



Dumfries and Galloway
Integration Joint Board

4th March 2025

This Report relates to
Item 12 on the Agenda

Right Care, Right Place Progress Update – February 2025

Paper presented by Stephanie Mottram

For Noting

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List of Background Papers:	NA
Appendices:	Appendix 1 - RCRP Implementation – Phase 1 (1 to 6 months)

Direction Required to Council, Health Board or Both	Title	Reference Number
	Direction to:	
	1. No Direction Required	X
	2. Dumfries and Galloway Council	
	3. NHS Dumfries and Galloway	
	4. Dumfries and Galloway Council and NHS Dumfries and Galloway	

1. Introduction

- 1.1 In October 2024 the Integration Joint Board (IJB) approved proposals resulting from the “Right Care, Right Place” consultation. This report provides the IJB an outline of the progress in the first 4 months since this decision was made.

2. Recommendations

- 2.1 **The Integration Joint Board is asked to:**
- **Discuss and note the progress so far in respect of Right Care, Right Place**

3. Background and Main Report

- 3.1 Please refer to Appendix 1 and information provided below:

MOFFAT

- GP Practice work tendered, awarded & commenced: Work now ongoing – moves scheduled for April 2025.
- Plan for Home Teams Accommodation linking to completion of work: ongoing – space identified (awaiting completion gong GP accommodation)
- Space and introduction of Virtual Clinic Space: space identified and logistical and service planning ongoing
- Vaccination accommodation: complete

THORNHILL

- Home Teams Accommodation: complete
- Space and introduction of Virtual Clinic Space: space identified and logistical and service planning ongoing
- Vaccination accommodation: complete

KIRKCUDBRIGHT

- Home Teams Accommodation: complete
- Space and introduction of Virtual Clinic Space: space identified and logistical and service planning ongoing
- Vaccination accommodation: complete

NEWTON STEWART

- Home Teams Accommodation: complete
- Space and introduction of Virtual Clinic Space: space identified and logistical and service planning ongoing
- Vaccination accommodation: complete
- Signage being changed to reflect Community Hubs
- Feedback obtained from other Directorates and now actively working to accommodate needs through planning of use of space and any alteration / equipment necessary (this includes virtual clinic space).
- Progressing Day Hospice sessions at hubs linking with paper completed by Strategic Planning outlining potential delivery models. This will also link with proposals for frailty services currently being considered.
- Draft proposals completed outlining delivery of IV Therapies / OPAT at Newton Stewart completed Lead Nurse which will form the basis of plans for other hubs.

- Finance Team audit of equipment left / stored in former ward / hospital areas to confirm value and potential redistribution (limited numbers).
- Community Engagement plan in development to be rolled out by Strategic Planning Colleagues..
- Links made with Art Strategy Group to consider holistic projects to support “feel of the hubs”
- Links made with Third Sector to explore East Renfrew Model front door access into in the community.
- Scoping completed for outpatient services to introduce Mental Health and Women & Children services.
- Early intervention scoping with Active Lives programme

The following risks have been identified:

- Failure to identify services to deliver Virtual Consultations
- Failure to deliver successful well utilised Community Hubs
- Limited finance to undertake any changes that may be required to adapt / enhance facilities

Completion of 3 to 6 months implementation plan to include:

- Finalise Moffat campus following on from GP moves
- Finalise proposals for Day Hospice
- Finalise Outpatient delivery programme with Mental Health & Women & Childrens
- Develop proposals for Third Sector new models for front door of the community
- Engagement with Communities for feedback on initial proposals and priority areas for communities

4. Conclusions

- 4.1 Progress continues as per the requirements of the IJB in October. A number of key areas of delivery have been addressed in ensuring:
- Work to establish the new Moffat GP Practice
 - Home Teams Accommodation provided at each Community Hub
 - Vaccination Accommodation at each Community Hub
 - Scoping work to identify and provide a diverse range of Health & Social Care at these premises

5. Resource Implications

- 5.1 It should be noted, as per the “Risks Identified” that there is no specific budget to support the various plans for implementation of RCRP at this stage.

6. Impact on Integration Joint Board Outcomes, Priorities and Policy

- 6.1 This demonstrates the progress so far in respect of the IJB Outcomes and Priorities of October 2024.

7. Legal and Risk Implications

- 7.1 There are no legal and risk implications identified at this stage.

8. Consultation

- 8.1 Consultation to prior to the IJB decision included a range of stakeholders from across the region including; Dumfries and Galloway Integration Joint Board (or one of its Committees), Dumfries and Galloway NHS Board, Dumfries and Galloway Council, Health and Social Care Senior Management Team, Health and Social Care Governance and Performance Group, Integration Joint Board Strategic Planning Group, Third and Independent Sectors, Third Sector Dumfries and Galloway (www.tsdg.org.uk), Elected Members, Community Councils, General Public
- 8.2 Further “engagement” with communities is being progressed to help shape locally based services.

9. Equality Impact Assessment

- 9.1 This report aligns with the overall EQIA completed for Right Care, Right Place

10. Glossary

EQIA	Equalities Impact Assessment
IJB	Integration Joint Board
RCRP	Right Care, Right Place

Dumfries and Galloway Integration Joint Board



DIRECTION

(ISSUED UNDER SECTIONS 26-28 OF THE PUBLIC BODIES (JOINT WORKING) (SCOTLAND) ACT 2014)

1.	Title of Direction and Reference Number	<i>Reference Number will be added once the direction is formally logged</i>
2.	Date Direction Issued by Integration Joint Board	<i>Date of the IJB Meeting which issued the Direction</i>
3.	Date from which Direction takes effect	<i>Date which is confirmed by the IJB</i>
4.	Direction to	<p><i>This can be either:</i></p> <ul style="list-style-type: none"> • <i>NHS Dumfries and Galloway</i> • <i>Dumfries and Galloway Council</i> • <i>Both</i>
5.	Does this direction supersede, amend or cancel a previous Direction? If yes, include the reference number(s)	<i>This information is required to provide context to the subject of the Direction</i>
6.	Functions covered by Direction	<i>List of all the functions/services to which the Direction relates e.g. Occupational Therapy, Mental Health</i>
7.	Full text of Direction	<i>Outline what you are asking the authorities to carry out (this description should include a consideration of the role of the third sector)</i>
8.	Budget allocated by Integration Joint Board to carry out Direction	<i>Financial information must be provided and will be the resource allocated to NHS DG, DG Council or both to carry out the Direction. The Direction should consider the potential role of the third sector and the financial implications. Where the direction relates to multiple functions the financial allocation for each function needs to be specified. The Direction should also outline any savings to be made.</i>
9.	Desired Outcomes	<i>Detail what the Direction is intended to achieve. Ensure this is linked to</i>

		<i>the Strategic Commissioning Plan, the National Health and Wellbeing Outcomes and any other relevant information.</i>	
10.	Is there a need for engagement with the third sector in delivery of this direction?	<i>YES</i>	<i>NO</i>
		<i>Tick or Cross</i>	<i>Tick or Cross</i>
		<i>If there is a possibility that the service is to be delivered via third sector organisations there should be consultation with the third sector on the design of the service.</i>	
11.	Performance Monitoring Arrangements	<i>Directions will be reported to the relevant IJB Committee on a 6 monthly basis. An annual report of all current Directions will be presented to the IJB</i>	
12.	Date Direction will be Reviewed	<i>Date no more than 1 year in advance</i>	