcaldy for anyone with complex hearing loss. This ensures that information, advice and support regarding deafness is available from the point of initial diagnosis onwards.
- Workplace assessments for all employees with hearing loss, supporting them to access suitable hearing aids and increasing awareness of Access to Work to aid clear and effective communication in the workplace.
- Conducting hearing screenings for individuals within Fife Council residential care homes.
- Delivery of home assessments for alert equipment to individuals in Fife with a diagnosed hearing loss.
- Multi-agency working with Sense Scotland to carry out joint vision and hearing screening for individuals with complex needs within the TouchBase Hub in Kirkcaldy.

Support and Advice

- Providing advice about communication support and coordinating access e.g. qualified BSL Interpreters, Electronic Note Takers, Hands-On (Tactile) Interpreters, Deafblind Guide Communicators and Lip-Speakers. There were 2,335 interpreter appointments managed and delivered in 2025-2026, a 36% rise on the previous year (1,715 in 2024/25).
- Specialised Social Work support.
- One-to-one specialised support on Deafness.
- Working with Deaf Ukrainian and Syrian refugees in Fife, providing tailored support to aid communication and community integration.
- Providing information/advice on specialist equipment (e.g. Bluetooth technology).
- Loan of specialist equipment and hire of loop systems.
- Advice and support to other services on making materials and web-based services accessible to BSL users.
- Work with the Hard of Hearing Group, Lip Reading Group and new Cochlear Implant Group.

BSL Classes, Courses and Training

- Delivery of Deaf Awareness sessions (including BSL Culture Awareness, BSL Taster and Deaf Awareness Training) to promote knowledge and understanding about BSL and D/deaf culture.
- Provision of Level 1 and Level 2 BSL classes to Fife Council employees and other partnership agencies. During 2025-2026, there were 99 sessions offered with 29 students participating. Work is underway to develop a BSL Level 3 course, which is expected to become available in 2027.
- Development and delivery of bespoke one-to-one BSL classes or training as required (6 in 2025-2026).

Partnership Working

- Ongoing work with Social Work Services to ensure referrals to agencies for urgent support (such as Ageless Companions) meet the needs of D/deaf BSL users.
- Supporting Fife Council Contact Centre to ensure all council services are accessible for D/deaf people.
- Work with MSPs and local councillors to ensure D/deaf BSL users can access their services.
- Work with University Crosshouse Hospital to support the Cochlear Implant Service. A new Cochlear Implant Group meets monthly to share information and offer peer support.
- Work with Police Scotland Youth Volunteers (PSYV), contributing to events to ensure they are inclusive of young D/deaf participants.
- Community Safety information sessions with Police Scotland to ensure key areas are BSL accessible.
- Work with Scottish Fire and Rescue Service/Fire Scotland to provide BSL and Deaf Awareness training to new staff and in relation to smoke alarm assessments in client's homes.
- Providing training to Citizens Advice and Rights Fife to help staff and volunteers communicate effectively and streamline information sharing with BSL users and people who are hard of hearing.
- Work with Fife Rape and Sexual Assault Centre (FRASAC) to ensure D/deaf BSL users can access support and counselling when required.
- Work with Scottish Mental Health Services for Deaf People (SMHSDP) to improve access to information on mental health and wellbeing for BSL users.
- Work with Coalfields Regeneration Trust on Deaf Awareness and providing BSL tuition for volunteers.
- Work with OnFife to support accessibility of buildings, services and events.
- Partnership working with organisations such as Deaf History Scotland, Contact Scotland BSL and Breathe Easy (a support network for people living with lung conditions).

Good News Story

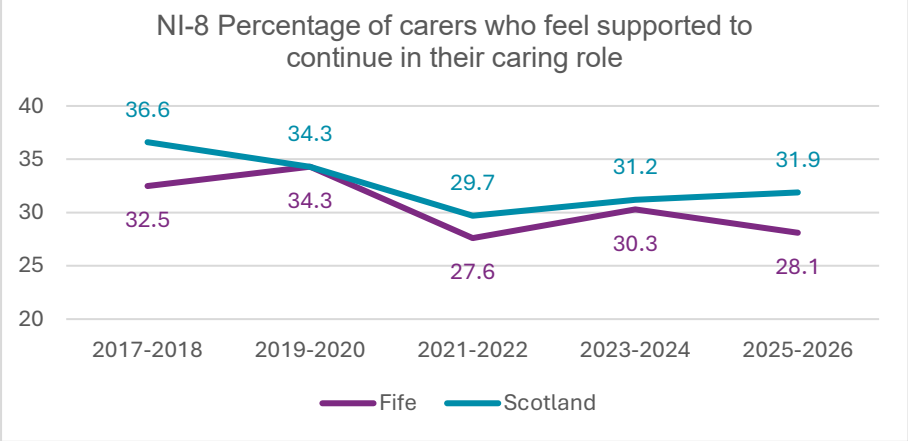
The second Fife BSL Culture Day was held on 21st March 2026 at Dunfermline Carnegie Library and Galleries, following on from the success of the first event in Kirkcaldy the previous year. Collaborative working between DCS and OnFife helped organise a community marketplace, with stalls from partner organisations including Police Scotland, Fife Centre for Equalities and Solar Bear. Adventurer and campaigner Gerry Hughes, the first Deaf man to sail solo around the world, was a special guest on the day and gave a talk followed by a Q and A session and book signing. The event took place during National Sign Language week with a focus on raising awareness of BSL and celebrating Deaf culture.

Outcome 6: Carers are supported

People who provide unpaid care are supported to look after their own health and well-being, including to reduce any negative impact of their caring role on their own health and well-being.

Indicator	Title	Latest Data	Fife	Scotland
NI - 8	Percentage of carers who feel supported to continue in their caring role.	2025-2026	28.1%	31.9%

NI-8: The percentage of unpaid carers who feel supported to continue in their caring role dropped slightly in both Fife and Scotland during 2021-2022. Since then, the Scotland rate has continued to improve, however, after an increase in 2023-2024 (30.3%), the Fife rate dropped slightly to 28.1% in 2025-2026.



18. Carers Strategy

In July 2023, following consultation with carers, partners and staff, we published our Carers Strategy for Fife 2023-2026. Our strategy focuses on providing carers with information, support and services that help them to live well alongside their caring role, and to make the choices and decisions that matter most to them, providing support at the earliest time and in the best place to meet their personal needs.

The five themes of the strategy are:

- Information
- Coordinated support
- Breaks from caring
- Early/upstream identification
- Supporting Young Carers in Fife

During the last year we have achieved much despite the challenges and the need to even more judiciously consider how we spend public money, we made significant additional investments, reached more carers and provided better support through our formidable partnership arrangements with the voluntary sector, and with the help of our own staff.

Sue's story

I am Sue. I married Alastair over 40 years ago. I am his sole carer.

Alastair has Parkinson's Disease. Recently we were told he also has Dementia. I have been supported by Fife Carers Centre for several years but re-engaged recently when I was feeling overwhelmed due to Alastair's deteriorating health but also my own feeling of being overlooked and disregarded by the other services involved.

I phoned the Carers Centre and arranged to go in the next day to meet my Carer Support Worker, Debs. I was able to talk in a 'safe space', with someone I know, about how I am feeling. I don't always feel comfortable sharing these feelings with family and friends; I put on a brave face.

I felt so much better in myself after our talk and visiting the Carers Centre. I was referred for the mindfulness sessions over the phone, for 4 weeks. And I learned skills to help me relax and focus on my own health and wellbeing.

We met the following week and reviewed my Adult Carer Support Plan. This enabled me to look at how my caring role had changed and highlight the need for respite support. I asked for this to be shared with social work. I am also exploring paid services.

I have been given details of a new group that has been set up for carers of people living with Parkinson's and I plan to attend Fife Carers Centre Dementia workshops.

Diane's story – support through a Carers Community Fund Project

My dad has a diagnosis of Alzheimer's. He lives at home independently with support from myself and my sister.

Attending the carer's lunch organised by Later Life Choices Glenrothes, funded through the Carers Community Chest Fund, was beneficial in so many ways. I sat beside people who were in the same boat as me, so we were able to support and reassure each other. Although I have my sister, caring for my dad can be quite stressful and you sometimes don't know if you are doing the right thing.

At the meeting I was given an amazing Information Pack which included leaflets from lots of different organisations. For example, I could visit SeeScape and get some free aids and advice. A lady from Alzheimer's Fife was at the meeting who was amazing. The lady recommended an automatic pill dispenser that sets off an alarm when you are due to take your medication. I also got information on installing in-house cameras linked to my mobile phone and buying him a simpler remote for the TV. All of this has been invaluable, reducing my stress levels and knowing my dad is safer

Over the last year we have:

1. Completed a full commissioned service review leading to efficiency gains. This will lead to an open and competitive recommissioning process in 2026 to deliver greater value for public money and outcomes for carers.
2. Completed a review of Adult Carer Support Plan (ACSP) process and implemented and simpler support process for carers, more efficient approach for staff and workforce skills development to improve the carers' experience.
3. Remodelled the Social Work Assistants Team to provide a more effective service for carers; this work requires further time to test and embed practice.
4. Held a series of collaboration events between internal and external service teams to deliver a more effective and consistent approach to ACSP.
5. Delivered the statutory duties outlined in the Carers (Scotland) Act 2016.
6. Delivered the final year of the agreed actions in the local Carers Strategy which aims to provide support to unpaid carers based on their personal needs for support.

You can read more about the Carers Strategy on our website here: https://www.fifehealthandsocialcare.org/about-us/publications/

Further information on the Carers Community Chest is available here: https://www.fifehealthandsocialcare.org/your-community/community-chest/

This is the link to the Fife Carers Centre website: https://www.fifecarerscentre.org/

19. Let's Connect

Let's Connect promotes nurturing, emotionally attuned parent–child interactions as the foundation for healthy development. Let's Connect is play based and was devised by local practitioners across occupational therapy, speech and language therapy, education and health visiting. It supports strong connections between parents and carers and their young children, helping improve the development of two-year-olds through play and everyday interaction.

This contributes directly to:

1. Early Intervention and Prevention
    - Supports families long before needs escalate by providing universal, strengths-based advice.
    - Aligns with Scotland's whole-system shift toward prevention through the Population Health Framework 2025–2035.
2. Supporting Families and Strengthening Relationships
    - Builds parental confidence in reading child cues, supporting co-regulation, and creating play-rich environments.
    - Reinforces Fife's commitment to improving parent-child attachment, resilience, and emotional wellbeing.
3. Reducing Inequalities
    - Targets communities where developmental concerns at age 27–30 months are highest.
    - Aligns with Fife's multi-agency efforts to reduce speech, language and communication gaps.

Over the last year Let's Connect has engaged 35 of 44 two-year-old nursery settings across Fife. Ten settings have fully embedded Let's Connect into their core family-support offer, while 25 settings continue to develop capability through early implementation. To support expansion beyond education settings, the Team has delivered introductory training to The Cottage, Gingerbread, and Cowdenbeath Health Visiting Team, enabling wider alignment with universal early-years pathways.

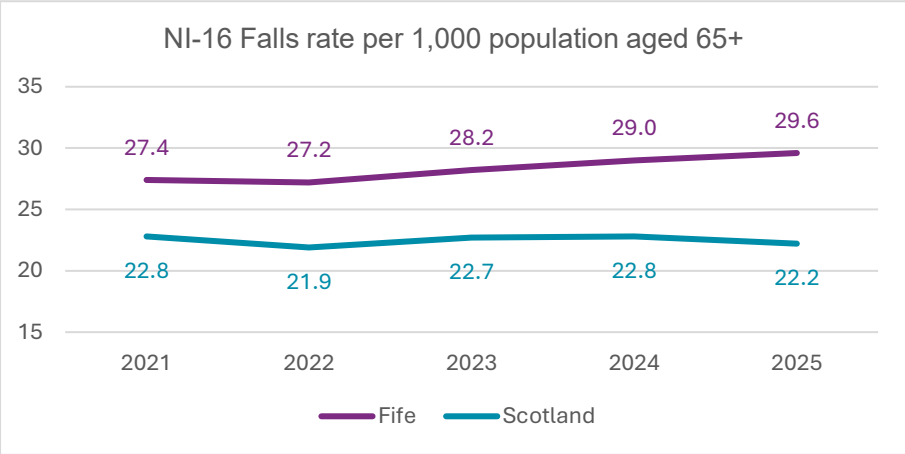
Key achievements include observable improvements in family resilience, co-regulation, parental confidence, and quality of play interactions.

Outcome 7: People are safe

People using health and social care services are safe from harm.

Indicator	Title	Latest Data	Fife	Scotland
NI - 9	Percentage of adults supported at home who agreed they felt safe.	2025-2026	74.0%	74.7%
NI - 16	Falls rate per 1,000 population (65+).	2025	29.6	22.2

NI-16: Fife has a consistently higher falls rate than Scotland as a whole. In the most recent year, 2025, the rate per 1,000 population (65+) in Fife was 29.6, compared to 22.2 in Scotland.



Please note results for indicators 2, 3, 4, 5, 7 and 9 for 2023-2024 and 2025-2026 are not comparable to previous years due to changes in survey wording. Also results for 2019-2020 and 2021-2022 for indicators 2, 3, 4, 5, 7 and 9 are comparable to each other, but not directly comparable to figures in previous years due to changes in survey wording and methodology.

20. Recognising and Responding to Suicide Risk – training for Criminal Justice Social Work

The Health Promotion Service worked with Fife Criminal Justice Social Work to develop, create and deliver a bespoke one-day session, '*Recognising and Responding to Suicide Risk'*. This was a targeted delivery to support staff identified as working with individuals at increased risk of suicide. Fife Criminal Justice Social Work is responsible for providing a statutory social work service for those living in Fife, involved in the Justice System.

To develop the session, we listened to needs of staff; identified potential gaps in knowledge and understanding; and identified suitable content which would meet these needs. We identified face-to-face delivery would be most appropriate to meet these needs. We utilised a combination of video resources, case studies and opportunities for participants to take part in personal reflective practice and small group conversations.

Aim of session: to support practitioners to recognise and respond to people experiencing suicidal thoughts, distress and crisis. The session outlines key evidence, concepts and practices underpinning our understanding of suicide and how it can be used to prevent and support people experiencing suicidal thoughts, distress and crisis.

Between June 2025 – January 2026, we delivered the training to 103 staff from Criminal Justice Social Work. This was a significant commitment of service time to enable staff to attend the training. It is important to recognise the commitment shown by Service Managers who understood the value of the training for staff and supported this.

