

ABERDEEN CITY COUNCIL

COMMITTEE	Finance, Policy and Resources
DATE	30 September 2014
ACTING DIRECTOR	Ewan Sutherland
TITLE OF REPORT	Small Financial Assistance Grants 2014/15
REPORT NUMBER	CG/14/119
CHECKLIST RECEIVED	Yes

1. PURPOSE OF REPORT

The purpose of this report is to present applications for financial assistance which have recently been received allowing Elected Members to make a decision on providing funding from the financial assistance budget and to provide information on an event for which funding was previously awarded.

2. RECOMMENDATION(S)

It is recommended that the Committee:-

- i) consider the application received and agree to award grant funding based on the following recommendation:-
 - Middlefield Community Project Women's Group – a maximum of £2,500; and
- ii) consider the briefing note provided by Morag McFadyen, Project Leader on the Anglo-Japan Collaboration – All Together Better Health Conference and:-
 - advise if the attendance of the Project Leader at a future meeting of the Committee is required, and
 - advise whether the remaining funds of £332.39 should be repaid to the Council.

3. FINANCIAL IMPLICATIONS

The awarding and approval of grants and financial assistance is a significant element of council business and as such millions of pounds are paid to external organisations each year. Appropriate and suitable means of approval following the principles of 'Following the Public Pound' require to be maintained in order to ensure Best Value.

There is a sum of £45,000 included in the 2014/15 Council's Revenue Budget for small financial assistance grants.

If the above recommendations were approved the amount committed would be £5,000, leaving £40,000 remaining.

There are no implications for approved PBB options arising from this report.

4. OTHER IMPLICATIONS

The award of grants and financial assistance provide benefits to the City of Aberdeen and its citizens.

5. BACKGROUND/MAIN ISSUES

- 5.1 At the meeting of 6 May 2014 the Committee approved a revised set of assessment criteria for the awarding of small financial assistance grants.

These were as follows:

Small Financial Assistance Grants – Assessment Criteria	
a)	Applications must be for a clear and specific purpose and include relevant background and financial information.
b)	Applications must <u>not</u> be for a purpose already being funded from another Council budget.
c)	Applications which fall within the assessment criteria of another established Council funding budget will be referred to that process.
d)	Applications must <u>not</u> be for a purpose which secured funding from this budget in the previous 12 months.
e)	Applications will only be considered whilst budget remains available.
f)	The award of funding will be limited to a maximum of £2,500.

Small Financial Assistance Grants – Conditions of Award	
a)	Following the committee, the applicant will be informed in writing of the committee decision including the amount awarded, the means of payment and the purpose for which the award was made.
b)	In exceptional circumstances where an award of funding in excess of £2,500 is approved, it will be on the basis that the arrangements in relation to the Local Code of Guidance on Funding External Organisations and Following the Public Pound will require to be put in place.

5.2 Applications:-

- 5.2.1 Middlefield Community Project Women's Group – Further information at Appendix A

An application has been received from the Women's Group of Middlefield Community Project seeking a contribution towards funding 10 people (8 members of the group and 2 staff) visiting Poland in

spring 2015. The estimated cost of the trip is £5,000 and fundraising has so far raised £870 with further events planned which it is estimated will raise a further £1,500.

The project previously received funding (agreed by this committee on 25th July 2013) of £591 to support a trip to Poland for 5 young people at the projects youth flat. This amount represented the balance after fundraising by the project.

It is considered appropriate for this request to be considered under the small financial assistance grants assessment criteria and as it meets the criteria it is recommended that a maximum of £2,500 of funding be awarded.

5.3 **Previous Awards:-**

This committee on 20th February 2014 agreed to award funding of £4,445 to the Anglo-Japan – All Better Together Conference taking place in Pittsburgh, USA on 6th-8th June 2014 subject to the project leader, Morag McFadyen agreeing to provide a briefing note to the committee and attending a future meeting if asked by members following consideration of the briefing note.

These conditions were agreed and regular updates on the financial position were also provided prior to the conference.

The requested briefing note is attached at Appendix B.