At the end of each training session, an evaluation was carried out to ascertain if the session met their knowledge and understanding needs. From the 102 evaluation forms returned:

- 88% gained improved knowledge
- 72% gained improved confidence
- 51% gained improved skills
- 94% said they would use the learning in their practice
- 39% said they would use the learning to improve service delivery
- 42% said they found the course extremely valuable to their job
- 43% said they found the course very valuable to their job
- 9% said they found the course valuable to their job

In June 2025, we sent a follow up survey to 84 participants who attended the training between September 2024 and March 2025. The aim of this follow up survey was to identify the impact on practice following the training. The survey was disseminated to 82 recipients and received a 19% return rate.

Key findings from the follow-up survey:

- Confidence levels amongst respondents remained high with 80% stating on a scale of 1 (lowest) to 10 (highest), they scored their confidence at either an 8 or a 9.
- 60% of responders indicated their confidence level had increased since undertaking the training.
- 60% of responders stated since undertaking the training, they've discussed suicide with an individual they support: 33% of the 60 had initiated the conversation; 27% had responded to a disclosure.
- 58% stated they believed the training had directly influenced their ability to have the conversation about suicide with the individual they support.

As a direct result of the training, Criminal Justice Social Work developed a suicide risk assessment protocol for their service. Finally, as part of the work with Criminal Justice Social Work, a referral pathway to the Fife Distress Brief Intervention (DBI) Service was established. To date, the Fife DBI service has received 18 referrals through the Criminal Justice Social Work pathway.

'*Recognising and Responding to Suicide Risk'* is now available through the Health Promotion Service Prevention and Early Intervention Training Programme. This will ensure new staff to Criminal Justice Social Work can access the training.

21. Cowdenbeath Early Years Collaborative Hub (with expansion to Kirkcaldy)

The Cowdenbeath Early Years Collaborative Hub is a multi-agency learning and collaboration forum that brings together practitioners from health, education, and the third sector to strengthen early intervention and prevention for young children and families. The Hub provides regular, structured sessions where practitioners share knowledge, develop practical skills, and build relationships across services, helping to improve confidence, reduce professional isolation, and support earlier identification of children's developmental and communication needs. The successful model, embedded in the Cowdenbeath locality, has now been replicated in Kirkcaldy, supporting wider learning and consistent, joined-up practice across Fife.

Key achievements this year include:

> Over 150 practitioners from seven different services have taken part, with strong attendance maintained.

1. Sustained delivery of the Hub
    - Continued to offer termly collaborative sessions with morning and afternoon options.
    - Maintained an inclusive, safe learning space for practitioners across services.
    - Embedded model locally with strong ongoing participation.
2. Strengthened multi-agency relationships
    - Staff report reduced professional isolation, stronger peer networks, and easier access to guidance from other services.
    - Improved coordination between education, allied health professionals, health visiting and the third sector.
3. Improved practice and confidence - practitioners report:
    - Increased confidence in supporting children with developmental and communication needs.
    - Better understanding of wider services and referral pathways.
    - Expanded toolkit of practical strategies for supporting children and families.
4. Positive outcomes for children and families
    - Earlier identification of needs through better-informed practitioners.
    - More coordinated support across agencies.
    - Improved environments and play opportunities that encourage children's development.

22. Bairns' Hoose

This initiative forms part of the Fife Bairns' Hoose Pathfinder Programme and aligns with the National Bairns' Hoose Standards and the Healthcare and Forensic Medical Services Standards (April 2025). The Pathfinder framework and funding enabled the Partnership to prioritise trauma-informed improvements that uphold children's rights, minimise distress, and support Fife's role as a national pathfinder test site, while a purpose-built Bairns' Hoose facility is in development.

The Victoria Hospital, Kirkcaldy Children's Ward environment was adapted using trauma informed design principles, with a focus on privacy, calm, and emotional safety. Improvements were concentrated in the areas below:

- **Arrival and waiting area:** the previously open waiting space was partitioned to improve dignity and reduce exposure to busy ward activity.
- **Adolescent specific space:** a separate area to provide greater privacy and a more suitable environment for teenagers and young people.
- **Discreet video door entry system:** a controlled access point with a small camera, enabling staff to verify visitors and release the door entry near the examination suite without drawing attention in public areas. This supports privacy and safeguarding by helping manage arrivals sensitively and reducing the risk of unplanned contact.
- **Multi agency professional room:** created to enable confidential discussion and coordination between health, police, and social work reduces duplication, supports continuity, and ensures children experience a joined-up response away from child and family areas.
- **Consulting/interview room (repurposed):** adapted to support assessment, conversations, and planning as part of the Investigative Medical Examinations (IME`s) pathway.

Across these spaces, sensory friendly décor, soft lighting, and trauma informed furnishings were introduced to reduce anxiety and sensory overload, now a predictable, integrated pathway. Trauma-informed principles were embedded across clinical and support teams, supported by Pathfinder training. Staff emphasise child led pacing, clear explanations, and emotional regulation, supported by child friendly resources.

Quantitative measures are in development, however early qualitative evidence shows calmer experiences for children and families, improved alignment with Bairns' Hoose Standards (notably environment and planning for children), elimination of unnecessary transfers during Investigative Medical Examinations, and improved consistency of care.

You can find out more about the Fife Bairns' Hoose here:

https://www.fifehealthandsocialcare.org/news-updates/news/2024/11/work-by-bairns-hoose-partnership-praised/

Outcome 8: Employees are supported and engaged in their work

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.

23. EQUIP Team Learning and Development Programme

During 2025 to2026, the EQUIP Team Learning and Development Programme delivered targeted workforce development activity to strengthen confidence, consistency and capability across Children's Services.

Key achievements include:

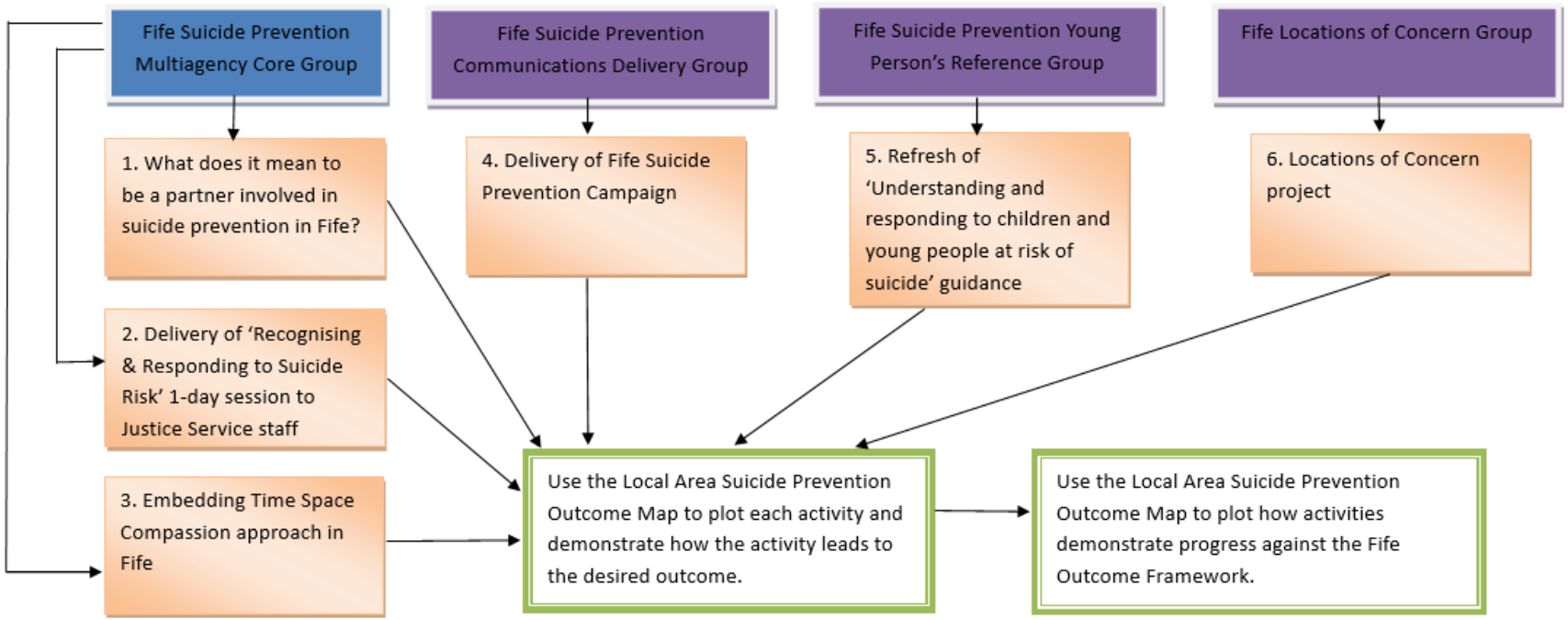
- Delivery of a Graded Care Profile 2 (GCP2) Quality Improvement Project, informed by workforce feedback identifying barriers such as confidence, time pressures and inconsistent use.
- Delivery of GCP2 refresher training across Health Visiting, Family Nurse Partnership and Allied Health Professional Teams.
- Training and establishment of GCP2 Champions to support practice, peer learning and spread of improvement.
- Development and piloting of a practitioner guide, 'How to Use the Graded Care Profile 2 Tool in Practice', including non-stigmatising, strengths-based language for use with families.
- Introduction of ready-to-use GCP2 packs, reducing preparation time for practitioners.
- Securing Caldicott approval and procedures to enable collection of parent/carer feedback using Microsoft Forms, with early feedback indicating families felt supported during GCP2 assessments.
- In addition, the EQUIP Team co-designed and delivered a full-day Team Around the Child (TaC) to Initial Interagency Referral Discussion (IRD) Training Programme, supporting implementation of the Child Wellbeing Pathway and National Child Protection Guidance. Evaluation demonstrated increased practitioner confidence and very positive qualitative feedback.

This work has strengthened multi-disciplinary collaboration, promoted a shared understanding of safeguarding responsibilities, and supported a confident, skilled workforce. Learning from this programme will continue to inform future learning and development priorities across Children's Services.

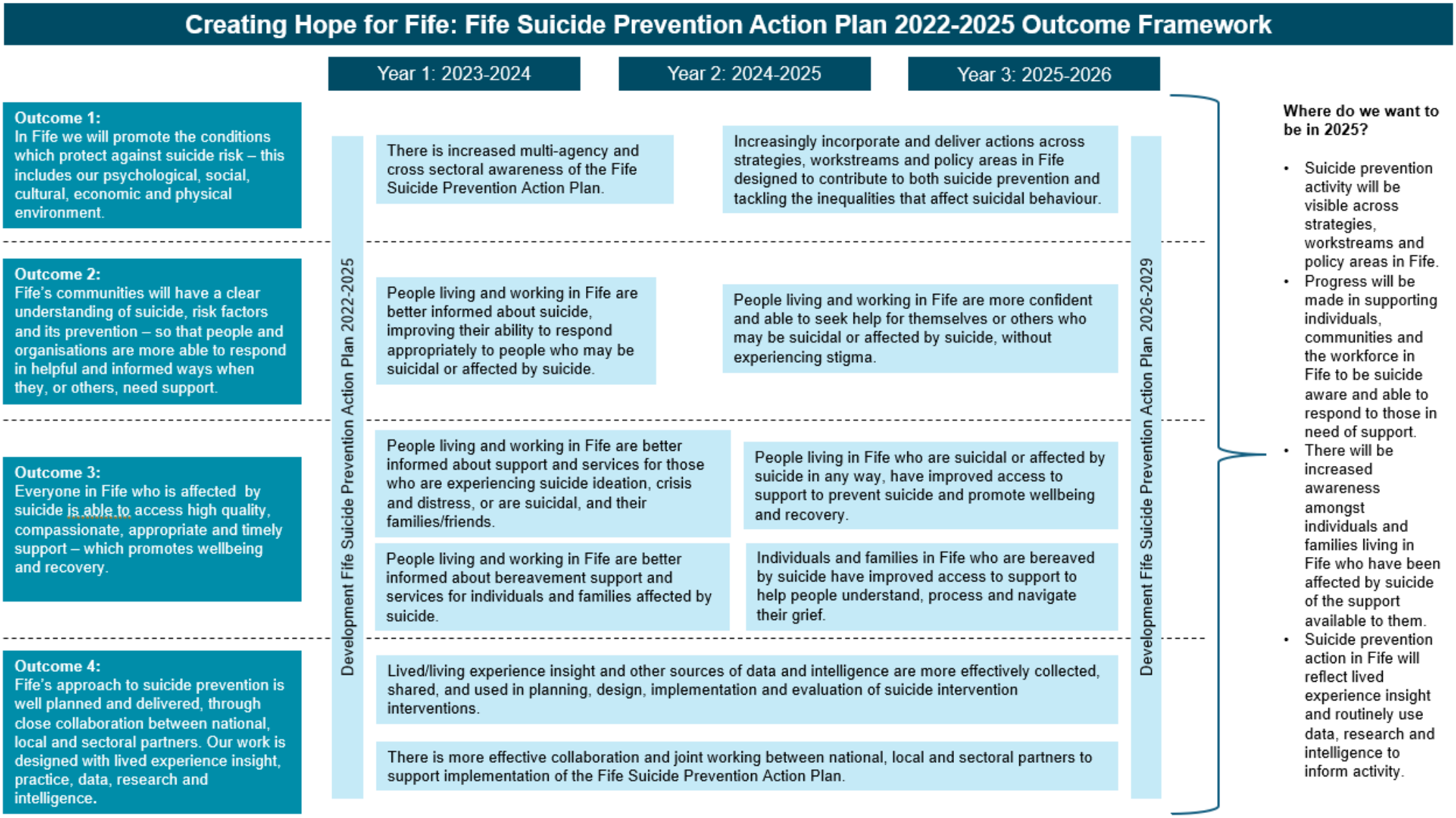
24. Measuring Impact of Creating Hope for Fife: Fife's Suicide Prevention Action Plan 2022-2025

The complexity of the Suicide Prevention workstream provides a challenge in measuring impact and outcome. Creating Hope for Fife: Fife's Suicide Prevention Action Plan 2022-2025 expired at end of 2025. An Outcome Framework was created to provide a framework to measure progress and outcome of the action plan.

To gather the evidence to inform progress against the Outcome Framework, a Local Area Suicide Prevention Outcome Map was used. There are 21 actions outlined within Creating Hope for Fife, it would not be possible to use the Local Area Suicide Prevention Outcome Map for all areas of work. Suicide Prevention Scotland advised selecting key areas of work or projects to carry out a detailed evaluation and impact assessment. Six areas of work were identified from Creating Hope for Fife; three areas of work for the Fife Multiagency Core Group and one area of work per each Delivery Group (Locations of Concern; Suicide Prevention Children & Young Person's Reference Group; Suicide Prevention Communications Delivery Group).