6. IMPACT

The Council will, within financial constraints, seek to support individuals, groups and organisations within the City. All applicants will be given equal consideration within the criteria for the award of grants and donations from Council budgets.

This report is likely to be interest to the public as it demonstrates the use of public funds.

7. MANAGEMENT OF RISK

There is a risk that funding provided will not be used for the purpose for which it was awarded.

8. BACKGROUND PAPERS

None

9. REPORT AUTHOR DETAILS

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APPENDIX A

(Received by e-mail from Lillias Leighton, Project Officer, Middlefield Community Project on 21st August 2014)

Application for Miscellaneous Grant from Aberdeen City Council.

Middlefield Community Project, which receives core funding from ACC has a strong focus on work with adults and parents. The Women's group, eight members, have expressed an interest in visiting Poland so that they can learn something about another culture and particularly one which is the native country of a number of Middlefield residents. The Project has two members of staff who are Polish and this has also generated interest. Two members of staff would accompany the group and would hope to set up a visit to a parent and child group in Krackow as well as visiting Auschwitz and the nearby salt mines. Some group members have never been abroad and the trip would be of great interest to them even in the context of air travel. Most group members do not have passports and have not travelled abroad. Group members would arrange their own childcare and would fundraise towards costs.

Fundraising activities so far have involved a sponsored walk which all participated in. A 'Stars in Your Eyes' evening is planned and the George Street Charity Shop is booked for a week. This is a big undertaking for the group and there is a high level of commitment to the proposed Polish trip

We are seeking a contribution to funding to cover the cost of flights for 10 people and the cost of accommodation for four nights in Spring 2015 and entry to the Camp and Salt Mines.

Minibus fuel and airport parking in Edinburgh:£150

Flights from Edinburgh and half board hotel for 4 nights in Krackow:£400x10=£4,000

Lunches for four days in transit/Krackow:£400

Entry to salt mines and Auswicz using public transport: £150

Sundry expenses: £300

Total £5,000 (excluding support with passport fees).

The Women's Group would be most grateful if their request could be considered favourably

Playing games in IPE: A Japanese and Scottish experience

Introduction

This Anglo-Japanese project was based on the World Health Organisation's recommendations on interprofessional working. Academics in the UK and Japan collaborated and shared good practice to develop an innovative international interprofessional educational tool- kit for health and social care undergraduate students. There is a global shortfall in well educated health workers who need to be adept at coping with today's health issues. Interprofessional working is a significant factor in addressing this.

Methods

This was an applied research project which developed piloted and evaluated an interprofessional tool. The four stages of the project are described below.

Stage 1

During a global meeting of interprofessional experts in Kobe Japan October 2012 discussions occurred relating to gaming as a learning strategy within interprofessional education (IPE). The board game, iPEG (Interprofessional Educational Game) was pioneered in Aberdeen and was identified as useful resource to introduce to Japanese students. iPEG introduced the learning objectives of professional roles and responsibilities in memorable learning style.

Stage 2

Monthly Skype meetings allowed the project partners to create a Japanese version of iPEG taking cognisance of cultural and language contexts.

Stage 3

The pilot phase of the project (October 2013) involved Japanese medical students only practising iPEG as an ice breaker to their interprofessional education (IPE).

Stage 4

The Japanese version of iPEG was amended from the pilot phase and implemented in December 2013. Nagoya University has medicine, nursing, and rehabilitation students. In addition five pharmacy students from Meijo University and five social work students from Sendai University were also present. The total number of students participating was 42.

Evaluation

Multi-factorial evaluation was conducted at both the pilot and implementation stages ensuring stakeholders' perspectives were identified. Results indicated successful outcomes for students and staff.

Outcomes

The project demonstrated a unique Anglo-Japanese collaboration, engendering a successful and effective partnership between academics from two Japanese universities and two Scottish universities. In particular the introduction of the Social work students enhanced the learning from the case study and potentially increased the students' teamwork abilities. Results show a significant positive attitudinal change by the medical students towards other professions. Both staff and students evaluated it positively.