The Measuring Impact Report identifies at least one piece of work or project which delivers against each of the outcomes within the Outcome Framework and sets out progress made towards achieving the outcome.



In all cases, there is good or strong evidence to show progress has been achieved. While this is positive and demonstrates implementation of effective action, it is worth noting the six areas of work explored within the Measuring Impact Report are only a snapshot of work delivered against all 21 actions within Creating Hope for Fife.

Next Steps

The next National Suicide Prevention Action Plan was published by the Scottish Government and COSLA in January 2026. Work is underway to develop the next Fife Suicide Prevention Action Plan 2026-2029. The next action plan will build on work which began under the previous action plan and identify new areas of priority for the next three year.

There are several areas identified which will be highlighted through the development process for consideration as priority areas for action in the next Fife Action Plan:

- Lived and Living Experience
- Bereavement support
- 'At risk' groups
- Data and intelligence
- Local landscape
- Fife Suicide Prevention Multiagency Core Group and associated Delivery Groups: review membership and terms of reference for groups.

25. Transforming Fife's Workforce Capacity to Tackle Poverty: Building a Skilled, Confident Workforce through Poverty Awareness Training

Poverty continues to be a significant challenge in Fife, with many households struggling to meet basic living costs due to factors such as low income, rising living expenses, and inadequate benefits. This impacts poorer health, housing instability, educational disadvantage, and reduced life opportunities - all recognised across local services.

In 2015, the *Fife Fairness Matters Report* highlighted a crucial barrier to effective support; frontline staff lacked a practical, consistent understanding of poverty and its impacts. Existing Poverty Awareness Training was valued but limited, fragmented and unable to meet growing demand. A more coordinated, system-wide approach was essential. To address this need, the Fife Health and Social Care Partnership's Health Promotion Service secured funding in 2023 to establish a specialist Health Promotion Officer, the Poverty Awareness Training (HPO:PAT) post.

This role has transformed both the scale and quality of poverty-related workforce development, embedding early intervention and more compassionate, informed practice across all services. It has led to increased collaboration and multi-agency partnership working across all services.

Delivery

Delivery of face to face and virtual workshops during 2025-2026:

- 9 courses offered – 125% increase since the HPO:PAT has been in post
- 45 workshops delivered - 200% increase since the HPO:PAT has been in post
- 350 participants attended - 97% increase since the HPO:PAT has been in post

Learning Outcomes

The training has delivered measurable improvements in workforce competence:

- Increased knowledge and awareness of poverty and its drivers.
- Improved confidence in supporting people at risk.
- Strong intention to apply learning in day-to-day practice.
- Increased sharing of information across teams and services.
- Strong contribution to system-wide culture change, enabling earlier conversations about financial wellbeing and access to support.

Why this matters

The Poverty Awareness Training now plays a central role in Fife's preventative system with key areas of work such as the No Wrong Door (wellbeing and prevention model) and the Fife Advice Framework. Both aim to ensure people receive the right help at the first point of contact, without being passed between services or asked to repeat their story. It shifts services from being *'service-centric to person-centric'* and strengthens early intervention to prevent issues such as poverty, debt and housing instability from escalating into crisis.

All Poverty Awareness training equips staff with the skills and understanding to:

- Recognise vulnerabilities early on
- Provide compassionate, informed responses
- Ensure people access the right support first time
- Reduce crisis and improve wellbeing outcomes

The creation of the HPO:PAT post has proven transformative - building a sustainable, multi-agency training network and embedding poverty-aware practice across sectors. Between 2022 and 2026, Fife has significantly strengthened its ability to tackle poverty through workforce development. The coordinated, high-capacity training model has improved consistency, expanded reach, and empowered hundreds of staff with the skills to make a real difference in people's lives.

The Poverty Awareness Training stands as a powerful example of prevention in action - and a vital investment in creating a fairer, healthier Fife.

Some examples of feedback received from delegates:

'I have completed benefit checks with several individuals. The training was extremely helpful in showing me how to use the Fife Benefit Checker.

As a result, five people I supported were identified as being entitled to additional financial support'

'By putting what I learned from the course into practice it has helped me assess the support and care needs of vulnerable homeless people.

Using the Fife Benefits Checker not only helps maximise my service user's income, it also allows me to work in partner agencies to meet unique needs'

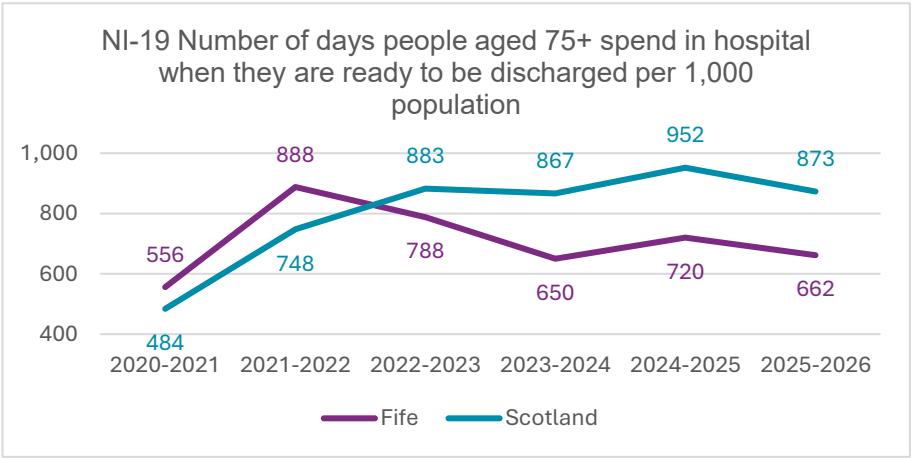
'As a worker who is based Fife Wide, I use the learning from the session daily. I am able to go in and quickly access what support and programs are out there in each areas, this is really beneficial for me and the service users'

Outcome 9: Resources are used effectively

Resources are used effectively and efficiently in the provision of health and social care services.

Indicator	Title	Latest Data	Fife	Scotland
NI - 19	Number of days people spend in hospital when they are ready to be discharged (per 1,000 population).	2025-2026	662	873

In 2025-2026 Fife had a lower rate of days spent in hospital when ready for discharge (age 75+) per 1,000 people compared to Scotland (the Fife rate was 662 and the Scotland rate was 925). The rates in both Fife and Scotland have decreased since the previous year (2024-2025).



26. Learning at home resource

The learning at home web page was initially developed during COVID-19 to support families during lockdown. This page has been fully reviewed and updated with practical advice linked to age and stage of child, as well as links to general advice such as supporting health and wellbeing.

The webpage helps to:

- Support children with homework and support families who home school their children.
- Support transition back to school after an extended period of absence.
- Promotes readiness for learning, maximise learning potential and reduce the stress of home learning.
- Promote continuity across child's learning journey

You can find more information here: https://www.nhsfife.org/news-updates/campaigns-and-projects/learning-at-home/

27. Risk Management

Since April 2025, the IJB Strategic Risk Register, which was reviewed in line with the Strategic Plan 2023 to 2026, has continued to be managed by risk owners and reported regularly to governance committees and the Integration Joint Board (IJB). The delivery plan supporting the Risk Management Policy and Strategy was originally agreed in March 2023. The plan has a total of ten actions, and eight of these are now complete, with further improvement work continuing for two of these actions.

During the year, the IJB approved a Risk Maturity Model framework and set a baseline score. Further work was undertaken to identify gaps and an action plan with five additional actions has been developed and these will be reported as part of ongoing improvement work. A survey was undertaken with staff during the year to highlight areas where additional support was required and a number of training Sways have been developed and circulated to staff across the Partnership. These Sways cover the following areas.

- How to Describe a Risk
- Risk Assessment Matrix
- Risk is Everyone's Business
- Governance and Assurance

In October 2025 a new report template (SBAR) was launched. This included a specific section on risk appetite aligned to decisions being taken by the IJB. Feedback on this template is currently being gathered but anecdotally it has been well received.

In addition to key performance indicators assigned to individual risks there have also been performance measures developed to provide assurance that risk management processes are operating effectively, these include:

- Movement of the Integration Joint Board Risk Profile
- Risk Scoring Trajectory
- Deep Dive Risk Review Process
- Risk Maturity Model Baseline

In the coming year, further training resources will be developed. A refresh of the IJB Risk Management Policy and Strategy will take place, and this will include a review of the Risk Appetite Statement. The IJB Strategic Risk Register will also be reviewed to ensure it aligns with the new Strategic Plan 2026 to 2029.

28. Climate Change Duties

The Climate Change (Duties of Public Bodies: Reporting Requirements) (Scotland) Order 2015 requires all major public bodies to submit an annual climate change report to the Scottish Government by 30 November. Integration Joint Boards (IJBs) were included in this reporting from 2016-2017, and the report submitted in November 2025 was Fife IJB's ninth report and covered the 2024-2025 period. Each year the Integration Joint Board must set out it's five strategic priorities for the year ahead.

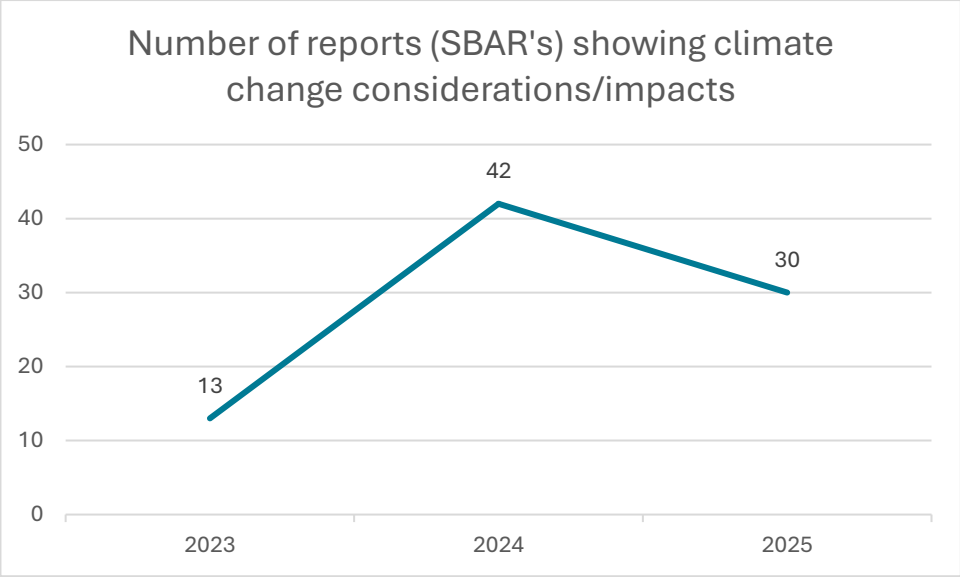
The five key priorities submitted in November 2025 were:

- The IJB/HSCP continue to support the Climate Fife (Sustainable Energy and Climate Action Plan – SECAP) 2020-2030 and the aims and actions from the Climate Fife 2024 Strategy and Action Plan, and continue to work closely with partners on the development of the Anchors Strategic Plan.
- The Integration Joint Board continues to support awareness raising for staff, making use of accessible training, and learning opportunities offered by partner bodies and others.
- The integrated work of partner bodies continues, and this is strengthened by the Partnership's Climate Change Group that convened last year and will identify opportunities to work more efficiently and sustainably.
- Continue to monitor actions and outcomes aligned to the delivery of the Strategic Plan 2023-2026, including those within the supporting strategies, that promote co-benefits with climate change strategies.
- Continue to review the information received on reports and business cases, in relation to climate change impacts, and highlight the benefits or positive impacts on climate change strategies and encourage and promote the use of the Fife Environmental Assessment Tool (FEAT) when preparing reports and business cases.

The Head of Primary and Preventative Care Services was appointed to lead on climate change work for Fife Health and Social Care Partnership last year and a Climate Change Group was set up with representation from all portfolios plus representatives from NHS Fife and Fife Council teams working in this field. The Group meets every six-to-eight weeks and has developed actions to ensure compliance with the statutory duties of the IJB, raise awareness of climate change throughout the Partnership and support partner bodies to work more sustainably.

Several employees within the Partnership have completed the Carbon Literacy accredited training and others have attended awareness sessions. The Partnership's Climate Change Group will continue to promote all available training to increase awareness. Moving forward, Climate Change Champions will be recruited across the Partnership. These Champions will act as key contacts for sustainability within their teams, share ideas and good practices that support sustainability and identify opportunities or projects that reduce carbon impact.

A review of the environmental/climate change impacts highlighted within reports (SBAR's) submitted to committees during the period September 2024 to August 2025 showed 30 extracts. This number has reduced from the previous year but still shows an increased awareness of climate change since 2023.



The review of the environmental/climate change information submitted to committees between September 2024, and August 2025 was also linked to a priority in the Strategic Plan 2023-2026.

The graph shows that 80% of the environmental/climate change information contained in the reports (SBAR's) are linked to the sustainable priority of the Strategic Plan 2023-2026, with 17% linked to the outcomes strategic priority and the remaining 3% linked to the local priority.

29. How Mental Health Services Work Together in North East Fife Test of Change

Fife's Mental Health and Wellbeing in Primary Care and Community Settings Project (MHWPCCS) was established to support the Scottish Government's vision for a stronger community-based multidisciplinary response in supporting people who are experiencing mental health and wellbeing challenges, including improving access to the right professional, in the right place, at the right time, and improving outcomes and experiences for people and for those who deliver services.

In 2025, Fife Health and Social Care Partnership delivered a Test of Change in North East Fife to explore how mental health and wellbeing services work together across health, social care, third sector and community settings. The project responded to feedback that the local mental health landscape was complex and that greater understanding and integration between services was needed.

The Test of Change focused on four key objectives:

- Improving relationships and shared knowledge between services.
- Increasing clarity and accessibility of mental health pathways from the perspective of people seeking support.
- Identifying opportunities to strengthen integration and joined-up working.
- Increasing trust, safety and confidence in the system.

A multi-agency stakeholder group was established, bringing together representatives from 25 teams and organisations across statutory services, third sector providers, primary care, lived experience roles and community partners. Through a series of structured online meetings and an in-person networking event, participants shared learning, explored local service models, and built relationships that supported collaboration.

The networking event was held in July 2025 at the Corn Exchange in Cupar; 80 people attended, with 16 presentations and 26 organisations and services having a tabletop stall. Feedback from colleagues was very positive, photographs taken at the event and comments provided on the feedback form are included below.

Despite having no allocated budget, the North East Fife Test of Change achieved meaningful outcomes in a short timeframe. Feedback showed increased understanding of available services, stronger professional connections, and greater confidence in local mental health supports. While pathways themselves did not change, services felt better equipped to guide people to the right support at the right time, laying strong foundations for future service improvement and integration.

Networking event for mental health professionals at the Corn Exchange in Cupar.

Feedback on the networking event from mental health professionals.

30. Armed Forces Covenant

Across Fife the Armed Forces Community includes approximately:

- 1,000 serving personnel
- 450 reservists
- 21,000 veterans, and
- the partners and family members of serving personnel, reservists and veterans.

For most of these people, serving in the armed forces is or was a positive experience. However, some individuals experience adverse physical and mental health challenges, which can be compounded by other factors such as welfare and/or financial issues. Members of the Armed Forces Community may also experience problems accessing appropriate services in comparison to the civilian population. This can be further complicated by a lack of understanding of the armed forces culture within civilian services.

To support the Armed Forces Community and ensure compliance with the requirements of the Armed Forces Covenant, Fife partner agencies set up a multi-agency Working Group in February 2023. Key achievements over the last year include:

- Continued development of the Armed Forces Covenant Working Group, which coordinates multi-agency efforts to improve compliance and service delivery.
- Delivery of awareness training through e-learning modules and online sessions.
- Strengthened housing support for veterans, including a review of allocation policies and a civic reception to enhance service offers.
- Expansion of welfare support through the Defence Medical Welfare Service.
- Continued delivery of suicide prevention support via Veterans Advice Fife, with 137 referrals and 64 active cases.
- Engagement of Fife Voluntary Action to support volunteering, community development, and carer grants.

V1P (Veterans First Point)

Veterans First Point provide a specialist service dedicated to the mental health and wellbeing of former armed services personnel in Fife. You can find more information here: https://www.veteransfirstpoint.org.uk

Defence Employer Recognition Scheme

The Ministry of Defence (MOD) Employer Recognition Scheme recognises employer support for the Armed Forces Community. There are three tiers Bronze, Silver and Gold. The Gold Award is the highest level and requires employers to become advocates for defence and the Armed Forces Community.

Fife Council have been holders of Gold Award accreditation since August 2022. Revalidation for accreditation will be in March 2027 with notification of award outcome expected in August 2027.

NHS Fife was awarded the Defence Employer Recognition Scheme Gold Award in August 2025.

Forces Connect App

This is a free directory of local services that people can access with a mobile phone, or online using this link: https://www.forcesconnect.co.uk/

The Forces Connect App includes details of 78 local services across Fife as well as information on national services and support.

This link provides more information about the Armed Forces Covenant: https://www.armedforcescovenant.gov.uk/

You can find more information about Fife's Armed Forces Community on our website: https://www.fifehealthandsocialcare.org/your-community/armed-forces-community/

Inspection of Services

All registered social care services undergo inspection from the Care Inspectorate following their quality framework.

Prior to the coronavirus pandemic, the Care Inspectorate inspected against a mixture of quality frameworks and quality themes depending on the service type. All service types now have a new Quality Framework in place and from December 2022 the Care Inspectorate will report only under the relevant key questions of each Quality Framework. Where a service has not yet been inspected under a new Quality Framework the corresponding grade from the previous quality theme methodology will be used instead. A service's entire grading history, including grades under the previous quality theme methodology, can be viewed on the Care Inspectorate website. Different service types are assessed under different key questions as set out in their Quality Frameworks.

During the period 1st April 2025 to 31st March 2026, the Care Inspectorate inspected:

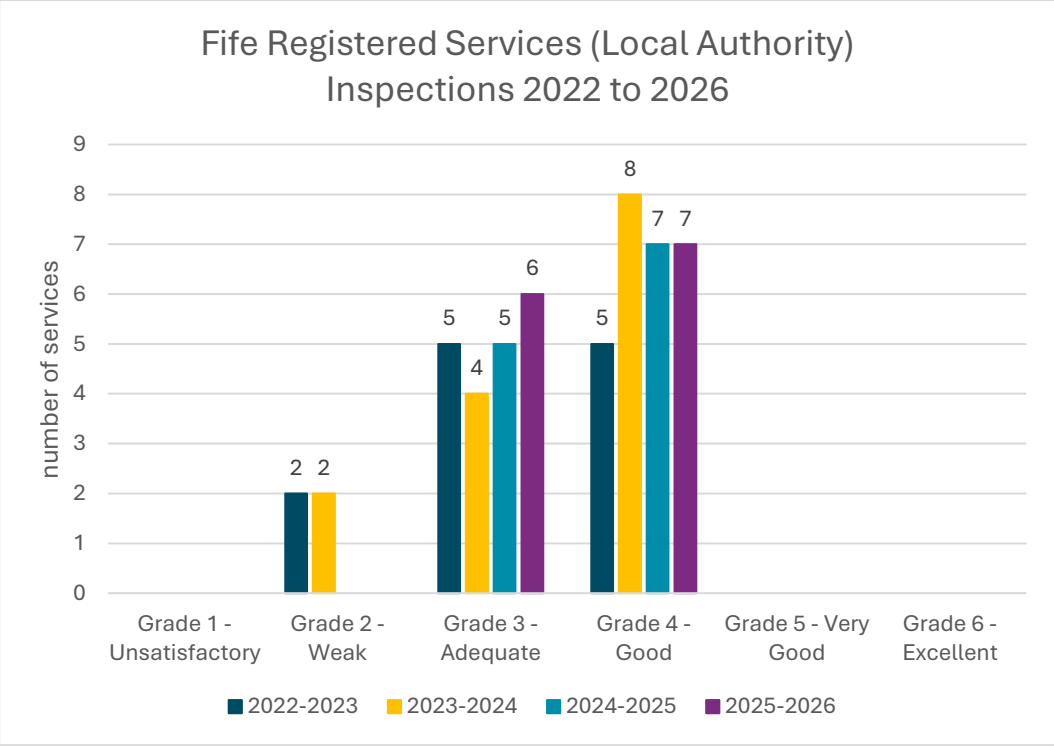
62 Care Home Services:

- 8 Local Authority
- 52 Private
- 2 Voluntary or Not for Profit.

42 Housing Support/Care at Home Services:

- 5 Local Authority
- 21 Private
- 16 Voluntary or Not for Profit

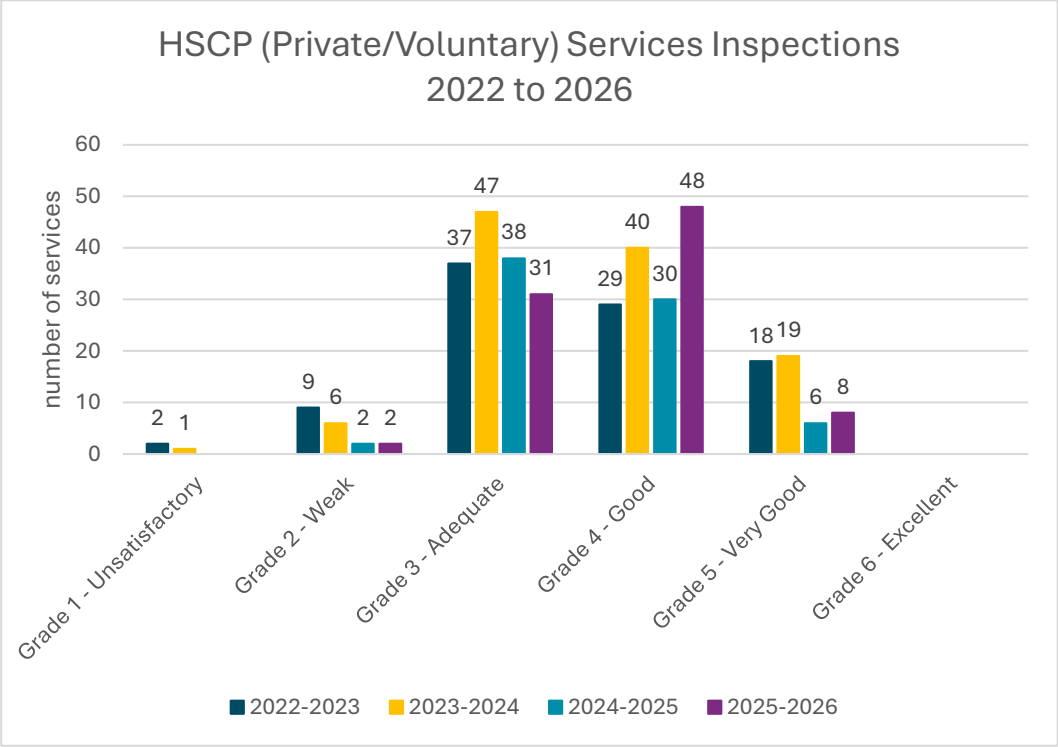
In previous years (2022-2024), a small number of local authority inspections were assessed as weak (see graph). Since 2024 performance has improved and all of the local authority inspections were graded as either good or adequate (i.e. no services were graded as unsatisfactory or weak).



Since 2024 there has been a similar improvement in the inspection of private/voluntary services with no services graded as unsatisfactory and a significant reduction (from nine to two) of the services inspected that were graded as weak.

The number of services graded as good has increased from 30 in 2024-2025 to 48 in 2025-2026 (see graph).

Work is ongoing to improve the quality of these services each year.



Further information on the Care Inspectorate Quality Grades is available here: https://www.careinspectorate.com/index.php/inspections/change-of-grades

Fife Alcohol and Drug Partnership

Fife Alcohol and Drug Partnership have several projects aimed at supporting the key performance indicators of Fife Health and Social Care Partnership.

Alongside Fife Council's Housing Services and utilising funding from the Ending Homelessness Together fund; the ASIST Project was developed as a test of change to see if more people could be supported to live in their community for longer through direct provision and access in Emergency Departments at the point of crisis and within a housing support role.

Fife Alcohol and Drug Partnership
Promoting Recovery. Reducing Harm.

80% of Emergency Department staff are now trained in overdose awareness and Naloxone

Supporting the development of Naloxone administration being embedded in the wider Health and Safety Policy is contributing significantly to ensuring that the people of Fife are safe from potential harm. This allows staff to carry kits as well as the safe administration of it as a life preserving measure.

The Alcohol and Drug Partnership (ADP) have also supported an introduction between Scottish Families Affected by Alcohol and Drugs (SFAD) linking with the Carers Support Service. This has facilitated the ability to share resources such as trauma informed spaces and created a link for training and direct referrals of carers between the two organisations. As an ADP we wanted to ensure that carers are supported. As a community led service SFAD are building a relationship with public services and are more joined up and acting 'one step sooner' – SFAD works in partnership with the Carers Support Service to ensure individuals access timely support.

The ADP also established and lead on the Getting Liberations Right group, which, focuses on supporting those leaving prison to live in the community for longer upon release. Release can be a highly vulnerable time for those being liberated so the group reviews releases and ensures that pathways and referrals are in place to mitigate for these risks. Recent activity has seen two new Housing Officers starting in roles which are dedicated to supporting early release prisoners and short-term liberations working with His Majesty's Prison (HMP) Perth. This role has become vital in identifying individuals early for offer of support as well as having a consistent link with the prison.

Care Opinion

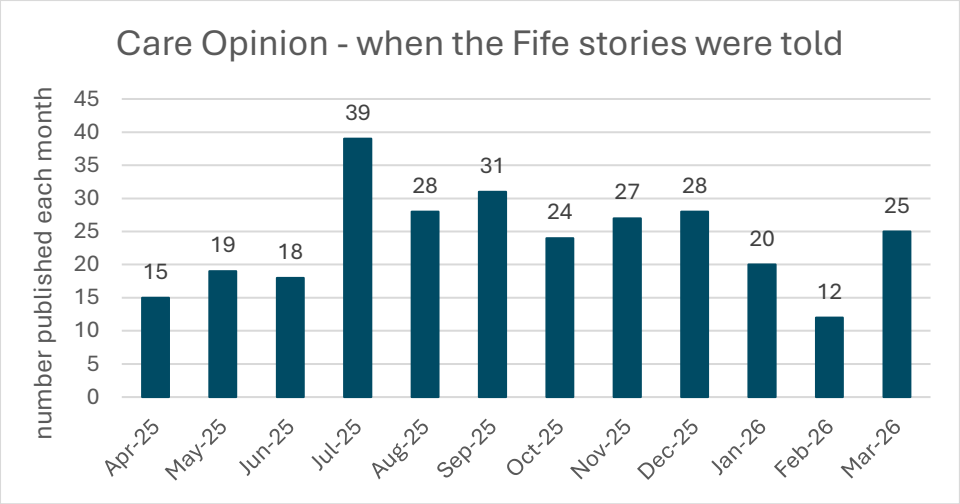
Care Opinion is a not-for-profit organisation who host a public website where service users, carers or family members can share their experiences of any health or care services they have received within the last three years. They make it safe and simple for anyone to share their story and all stories are anonymised. Stories can be shared in a variety of ways. The service user, carer, family member or whoever wants to share a story can complete a freepost leaflet, go online to Care Opinion website or use the freephone telephone number and tell their story to Care Opinion. Services can also set up a kiosk, using a mobile device for service users to share their story. Care Opinion moderate all stories before they are published. Stories can be about a journey someone has had, and one story can be about several different services. A story can have more than one response so all Services can respond. If a Service makes a change due to a story that has been told this can be shown on the story and everyone knows that a change has been made.

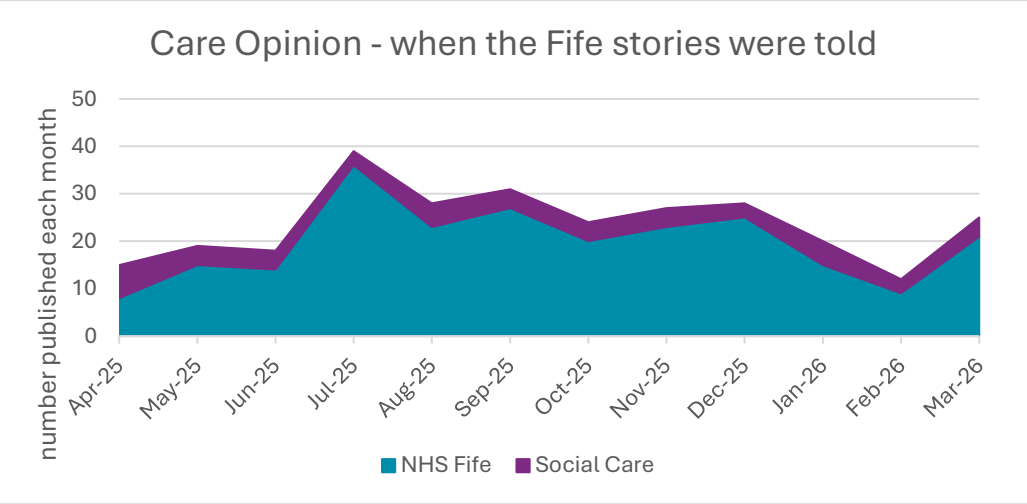
Across Scotland in the 2025-2026 financial year, 2,954 stories were shared by members of the public about health and social care services and support through Care Opinion. 88% of these stories were completely positive with 12% containing some level of criticality. These stories were responded to 3313 times by staff, and have been read more than 218,082 times.