The project team's communication involved the use of social media tools which created immediate exchanges of expert opinion between Scotland and Japan at all stages of the project. Informal networks developed and the Japanese universities who assisted with facilitation and evaluation, (Hokkaido; Tokyo; Meijo; Kyushu; Teikyo; Kyoto) have also engaged with iPEG. Interest from non-health professionals demonstrated its potential adaptability for different courses. Future educational developments are progressing from this initial project.

Conclusions

This project has enabled academic international interprofessional working in the field of IPE gaming. The development of new and innovative teaching strategies which had been evidenced in Aberdeen has now benefitted future Japanese health professionals. The team show cased this project at the global All Together Better Health VII (ATBH VII) IPE conference in June 2014, Pittsburgh, USA.

Dissemination of information to university and practice colleagues:

<http://www.rgu.ac.uk/news/interprofessional-education-experts-share-experiences-in-japan>

Funding

This element of the project was allocated £4000 from Aberdeen council which was added to the residual monies of £445. The table below indicates how this was spent.

Flights	Sundari	to Pittsburgh	£848.97	
		Expenses	£118.78	
		Accommodation	£280.22	£1,247.97
	Morag	to Pittsburgh	£849.17	
		Accommodation	£510.95	
		Expenses	£261.69	
		Conference fee \$595	£366.96	£1,988.77
	Jennie	to Pittsburgh	£875.87	£875.87
		Conference fee?		
	Lesley	Expenses Not submitted in time		
	Total		£4,112.61	£4,112.61
	Remaining funds		£332.39	

The project was allocated £5000 from the Sasakawa foundation. The table below indicates how this has been spent.

Item	Project Costs
Travel & Accommodation costs for 2 project team members from Aberdeen to Nagoya return	£2,385.76
Travel & Accommodation costs for 5 students and 1 lecturer from Sendai University to Nagoya return	£1,392.56
Translation costs for evaluation data payable to Dr. Keiko Abe Nagoya University	£855.36
	Total £5000
Additional £3192 from Nagoya University for educational materials	
Additional £1000 from Sendai University	
Additional £1688 from Robert Gordon University, Aberdeen for academic staff time, educational resources and research overheads	
Additional £500 from NHS Grampian	

Additional Information:

The team would like to thank Aberdeen city council for their grant of £4000 not only did this provide sufficient funding to allow all the team to attend the conference but it ensured that Aberdeen’s global reputation in IPE was maintained.

The following table highlights the breadth and depth of material presented by the team in Pittsburgh:

Date	Time	Title of Presentation	Presenters in Pittsburgh
Friday, June 6th	2:15pm to 3:45pm	Oral "International Collaboration - Introduction of the Health Fusion team challenge to Scotland."	Jenny Miller; Karen Allan; Edith Mackintosh; Jenny Wynette; Nicola McLarnon; Sharron Blumenthal; Sundari Joseph; Lesley Diack; Morag McFadyen; Jenni Haxton; Patrick Walker; 5 students from winning team
Friday, June 6th	4:00pm to 5:00pm	Oral Poster "Experiences of Evaluating IPE: A Ten Year Longitudinal Study."	Sundari Joseph; Lesley Diack; Patrick Walker; Morag McFadyen; Jenni Haxton; 3 RGU students
Saturday, June 7th	9:45am to 10:45am	Oral Poster "The Scottish Health and Social Care Team Challenge."	Jenny Miller; Karen Allan; Edith Mackintosh; Jenny Wynette; Nicola McLarnon; Sharron Blumenthal; Sundari Joseph; Lesley Diack; Morag McFadyen; Jenni Haxton; Patrick Walker; 5 students from winning team
Saturday, June 7th	11:00am to 12:30pm	Oral "Playing games in interprofessional education: A Japanese and Scottish Experience."	Sundari Joseph; Lesley Diack; Morag McFadyen; Jen Haxton; Patrick Walker; Keiko Abe; Hiroki Yasui
Saturday, June 7th	3:30pm to 4:30pm.	Oral Poster "Virtual Interprofessional Education in Remote and Rural Settings: an Australian and Scottish Experience."	Sundari Joseph; Lesley Diack; Margo Brewer; Morag McFadyen; Jen Haxton; Patrick Walker;
Saturday, June 7th	3:30pm to 4:30pm.	Oral Poster "Perceptions of Pharmacy Students, Pharmacists and Pharmacy Faculty in Qatar to Interprofessional Education and Collaborative Practice"	Alla El-Awaisi; Lesley Diack; Sundari Joseph Morag McFadyen; Jen Haxton; Patrick Walker;
Saturday June 7th,	4:30-7:30pm	ATBH VII International Health Care Team Challenge	Jenny Miller; Karen Allan; Edith Mackintosh; Jenny Wynette; Nicola McLarnon; Sharron Blumenthal; Sundari Joseph; Lesley Diack; Morag McFadyen; Jenni Haxton; Patrick Walker; 5 students from winning team