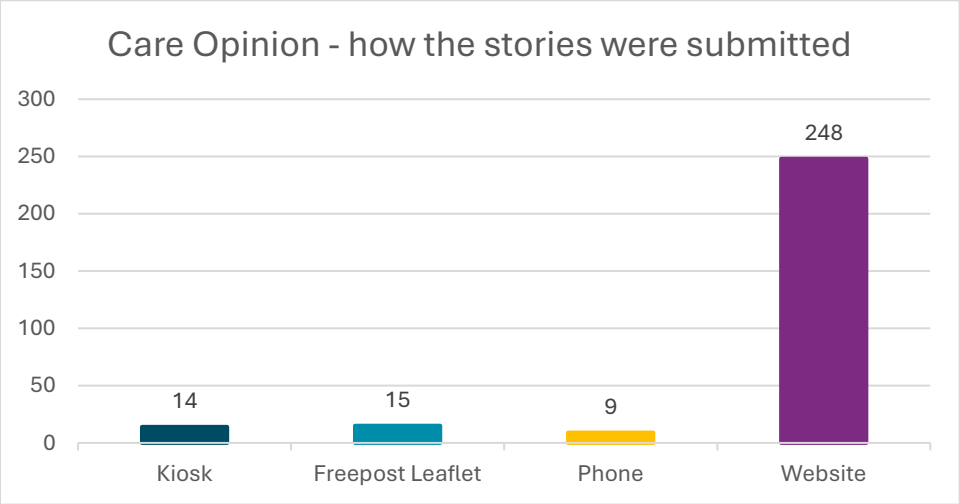
Across Fife during 2025-2026:

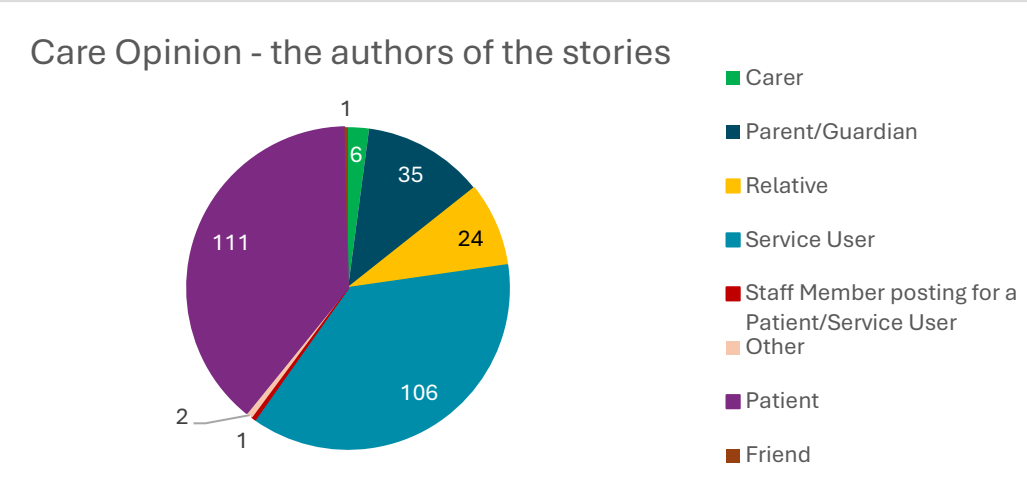
- Care Opinion received 286 stories from members of the public about Fife Health and Social Care Partnership.
- 90% of these stories were completely positive with the remaining 11% having some level of criticality.
- Staff responded to these stories 344 times.
- These stories have been read 23,288 times.

In June 2025 Fife Health and Social Care Partnership celebrated a major milestone as they became the first health and social care partnership in Scotland to surpass 1000 stories shared on Care Opinion.









These graphs show when the Fife stories were told, the methods used, and how the authors of the stories identified themselves.

Stories about Fife Social Work and Social Care

This is what people said was good:

Stories about the Partnership's NHS/health services

This is what people said was good:

Feedback from Fraser Gilmore, Chief Executive Officer of Care Opinion:

'Reaching 1,000 stories is a remarkable achievement — my warmest congratulations to everyone across Fife Health and Social Care Partnership who has made this possible. This milestone isn't just about numbers; it's a reflection of a culture built on openness, trust and compassion. It takes real courage for people to share their experiences, and real commitment from staff to listen, reflect and respond with care. Fife's leadership shows the power of listening when every voice is valued. We're honoured to support your work, and inspired by what you are achieving for the people and communities you serve'.

You can read more about Care Opinion here: www.careopinion.org.uk

Our Workforce

The Partnership's Workforce Strategy three-year plan has provided a strong foundation for workforce planning by establishing a clear strategic framework with ambitious, yet achievable objectives aligned to service priorities. Despite ongoing workforce and financial pressures, it has supported evidence-based decisions on recruitment and progression, ensuring effective use of resources while maintaining strategic alignment. Structured around the Scottish Government's Five Pillars, the plan demonstrates how initiatives from 2022 to 2025 contribute to core workforce development priorities.

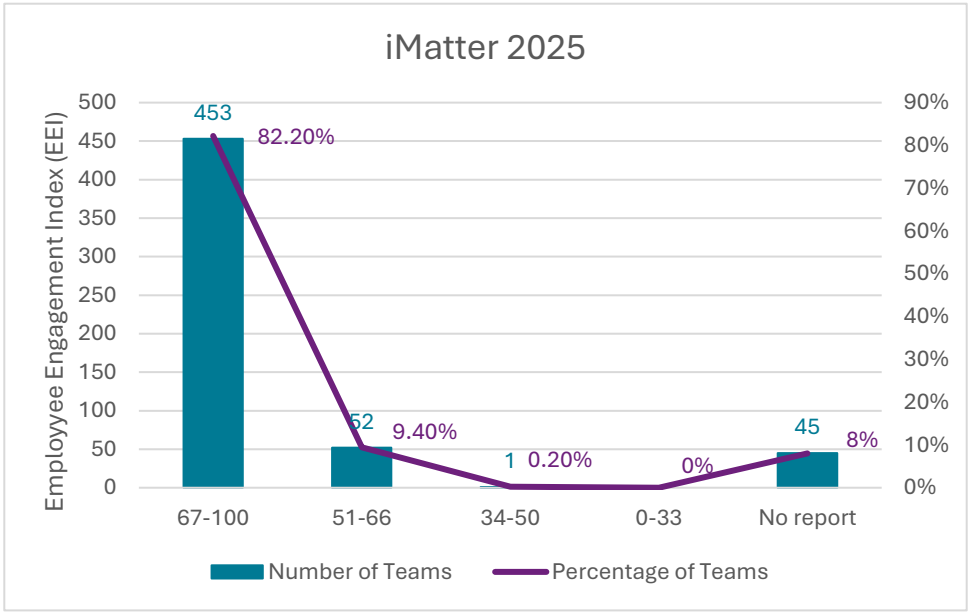
Our Workforce Action Plans from 2022 to 2025 have included a total of 176 Priority Actions led by operational leads from NHS Fife, Fife Council, independent and third sector employers. We have delivered a range of innovative workforce initiatives in Year 3 of the strategy.

- **Local outcomes** included the launch of the International Employers Network to support recruitment of displaced workers and engagement with over 200 school pupils to promote careers in health, social care, and social work.
- A **sustainable** workforce is being strengthened through initiatives such as the recruitment of Advanced Nurse Practitioners, and expanded opportunities for Graduate Apprenticeships and Mental Health Officer development.
- **Integration** through sector-wide collaboration, included a Fife-wide Leadership Programme via the Care Home Collaborative, the establishment of a Supported Living Collaborative, and joint OSCE preparation for internationally recruited nurses across fifteen care homes.
- **Wellbeing** remains a priority, with 100 Champions identified, 218 leaders completing Mentally Healthy Workplace training, and ongoing work to embed Trauma Informed Practice.
- **Workforce** development has been further supported through post-qualification pathways enabling Band 4 progression into Nursing, a jointly delivered Tube Feeding Study Day, and expanded Mental Health Officer capacity to better support individuals with complex needs.

iMatter 2025

The iMatter Continuous Improvement Tool was developed by NHS Scotland staff with the aim of engaging all staff in a way that feels right for them. The focus is on team-based understanding of experience, but it also offers information at various levels within organisations to evidence and help improve staff experience. As such, it can provide clarity on where to focus efforts for maximum impact, which in turn leads to better care, better health, and better value.

Fife Health and Social Care Partnership circulated the iMatter Survey to employees during June 2025. The survey was circulated to 6,186 recipients, and the number of employees who responded was 4,225 (68%).



Strive and Celebrate (67-100)

Monitor to Further Improve (51-66)

Improve to Monitor (34-50)

Focus to Improve (0-33)

Fife Health and Social Care Partnership – iMatter 2025

Integration and collaboration

Continued engagement with the Care Home and Care at Home Collaboratives ensures the independent sector has an equal voice in safe care delivery, with the Care at Home Collaborative achieving 80–100% attendance at fortnightly meetings and the Care Home Collaborative maintaining over 60% participation, demonstrating strong commitment to shared learning. Core membership now includes the Care Inspectorate and Fife College, strengthening alignment between regulation, training, and quality. A joint initiative during Africa Day 2025 highlighted the contribution of international workers, who make up nearly one-third of Fife's social care workforce.

Focused recruitment campaigns targeted at areas of greatest workforce pressures

Across the Partnership, a wide range of apprenticeship and training opportunities were offered, including 40 Modern Apprenticeships in social care and pharmacy roles, alongside support for more than 15 trainees and students through hybrid Earn and Learn Programmes. Two tailored recruitment films promoting careers in nursing, social care, medicine, and social work were also developed in partnership with Fife College and the Fernie Foundation, aiming to inspire the next generation to consider a career in care.

Developing career pathways that support our ability to employ Mental Health Officers

Succession planning information has now been fully developed to support key initiatives, including postgraduate opportunities. These improvements have contributed to an increase in Mental Health Officer programme placements, rising from two in 2024-2025 to three in 2025-2026.

Support managers in managing the wellbeing of our workforce

Over the past year, the Mentally Healthy Workplace training developed by Public Health Scotland has been delivered to 218 managers across the Partnership. This mandatory course, specifically for managers and supervisors, focuses on promoting positive mental health and wellbeing and provides practical examples of how to support employees experiencing mental health difficulties.

'Managers can get caught up in the day-to-day work and may not always recognise how they are coming across. The tools provided during the training are helpful in supporting that reflection'. Programme Delegate 2025

Developing leadership progrmmmes in health and social care

Now in its third year, our bespoke Leadership Programme, centred on the Insights Discovery psychometric tool, continues to offer meaningful development opportunities across the Partnership. Originally designed for the Integration Leadership Team, it has since expanded to include the Extended Leadership Team. The six-month programme provides 16 places annually and attracts participants from all sectors and portfolios, exploring core leadership themes such as leading others, managing change and transitions, effective communication, and building a positive team culture.

'The programme has really made me step back, think and reflect on myself as a leader. I do feel it has been very beneficial to me especially in aspects where I wasn't always comfortable'. Programme Delegate 2025

Increase the Partnership's ability to support the newly qualified workforce with post qualifying opportunities

The Newly Qualified Social Worker Supported Year Programme provides a structured, SSSC-aligned framework that supports the transition from academic study to professional practice, and in Fife twelve participants successfully completed the programme, with the SSSC commending the high quality of their Continued Professional Learning submissions. Alongside this, a programme to support the Newly Qualified Practitioner induction for all Partnership staff, with a particular focus on newly qualified nurses, included the HSCP Summer School, which hosted 77 staff across three in-person events, and the launch of a new monthly support programme for Mental Health and Learning Disabilities teams offering teaching, peer support, and reflective practice for new colleagues.

Provide learning for our workforce to develop skills that support higher acuity or complexity within the community or home/homely setting

We addressed critical skills gaps in social care services, particularly in relation to complex needs and psychological disorders, through a strengthened programme of targeted development. Working in partnership with the NHS Consultant Psychiatrist and the Community Mental Health Team, a robust training programme launched in November with 200 participants. In addition, a short-term Tube Feeding Study Day for 22 staff was piloted with the NHS Community Learning Disability Service, and participant feedback demonstrated increased confidence and improved understanding.

Development and Implementation of an International Employers Network

The National Workforce Strategy sets out a tripartite ambition for recovery, growth, and transformation across health and social care, with a strong focus on expanding the workforce through the recruitment of sponsored international workers and supporting their integration as New Scots. In Fife, reflecting the long-term settlement of refugees, asylum seekers, and migrants, the International Employers Network brought together 17 social care employers to launch the Network, supported by key stakeholders including the Care Inspectorate, the NES Centre for Workforce Supply, and Scottish Care.

Developing an Equality, Diversity and Inclusion (EDI) engagement programme across the Partnership

We believe that lived experience should drive meaningful change, and this was reflected in the launch of the first Neurodiversity Natter event, led by staff from our Partnership Equality Network to provide a dedicated space for neurodivergent colleagues to share their experiences and influence future policy. Insights gathered are now shaping the development of an inclusive manager toolkit.

Externally, our commitment to continuous improvement has been recognised through improving from Bronze to Silver status in the Equality Pathfinders Recognition Scheme.

Support our workforce to take responsibility for their own health and wellbeing

We recruited volunteers to act as Wellbeing Ambassadors, helping to foster a culture of health and engagement across the workforce. Regular check-ins were held to share updates, plan future activities, and provide ongoing support for their role. The initiative was well received, with more than 100 staff members engaging with the wellbeing agenda and formally recognised as Wellbeing Champions.

Drive the implementation of Trauma Informed Practice

A series of information sessions was delivered to the Wellbeing Oversight Group, the Qualifications Assessment Centre, and the Wellbeing Champions Network, alongside contributions to Fife Voluntary Action's Carers Forum and Mental Health Forum. A long-term impact evaluation programme is underway to measure learning outcomes across the Partnership's Social Work and Social Care Teams, NHS Midwifery and Nursing Practice Educators, and (Scottish Association for Mental Health (SAMH) Fife Services, with findings set to inform the review of trauma-informed practice across Fife in the coming year. As part of the wider communications plan, the first bite-sized learning video launched in April 2025, focusing on debunking common myths surrounding trauma-informed practice.

Testimonials from partners include:

'*Over the last three years, I've had the great privilege of working with Fife Health & Social Care Partnership. Together, we collaborated across all localities, meeting so many incredible people, some of whom are featured in a film we produced together. The commitment to embedding What Matters to You? and Intelligent Kindness truly celebrates the very best of Fife*'. Tommy Whitelaw, Health and Social Care Alliance Scotland

'We have something quite special in Fife in the way that Collaboration and Integration has been embraced and nurtured. The value of our workforce, whoever the health and or social care employer is, understands the need to work in partnership, across the whole system and across sectors'.
Paul Dundas, Independent Sector Lead

'The 3-year workforce strategy has provided a strong foundation for integrated, person-centred care across Fife. From a staff-side perspective, its collaborative development and clear alignment with the Five Pillars framework have been key to its success'.
Vicki Bennett, NHS Fife Staff Side Lead, and LPF Co-Chair/Partnership Co-ordinator

Financial Performance

The financial position for public services continues to be exceptionally challenging, with the Integration Joint Board required to operate within significant and sustained budget constraints. It is therefore essential that available resources are targeted effectively to support delivery of the priorities set out within the Strategic Plan. Like the rest of Scotland, Fife continues to experience sustained and increasing demand for health and social care services, with more people living longer, often with multiple and complex needs. At the same time, the cost of delivering care continues to rise, and available funding has not kept pace with these pressures. Despite this context, Fife Health and Social Care Partnership has continued to deliver essential services, strengthen financial governance, and progress key areas of transformation through close partnership working with NHS Fife, Fife Council, commissioned providers and local communities.

The budget for services delegated to and managed by the Partnership in 2024–2025 was £818.771m. The year-end position reflected an overspend of £9.515m, which was supported by partner organisations in accordance with the Integration Scheme.

The principal drivers of financial pressure were:

- Increased demand for adult and older people's social care services
- Mental health and inpatient pressures, including reliance on agency staffing
- Cost pressures across commissioned services and out-of-area placements

Operational performance during 2025–2026 demonstrates the resilience of services in maintaining delivery within a system under sustained pressure, characterised by high demand, increasing complexity of need, workforce constraints and continued reliance on commissioned care.

In response, the Partnership has strengthened its approach to operational and financial management. This has included:

- Enhanced data and performance dashboards, improving visibility of key system drivers such as care home utilisation, home care capacity and delayed discharge.
- Strengthened financial governance through regular engagement between the Chief Finance Officer, NHS Fife Director of Finance and Fife Council Section 95 Officer.
- Increased frequency of tripartite meetings, bringing together senior clinical, social work and finance leaders to support whole-system oversight.
- A strengthened Progress Review Update (PRU) process, providing enhanced accountability and a sharper focus on the delivery of savings and financial recovery actions.

Best Value

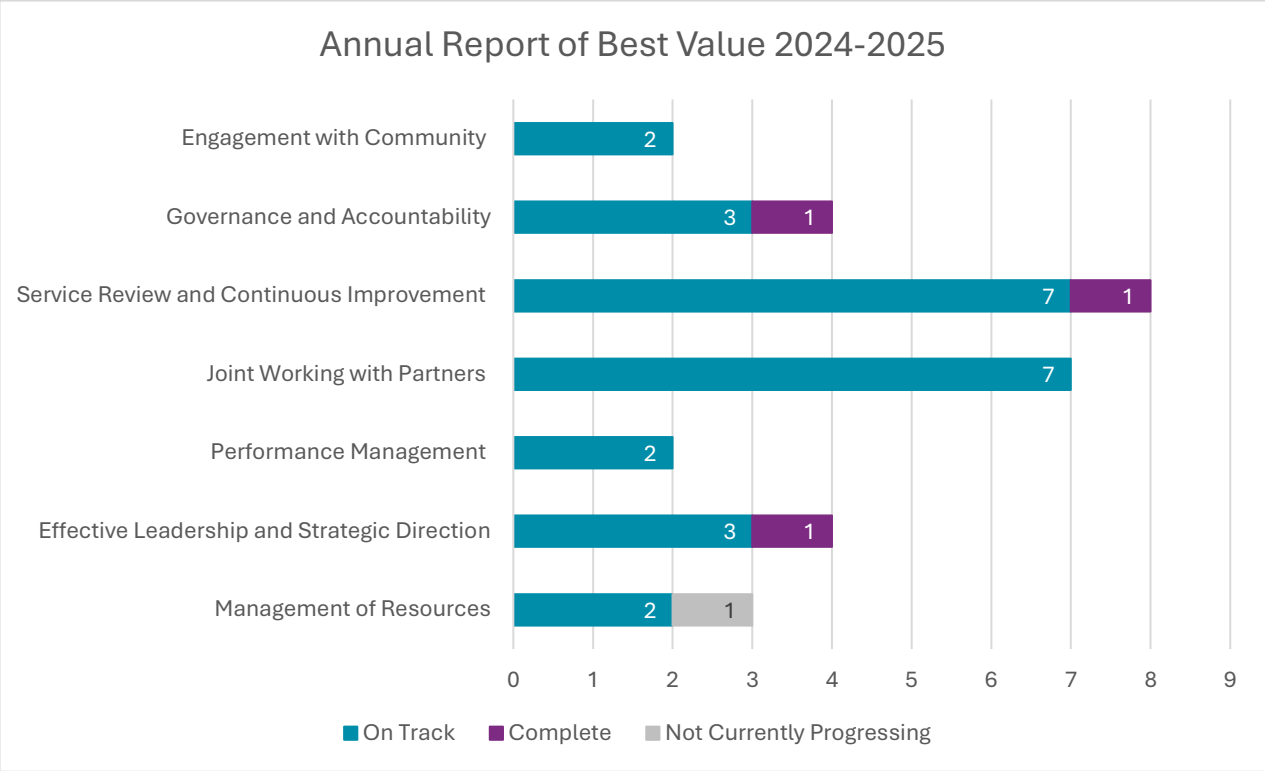
The Local Government (Scotland) Act 2003 places a statutory duty on local government bodies and integration joint boards to secure Best Value. Fife Integration Joint Board (IJB) agreed it's Best Value Framework in 2019. The Best Value Framework sets out these key areas to demonstrate compliance with the principles of Best Value:

1. Management of Resources (financial assurance and monitoring of IJB budget resources, medium term financial planning, workforce planning).
2. Effective Leadership and Strategic Direction (commitment to delivering integration among board and committee members, the Strategic Planning Group, and senior managers, through the Partnership's Strategic Plan 2023-2026).
3. Performance Management (regular reporting and scrutiny of IJB performance, achievement against health and social care outcomes and progressing integration).
4. Joint Working with Partners (demonstration of effective approach to joint working with partners to progress integration through Care Home and Care at Home Collaboratives, the Reimagining the Third Sector Project, and development of the Methil Care Village).
5. Service Review and Continuous Improvement (regular reviews of service activity and scope for integration through projects such as the Home First Programme, Primary Care Improvement Plan, and the Programme Management Office).
6. Governance and Accountability (demonstrated through public performance information such as the Scheme of Delegation, the Financial Regulations, and the Directions Policy).
7. Engagement with Community (regular engagement and consultation with stakeholders through Locality Planning Groups and the Carers Forum).

Annual assessments of how the IJB has demonstrated Best Value are reported to the Audit and Assurance Committee and then on to the IJB each year. The Annual Report for Best Value 2024-2025 was reviewed by the IJB in March 2026. This included a summary of work activity that is currently in place and can be evidenced in each area of the Best Value Framework. Additionally, it provided an update on progress with further improvement activities which are being progressed and are due to complete by March 2027.

In March 2026:

- 26 actions (87%) were on track
- 3 actions (10%) were complete
- 1 action (3%) not currently progressing – awaiting clarification on national reforms.



Status of Best Value activities in March 2026.

During 2025-2026, Fife Integration Joint Board continued to secure Best Value through robust planning, effective governance and the integrated delivery of health and social care services. Planning and delivery of integration functions were aligned to the Strategic Plan 2023-2026, ensuring resources were directed toward prevention, early intervention and community-based support that improve outcomes while making best use of public finances. Strong performance management, service review and partnership working with NHS Fife, Fife Council and the third and independent sectors supported efficiencies, reduced duplication and improved coordination of care. This approach, alongside ongoing workforce development, financial scrutiny and continuous improvement activity, has contributed to delivering high-quality services, demonstrating accountability, and ensuring sustainable value for money for the people of Fife.

Conclusion

This Annual Performance Report for 2025–2026 provides a comprehensive assessment of performance in relation to Fife Integration Joint Board's Strategic Plan and its delivery of health and social care services. It evaluates progress against the National Health and Wellbeing Outcomes, describing the extent to which the arrangements set out in the Strategic Plan, and the expenditure reported in the financial statement, have achieved or contributed to achieving these outcomes.

Drawing on quantitative data, qualitative evidence, and lived experience, the report presents performance against the national indicators, including comparisons with the five preceding reporting years, to support a clear understanding of trends and areas of improvement. It also demonstrates an ongoing focus on delivering Best Value through effective use of resources, prevention and early intervention, and effective partnership working with communities, the third sector, and wider system partners.

In accordance with our three-year strategic planning cycle, during 2025 to 2026, Fife Health and Social Care Partnership carried out a review of the Strategic Plan 2023-2026. This included an Evidence Review and a Strategic Needs Assessment for all Fife localities, comprehensive engagement with employees, partner agencies, local communities and other stakeholder groups, along with the development of an Equality Impact Assessment and a Market Facilitation Plan. The Partnership reviewed its regular performance reports to determine the effectiveness of the Directions issued to Fife Council and NHS Fife in delivering the vision set out in the Strategic Plan 2023-2026. This Directions Report was reviewed and approved by Fife Integration Joint Board in January 2026.

The Partnership also reviewed and updated its equality outcomes, ensuring that the new equality outcomes for 2026 to 2029 meet the requirements of the Equality Act 2010 (including the Public Sector Equality Duty, the Fairer Scotland Duty, and the (Specific Duties) (Scotland) Regulations 2012) as well as aligning with our new strategic priorities.

All of this work has supported the development of a new Strategic Plan for Fife 2026-2029, which was approved by the Integration Joint Board in March 2026, and sets out our strategic priorities for the next three years.

You can find all of these documents, along with the annual performance reports which detail the changes and improvements we have delivered over the last three years, on our website here: www.fifehealthandsocialcare.org/about-us/publications/

Appendix 1 – Governance

Fife Integration Joint Board

Fife Integration Joint Board Fife is one of the largest Health and Social Care Partnerships in Scotland, next to Edinburgh and Glasgow, with over 6,000 staff, who are employed by NHS Fife or Fife Council, and an annual budget of around £600 million. The Integration Joint Board (IJB) is the decision-making body for the Partnership. The Board includes representatives from NHS Fife, Fife Council, partners agencies, including the third and independent sectors, and members of the public.

The Chair of the IJB is David Ross, and the Vice Chair is Colin Grieve.

Voting Members

- David Ross (Chair)
- Alastair Morris (Vice Chair)
- Chris McKenna
- David Alexander
- Dave Dempsey
- Eugene Clarke
- Gilian McAuley
- John Kemp
- Lynn Mowatt
- Lynne Parsons
- Patrick Browne
- Rosemary Liewald
- Sam Steele
- Craig MacDonald

Professional Advisors (Non-Voting)

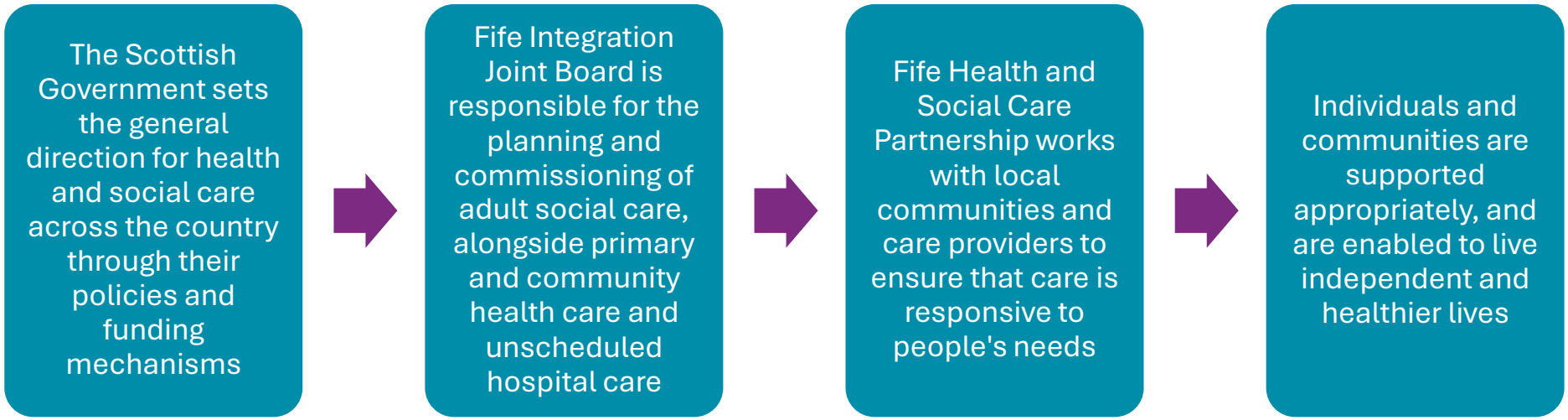
- Lynne Garvey (Chief Officer of IJB, Director of Fife Health and Social Care Partnership)
- Tracy Hogg (Chief Finance Officer)
- James Ross (Chief Social Work Officer)
- Jackie Drummond (Medical Representative)
- Lynn Barker (Director of Nursing/Nurse Representative)
- Caroline Cherry (Principal Social Work Officer)
- Aylene Kelman (Deputy Medical Director)

Other Stakeholders (Non-Voting)

- Amanda Wong (Associate Director, Allied Health Professionals)
- Debbie Fyfe (Joint TU Secretary)
- Ken Fraser (Public Rep)
- Kenny McCallum (Staff, Fife Council Representative)
- Kenny Murphy (Third Sector Representative)
- Morna Fleming (Carers Representative)
- Paul Dundas (Independent Sector Representative)
- Vicki Bennett (Staff, NHS Fife Representative)
- Susannah Mitchell (GP Representative)
- Fiona Henderson (GP Representative)

In responding to the Public Bodies (Joint Working) (Scotland) Act 2014, Fife Council and NHS Fife agreed to integrate services and functions as required within the Act, delegating these to Fife Integration Joint Board. The IJB is responsible for the strategic planning of the functions delegated to it and for ensuring oversight of the delivery of the services conferred on it by the Act through the locally agreed arrangements set out in the Integration Scheme.

The IJB is commonly referred to as Fife Health and Social Care Partnership. This is the public facing aspect of Fife Integration Joint Board and is essentially the employees from both organisations working in partnership to deliver health and social care services.