'Playing games in interprofessional education: A Japanese and Scottish Experience' was extremely well received at the ATBH VII.





We took advantage of the opportunity to give a collaborative Japanese-Aberdeen presentation. With all members of the team participating fully illustrating the interprofessional and collaborative working of the team.

We ended the session with a final slide illustrating our Japanese students reflection of the their experience in the December workshops – “Team Harmony”



Following our presentation several countries have elicited an interest in taking this novel Aberdeen initiative forward and the team are looking forward to fruitful discussion with them.

During the conference we were able to fully support our Japanese collaborators as they presented some of their research to the conference. As English is not their native language we were able to provide guidance and moral support something both halves of the team appreciated and enjoyed.



In addition, we had time during the conference, usually our free time over lunch, to develop the second phase of our project and timetable submission to the Sasakawa foundation for a further grant.

I’m delighted to say that we were successfully and unique in the respect that we are the first to receive further funding from Sasakawa for a project of this nature.



We have already commenced the second phase of the project as can be seen from the recent visit of our Japanese colleagues in preparation of our joint webinar between Japan and Aberdeen for World Diabetes Day in Novemebr 2014.



During the visit the team were able to set up Blackboard collaborate and develop the forthcoming session in November This involved all memebers of the team both in Aberdeen and Japan. We have now piloted the system and are happy that the webinar will run as expected.



We were fortunate to have the time to introduce our Japanese colleagues to Aberdeen and the wider area whilst they were here.

As mentioned above our participation at the ATBH VII has reinforced Aberdeen’s global recognition in IPE something which was clearly demonstrated when our health care students were given a standing ovation when they presented their reflections and thoughts of interprofessional education as part of the Scottish Health Care Team Challenge.



Some other thoughts from the conference. Over 1000 people attended the conference

Keynote meeting: Sir David Nicholson in NHS England

- 1m people in 36 hours 90% plus satisfied. 75% happy to be part of NHS
- How to improve services for patients? Most important issue. If lose focus then problems.
- Need to do three things
 - Quality of service
 - Good care
 - Good surgery need for good technical surgeon
- Best outcome - need to know the signs. And symptoms
 - Primary care can diagnosis and start care
 - Quick access to secondary care
 - Multi disciplinary team to decide on treatment
 - Good surgery
 - Then best after care.
- Need for clinical involvement in health care decision making
- Commissioned research into team working - Michael West research
- Annual patient and staff survey. Over 90% staff say they work in teams. They measure what they do and set themselves. Effective teams set objectives and make them common objectives. Need to organise properly. Take team working seriously it is at the heart of team work. Better predictor of less mortality.
- For the future
 - 1000 recommendation for improving health care.
 - Listen to patients and staff and should improve health care.
 - Investing in technology to improve patient care.
 - Improve primary care for people with long term conditions help to stop going into hospital.
- People with chaotic lifestyles need to organise them better and services.
- Accident and emergency needs to be better organised. Complex system difficult to find better ways.
- 31 hospitals that used to treat stroke now only 8 hospitals but better results and outcomes.
- 300 organisations for tertiary care. Again if centralise improve services.
- Always mentioned cost first before services.
- Need to change organisations - a more facilitative way of organising.