The Integration Joint Board, through the Chief Officer, is responsible for the operational oversight of integrated health and social care services, through the issuing and monitoring of 'Directions'. This is the legal mechanism that directs NHS Fife and Fife Council to deliver health and social care services using the integrated budget to achieve agreed outcomes in accordance with the Strategic Plan.

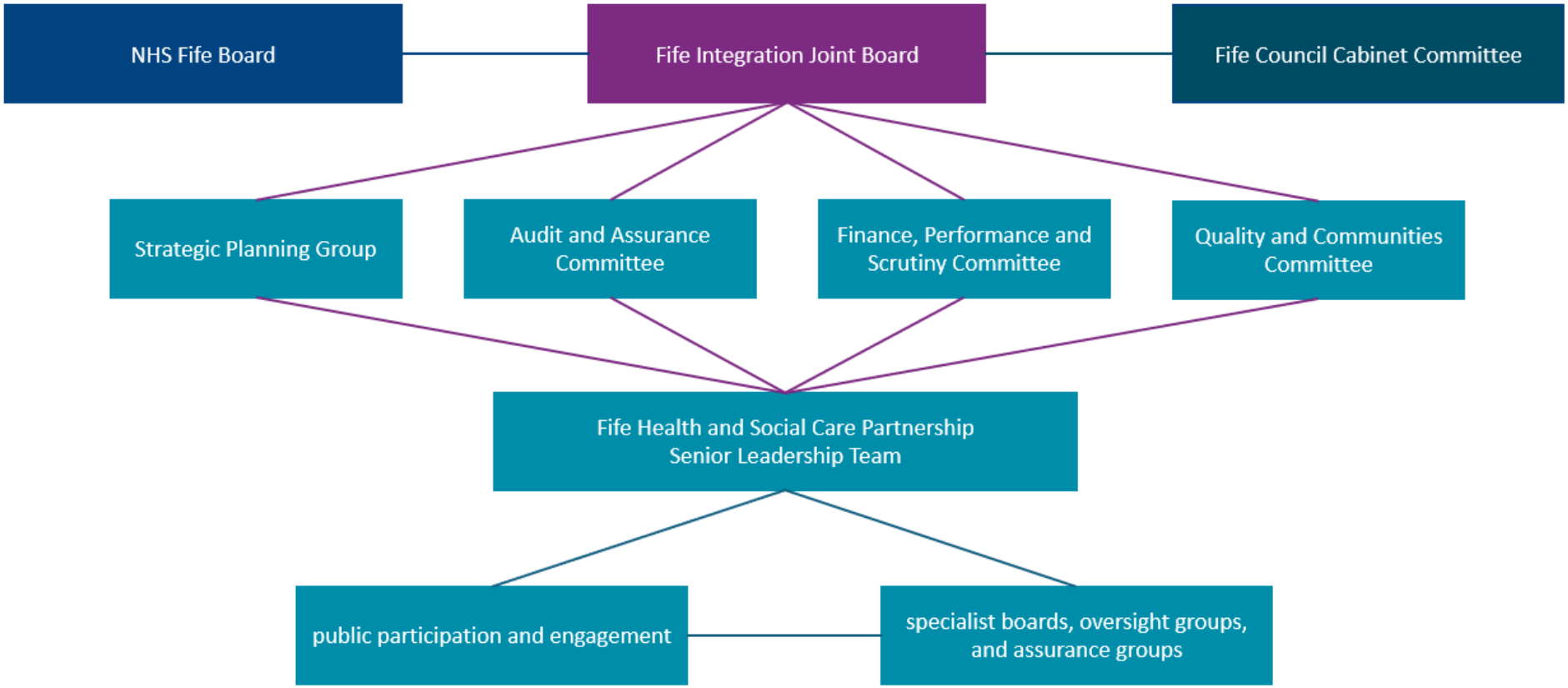
More information on the health and social care services and functions delegated to the IJB are set out within Fife's Integration Scheme which is available on our website: www.fifehealthandsocialcare.org.

Significant Decisions

Section 36 of the Public Bodies (Joint Working) (Scotland) Act 2014 mandates public involvement and consultation when an integration authority makes 'significant decisions' regarding health and social care services that are not already covered in their strategic plan.

In Fife, all of the IJB's significant decisions are managed through the Board's strategic planning process and governance structures; this includes input from the IJB committees, the Strategic Planning Group, specialist oversight groups, and wider public engagement.

During 2025-2026 no significant decisions were made outside of the Strategic Plan 2023-2026 by Fife Integration Joint Board.



Fife Integration Joint Board governance structure

Senior Leadership Team

The Senior Leadership Team provides operational management for Fife Health and Social Care Partnership under the leadership of Lynne Garvey, the Director of Health and Social Care.

Lynne Garvey
Chief Officer and Director of Health & Social Care

Operational Service Delivery

SLT leads for orperational management delivery and business outcoes for a portfolio of services

Lisa Cooper
Head of Integrated Primary & Preventive Care Services

Chris Conroy
Head of Integrated Community Care Services

Karen Marwick
Head of Complex & Critical Care Services

Business Enabling

SLT leads for Corporate Services and functions inc. financial governance, strategic planning, performance, transformational change and organisational development

Tracy Hogg
Chief Finance Officer

Vanessa Salmond
Head of Strategic Planning & Performance

Roy Lawrence
Head of Culture, Engagement and Communities

Professional & Quality Services

SLT leads for quality, safety, experience, clinical and care governancee, professional regulation and standards

Lynn Barker
Director of Nursing

Caroline Cherry
Principal Social Work Officer

Dr Aylene Kelman
Deputy Medical Director

Strategic Planning Group

Fife Health and Social Care Partnership delivers a wide range of health and social care services to individuals and communities across Fife. Working with partner agencies, organisations in the independent and third sectors, local groups and national bodies, the Partnership supports and cares for people of all ages, and with very different circumstances, needs, and aspirations.

The Strategic Planning Group is responsible for the development and oversight of the Strategic Plan for the Partnership. This includes:

- supporting Fife Integration Joint Board to review the Strategic Plan at least every three years,
- contributing to the development of supporting strategies, delivery plans and annual reports,
- monitoring progress and assessing performance in relation to the implementation of the Strategic Plan, and,
- ensuring compliance with relevant legislative and statutory requirements.

The Chair of the Strategic Planning Group is Alastair Morris. During 2025 to 2026 the Strategic Planning Group (SPG) met five times, contributed to the development of two new strategies and eight strategic annual reports, and reviewed seven interim reports (Flash Reports).

2 New Strategies

Mental Health and Wellbeing Strategy
Strategic Plan (2026 – 2029)

8 Annual Reports

Advocacy Strategy
Alcohol and Drug Partnership Strategy
Carers Strategy
Commissioning Strategy
Local Housing Strategy
Prevention and Early Intervention Strategy
Primary Care Strategy
Workforce Strategy

7 Flash Reports

Advocacy Strategy
Alcohol and Drug Partnership Strategy
Commissioning Strategy
Digital Strategy
Home First Strategy
Local Housing Strategy
Workforce Strategy

Appendix 2 – National Outcomes and Priorities

National Health and Wellbeing Outcomes for Health and Social Care		Fife Strategic Themes
1	People are able to look after and improve their own health and wellbeing and live in good health for longer.	Local, Sustainable, Wellbeing, Outcomes
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.	Local
3	People who use health and social care services have positive experiences of those services, and have their dignity respected.	Wellbeing
4	Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Local, Wellbeing
5	Health and social care services contribute to reducing health inequalities.	Outcomes
6	People who provide unpaid care are supported to look after their own health and well-being, including to reduce any negative impact of their caring role on their own health and well-being.	Sustainable
7	People using health and social care services are safe from harm.	Outcomes
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.	Integration
9	Resources are used effectively and efficiently in the provision of health and social care services.	Sustainable, Integration

Further information is available here: www.gov.scot/publications/national-health-wellbeing-outcomes-framework

Health and Social Care Standards		Fife Strategic Themes
1	I experience high quality care and support that is right for me	Local, Wellbeing, Outcomes
2	I am fully involved in all decisions about my care and support	Local, Wellbeing, Outcomes
3	I have confidence in the people who support and care for me	Local, Wellbeing, Outcomes
4	I have confidence in the organisation providing my care and support	Sustainable, Integration
5	I experience a high-quality environment if the organisation provides the premises	Outcomes, Sustainable, Integration

Further information is available here: www.gov.scot/publications/health-social-care-standards-support-life

Public Health Priorities for Scotland		Fife Strategic Themes
1	A Scotland where we live in vibrant, healthy and safe places and communities.	Local, Wellbeing
2	A Scotland where we flourish in our early years.	Local, Wellbeing
3	A Scotland where we have good mental wellbeing.	Wellbeing, Outcomes
4	A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs.	Outcomes
5	A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all.	Outcomes, Sustainable, Integration
6	A Scotland where we eat well, have a healthy weight and are physically active.	Outcomes

Further information is available here: www.gov.scot/publications/scotlands-public-health-priorities

Appendix 3 – National Indicators

The national Integration Indicators (Indicators 1 to 9) are reported in the Scottish Health and Care Experience (HACE) Survey commissioned by the Scottish Government. The Survey is run every two years and is sent out by post to a random sample of people who are registered with a General Practitioner (GP) in Scotland. It asks people about their experiences of accessing and using health and social care services. The information collected enables comparisons with different health and social care partnerships across Scotland, and across different years. The information published here is from the 2026 HACE Survey.

Fife's performance for 2025-2026 compared to Scotland rate.

Key

Green	Performance is as expected. Fife's performance is not statistically significant to previous performance, and is similar or better than national performance (Scotland rate).
Amber	Risk is evident that Fife's performance is starting to decline compared to previous performance, and/or a decline compared to national performance (Scotland rate).
Red	Fife's performance is below expected levels and there is a statistically significant decline compared to previous performance and/or a decline compared to national performance (Scotland rate).

Use of 2025 calendar year data instead of 2025-2026 financial year data for indicators 12, 13, 14, 15 and 16

The primary source of data for these indicators are Scottish Morbidity Records (SMRs) which are nationally collected discharge-based hospital records. In accordance with the recommendations made by Public Health Scotland (PHS) and communicated to all health and social care partnerships, the most recent reporting period available with complete and robust data is calendar year 2025. Reporting on 2025 calendar year rather than 2025-2026 financial year may not fully reflect local activity, however, this is still recommended due to data quality and completeness levels at the time of reporting.

Indicator 20

PHS has not provided information for indicator 20 beyond 2019-2020 because detailed Patient Level Information Costing System (PLICS) cost information is not available. PHS previously published information to calendar year 2020 using costs from 2019-2020 as a proxy but, given the impact of the COVID-19 pandemic on activity and expenditure, PHS no longer consider this appropriate.

Further details for all indicators, including long term trends from 2013-2014, are available on the Public Health Scotland website:

https://publichealthscotland.scot/publications/core-suite-of-integration-indicators/core-suite-of-integration-indicators-7-july-2026/

Outcome Indicators		Fife Partnership Rate	Scotland Rate
NI - 1	Percentage of adults able to look after their health very well or quite well	90.9%	90.6%
NI - 2	Percentage of adults supported at home who agreed that they are supported to live as independently as possible	74.9%	73.6%
NI - 3	Percentage of adults supported at home who agreed that they had a say in how their help, care, or support was provided	61.3%	63.9%
NI - 4	Percentage of adults supported at home who agreed that their health and social care services seemed to be well co-ordinated	62.5%	65.0%
NI - 5	Total % of adults receiving any care or support who rated it as excellent or good	64.8%	72.1%
NI - 6	Percentage of people with positive experience of the care provided by their GP practice	67.1%	70.7%
NI - 7	Percentage of adults supported at home who agree that their services and support had an impact on improving or maintaining their quality of life	68.2%	71.7%
NI - 8	Total combined % carers who feel supported to continue in their caring role	28.1%	31.9%
NI - 9	Percentage of adults supported at home who agreed they felt safe	74.0%	74.7%
NI - 10	Percentage of staff who say they would recommend their workplace as a good place to work.	NA	NA
NI - 11	Premature Mortality Rate per 100,000 population	434	426
NI - 12	Rate of emergency admissions per 100,000 population for adults	14,315	11,470
NI - 13	Rate of emergency bed day per 100,000 population for adults	110,559	108,988
NI - 14	Readmissions to hospital within 28 days of discharge per 1,000 discharges	121	104

NI - 15	Proportion of last 6 months of life spent at home or in a community setting	**90.2%**	89.3%
NI - 16	Falls rate per 1,000 population (65+)	**29.6**	22.2
NI - 17	Proportion of care and care services rated good or better in Care Inspectorate inspections	**80.1%**	83.1%
NI - 18	Percentage of adults with intensive care needs receiving care at home	**55.5%**	64.7%
NI - 19	Number of days people aged 75+ spend in hospital when they are ready to be discharged per 1,000 population	**662**	873
NI – 20	Percentage of health and care resource spent on hospital stays where the patient was admitted in an emergency (*Data only available to 2019-2020).	NA*	NA
NI – 21	Percentage of people admitted to hospital from home during the year who are discharged to a care home	NA**	NA
NI - 22	Percentage of people who are discharged from hospital within 72 hours of being ready	NA**	NA
NI - 23	Expenditure on end of life care, cost in last 6 months per death	NA**	NA

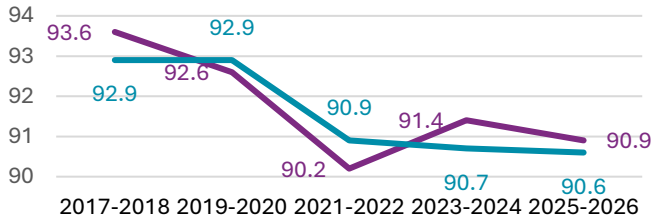
* Data is only available until 2019-2020.

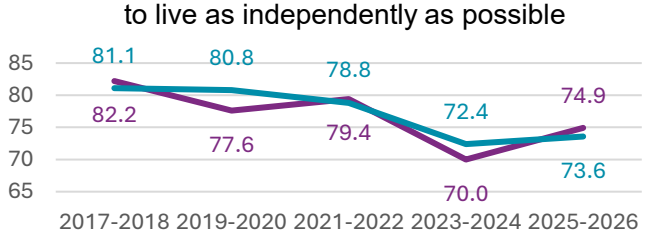
** Data is not currently available.

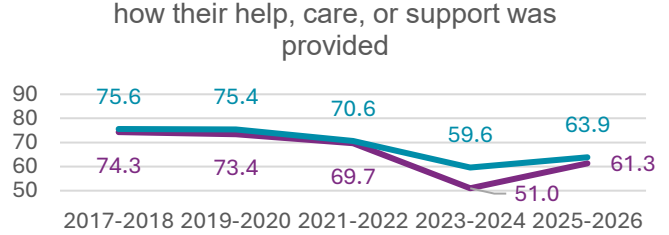
Graphs for indicators 1 to 9 and 11 to 19 are included below, this includes data up to 2025-2026.

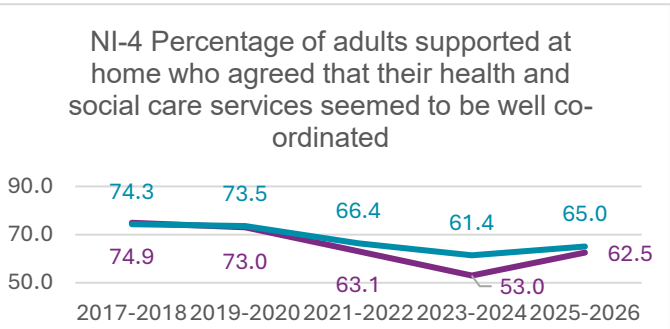
Please note information for 2025 for N1-11 and NI-18 is not available. The latest data available for these indicators is from 2024.

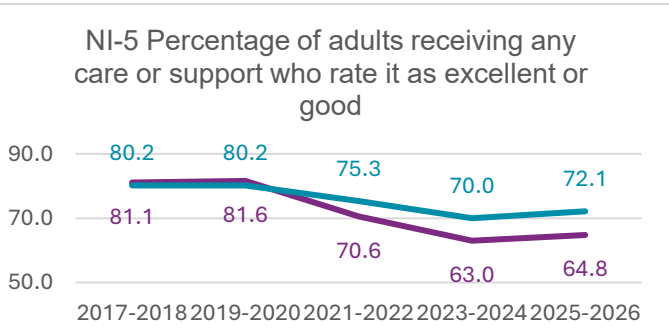
Key — Fife — Scotland

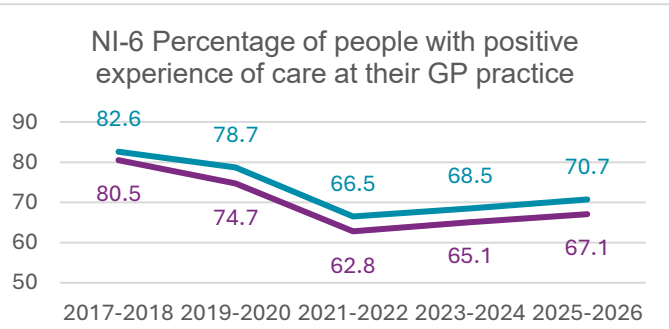


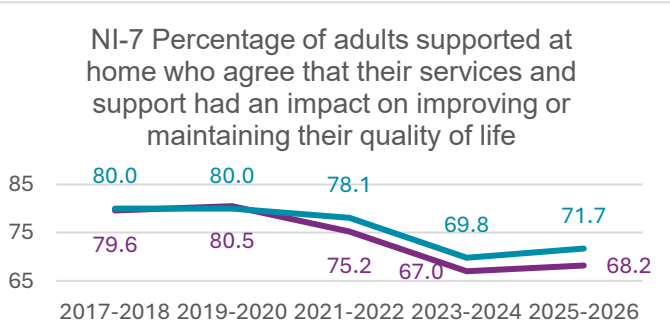


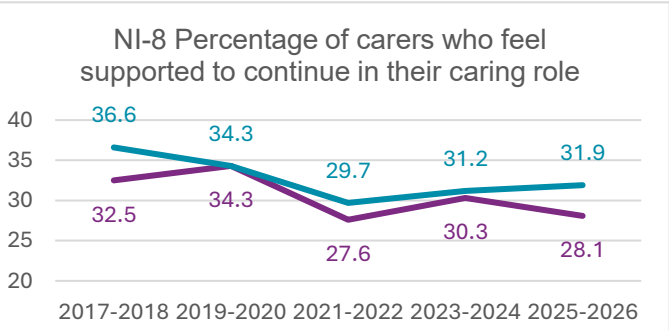


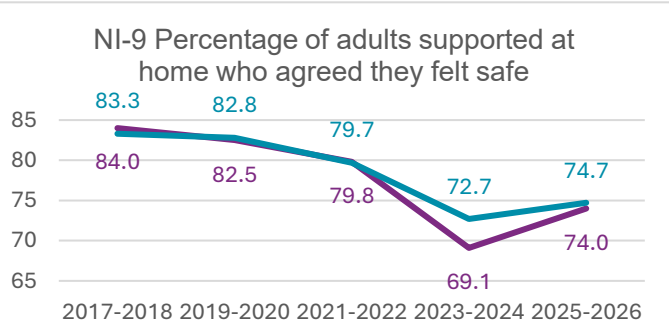






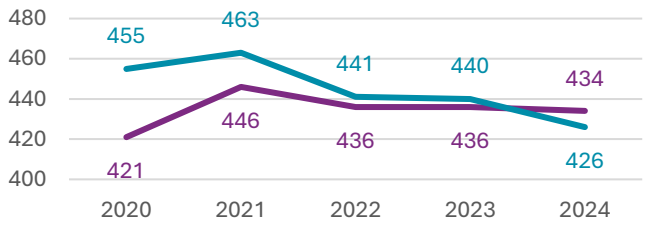




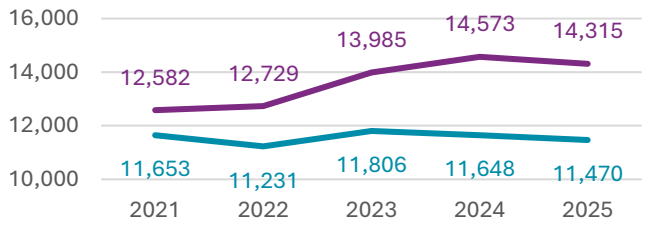


Fife Scotland

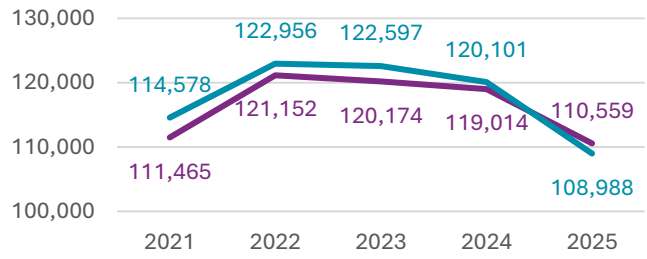
NI-11 Premature mortality rate per 100,000 persons; by calendar year



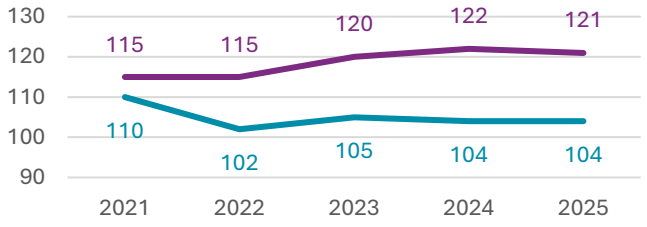
NI-12 Emergency admissions rate per 100,00 population for adults (18+)



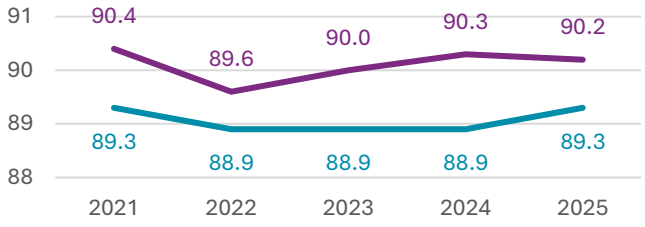
NI-13 Emergency bed day rate



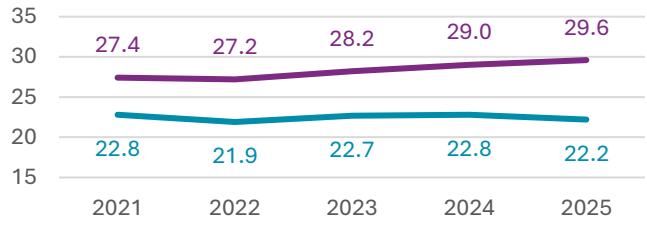
NI-14 Readmission to hospital within 28 days (rate per 1,000 discharges)



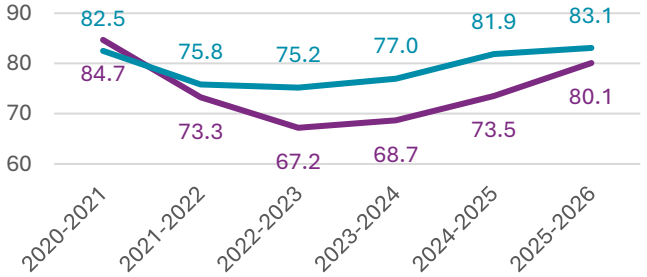
NI-15 Proportion of last 6 months of life spent at home or in a community setting



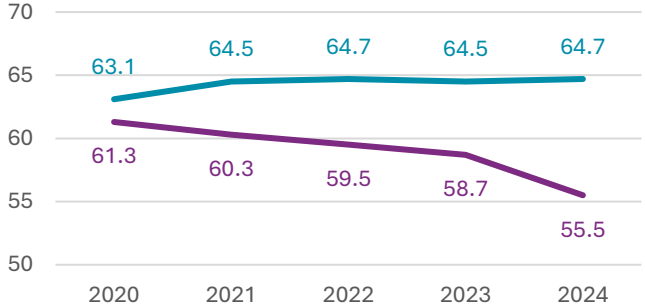
NI-16 Falls rate per 1,000 population aged 65+



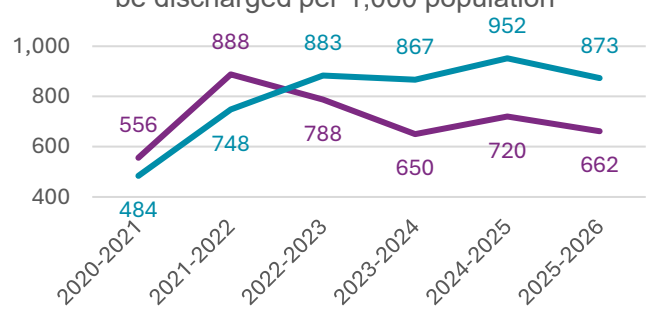
NI-17 Proportion of care services graded 'good' (4) or better in care inspectorate inspections



NI-18 Percentage of adults with intensive care needs receiving care at home



NI-19 Number of days people aged 75+ spend in hospital when they are ready to be discharged per 1,000 population



National MSG Indicators

(Ministerial Strategic Group for Health and Community Care)

ID	Indicator	Latest data	Fife Partnership Rate	Scotland Rate
MSG 1a	Emergency Admissions (rate per 100,000)	2024-2025	**13,793**	11,604
MSG 2a	Number of unscheduled hospital bed days (rate per 100,000)	2024-2025	**84,131**	86,774
MSG 3a	A&E Attendances (rate per 100,000)	2025-2026	**24,941**	26,010
MSG 4	Delayed Discharge bed days	2025-2026	**14,394**	15,575
MSG 5a	Proportion of last 6 months of life spent at home or in a community setting	2025	**90.2%**	89.3%

Key

Green	Performance is as expected. Fife's performance is not statistically significant to previous performance, and is similar or better than national performance (Scotland rate).
Amber	Risk is evident that Fife's performance is starting to decline compared to previous performance, and/or a decline compared to national performance (Scotland rate).
Red	Fife's performance is below expected levels and there is a statistically significant decline compared to previous performance and/or a decline compared to national performance (Scotland rate).

Bandrum Nursing Home – February 2026

Appendix 4 – Financial Information 2020 – 2025

Delegated Services (as at 31 March)	2020			2021			2022		
	Budget	Provisional Outturn	Variance	Budget	Provisional Outturn	Variance	Budget	Provisional Outturn	Variance
Objective summary	£m	£m	£m	£m	£m	£m	£m	£m	£m
Community Services	107.695	102.295	-5.4	123.319	120.719	-2.600	117.475	109.699	-7.776
Hospitals and Long-Term Care	54.839	57.197	2.358	56.000	56.666	0.666	59.103	64.717	5.614
GP Prescribing	73.807	73.799	-0.008	70.979	70.955	-0.024	75.581	76.337	0.756
Family Health Services	99.765	99.749	-0.016	103.878	104.367	0.489	115.186	115.554	0.368
Children's Services	17.544	17.077	-0.467	18.202	16.913	-1.289	16.198	15.789	-0.409
Social Care	204.635	214.814	10.179	243.682	239.459	-4.223	262.759	256.113	-6.646
Housing	1.665	1.656	-0.009	1.324	1.324	0.000	1.699	1.329	-0.37
Total Health & Social Care	**559.95**	**566.589**	**6.639**	**617.384**	**610.403**	**-6.981**	**648.001**	**639.538**	**-8.463**

Delegated Services (as at 31 March)	2023 Budget	2023 Provisional Outturn	2023 Variance	2024 Budget	2024 Provisional Outturn	2024 Variance	2025 Budget	2025 Provisional Outturn	2025 Variance
Objective summary	£m	£m	£m	£m	£m	£m	£m	£m	£m
Community Services	131.850	116.532	-15.319	159.531	156.909	-2.622	177.195	175.999	-1.196
Hospitals and Long-Term Care	66.468	77.071	10.603	62.840	75.319	12.479	70.823	74.983	4.160
GP Prescribing	79.202	85.643	6.441	81.314	86.936	5.622	86.395	85.566	-0.829
Family Health Services	122.801	124.329	1.528	130.860	131.216	0.356	138.936	139.346	0.410
Children's Services	17.893	17.737	-0.156	18.401	18.732	0.331	20.350	19.988	-0.362
Social Care	279.741	282.222	2.481	285.440	303.291	17.851	315.852	323.184	7.332
Housing	1.737	1.737	0.000	1.633	1.634	0.000	1.646	1.646	0.000
Total Health & Social Care	**699.692**	**705.27**	**5.578**	**740.020**	**774.036**	**34.017**	**811.197**	**820.712**	**9.515**

Community Led Support Team

Young Carers Activity Day at Cluny – February 2026

References

National Health and Social Care Health and Wellbeing Outcomes: https://www.gov.scot/publications/national-health-wellbeing-outcomes-framework/

Public Health Priorities for Scotland: https://www.gov.scot/publications/scotlands-public-health-priorities/pages/1/

Health and Social Care Standards: https://www.gov.scot/publications/health-social-care-standards-support-life/

Public Bodies (Joint Working) (Scotland) Act 2014: https://www.legislation.gov.uk/asp/2014/9/contents/enacted

Fife Health and Social Care Partnership: https://www.fifehealthandsocialcare.org

Care Inspectorate: https://www.careinspectorate.com